

ABSTRACT

Background: Ovarian carcinoma is on the seventh place of the most common cancers and the third most common cause of death in women. The most common type of ovarian carcinoma is epithelial ovarian carcinoma. It accounts for about 90% of all ovarian carcinomas. One of the prognostic factors in this case is histological subtype of ovarian carcinoma. Based on its histological subtypes, epithelial ovarian carcinoma is classified into type I and type II. Each subtype represents a different gene variation and a different molecular pathogenesis. Therefore, clinical manifestations and survival outcome may differ.

Objectives: This study aims to understand the effect of histological subtypes of ovarian carcinoma on overall survival of patients who underwent primary surgery in RSUP Dr. Sardjito. **Methods:** A retrospective cohort study was conducted using secondary data from the medical records of ovarian carcinoma patients who underwent primary surgery at RSUP Dr. Sardjito in 2017. Patient outcomes were assessed up until 2022. **Results:** The study included 98 patients. The Kaplan-Meier Survival Curves showed that there were minor variations in mean survival times (60.6 months for EOC Type I and 63.3 months for Type II). The risk of death for Type I EOC was 43% higher than for Type II, but it's not statistically significant ($p = 0.44$). The Cox proportional hazards regression analysis found no significant impact of histological subtype on overall survival across different EOC stages, comorbidity statuses, and age groups, as all p -values were above 0.05. **Conclusion:** There was neither statistically nor clinically significant effect of histological subtype of EOC on the overall survival of patients who underwent primary surgery at RSUP Dr. Sardjito. However, patients' comorbidities showed as the most significant prognostic factor of EOC.

Keywords: ovarian carcinoma, prognosis, primary surgery, serous, non-serous, survival