**Appendix 1. Identification of scientific evidence**

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| Litterature search in MEDLINE |
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| Research period | 1980/01/01 - 2015/09/01 |
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|  |  |
| Indexing terms | accuracy, adverse effects, bilateral en bloc dissection, biopsy, chemotherapy (primary, neoadjuvant, adjuvant), chemoradiation (primary, neoadjuvant, adjuvant), chemotherapeutic agents, detection rate, diagnosis, en bloc dissection, exenteration (anterior, posterior, total), follow-up, frozen sections, groin lymph node involvement, groin node metastasis, histology, histological examination, imaging, inguinofemoral lymph node dissection, laboratory testing, local excision, lymph node dissection, lymphadenectomy, (inguinofemoral or deep, inguinal or superficial, ipsilateral, pelvic), lympho-vascular invasion, margin, node dissection, operation, pathology, pathology report, pelvic-lymph node dissection, perioperative care, physical examination, postoperative complications, preoperative care, preoperative workup, quality of life, radiotherapy (primary, neoadjuvant, adjuvant), radiation (primary, neoadjuvant, adjuvant), radical local excision, reconstructive surgery, sensitivity, sentinel lymph node assessment, sentinel lymph node biopsy, sentinel lymph node dissection, specificity, staging, surgical management, surgical outcome, surgical procedures, surgical resection, surveillance, survival rate, survival analysis, systemic treatment, targeted therapy, toxicity, treatment outcome, tumour margin, vulvar cancer (early and/or advanced stages), vulvectomy (radical, simple, modified, hemi) |
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| Language | English |
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| Study design | Priority was given to high-quality systematic reviews and meta-analyses but lower levels of evidence were also evaluated. The search strategy excluded editorials, letters, case reports and in vitro studies |
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