

Supplementary Table S 5. Endometrial Cancer Risk groups¹

Risk group	Description^a
Low risk	Stage IA (G1 and G2) with endometrioid (MMRd ^b and NSMP) type and no or focal LVSI
	Stage I/II <i>POLE</i> mut cancer; for stage III <i>POLE</i> mut cancers ^c
Intermediate risk	Stage IA G3 with endometrioid type (dMMR and NSMP) and no or focal LVSI
	Stage IA non-endometrioid (serous, clear-cell, undifferentiated carcinoma, carcinosarcoma, mixed) and/or p53-abn cancers without myometrial invasion and no or focal LVSI
	Stage IB (G1-G2) with endometrioid type (dMMR and NSMP) and no or focal LVSI
	Stage II G1 endometrioid cancer (dMMR and NSMP) and no or focal LVSI
High-intermediate risk	Stage I endometrioid (dMMR and NSMP) any grade and any depth of invasion with substantial LVSI
	Stage IB G3 with endometrioid type (dMMR and NSMP) regardless of LVSI
	Stage II G1 endometrioid cancer (dMMR and NSMP) with substantial LVSI
	Stage II G2-G3 endometrioid cancer (dMMR and NSMP)
High risk	All stages and all histologies with p53-abn and myometrial invasion
	All stages with serous or undifferentiated carcinoma including carcinosarcoma with myometrial invasion
	All Stage III and IVA with no residual tumour, regardless of histology and regardless of molecular subtype ^b

dMMR, mismatch repair deficient; EC, endometrial cancer; G1-G3, grade 1-3; IHC, immunohistochemistry; LVSI, lymphovascular space invasion; MSI-H, microsatellite instability high/hypermethylated; NSMP, no specific molecular profile; p53-abn, p53-abnormal; *POLE*mut, polymerase epsilon-ultramutated.

^aStage III-IVA if completely resected without residual disease; table does not apply to stage III-IVA with residual disease or for stage IV.

^bdMMR and MSI-H: Both terms identify a similar EC population. Identification of a defective mismatch repair pathway by IHC (i.e. dMMR) or sequencing to determine microsatellite instability (i.e. MSI-H).

^c*POLE*mut stage III might be considered as low risk. Currently there are no data regarding safety of omitting adjuvant therapy.

Reference

- 1 Oaknin A, Bosse TJ, Creutzberg CL et al. Endometrial cancer: ESMO Clinical Practice Guideline for diagnosis, treatment and follow-up. *Ann Oncol* 2022.