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ORIGINAL ARTICLE

Current status of ovarian cancer in the Spanish Province of Castellon. Prognostic factors in observed and relative survival. A population cancer-registry-based study between 2004 and 2008



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KEYWORDS

Ovarian cancer; Survival; Prognosis; Cancer registry

Abstract

Background: The aim of this population-based study was to assess independent prognostic factors in ovarian cancer by analyzing observed and relative survival in a representative Spanish population.

Methods: We carried out a retrospective, observational, population-registry-based study. Data on 207 patients with ovarian cancer were provided by the Castellon Cancer Registry. Observed and relative survival were described at 1, 3 and 5 years. The effect of prognostic factors on survival was assessed with univariate and multivariate analyses.

Results: The median follow-up was 40.8 months (range: 12—108 months). Observed and relative survival rates at 1, 3 and 5 years were 79%, 51%, 33%, and 84%, 58%, 40%, respectively. Age older than 70 years showed worse observed survival in the univariate and multivariate analyses. Only FIGO stage was an independent prognostic factor for observed and relative survival.

Conclusions: Survival is poor in patients with ovarian cancer. In our population-registry-based study, only age at diagnosis and FIGO stage were independent prognostic factors for observed survival, whereas only FIGO stage could be considered a prognostic factor for relative survival.

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PALABRAS CLAVE

cáncer de ovario; Supervivencia; Pronóstico; Registro de cáncer Estado actual del cáncer de ovario en la provincia de Castellón. Factores pronósticos en la supervivencia observada y relativa. Un estudio basado en registros poblacionales de cáncer de entre 2004 y 2008

Resumen

Antecedentes: El objetivo de este estudio poblacional fue evaluar los factores pronósticos independientes de cáncer de ovario mediante el análisis de la supervivencia observada y relativa en una población española representativa.

Métodos: Se realizó un estudio retrospectivo, observacional, y basado en un registro de población. Los datos de 207 pacientes con cáncer de ovario proceden del Registro de Cáncer de Castellón. Se describió la supervivencia observada y relativa a 1, 3 y 5 años. El efecto de los factores pronósticos en la supervivencia se evaluó mediante análisis univariantes y multivariantes.

Resultados: La mediana de seguimiento fue de 40,8 meses (intervalo: 12-108 meses). Las tasas de supervivencia observada y relativa a 1, 3 y 5 años fueron de 79%, 51% y 33% y de 84%, 58% y 40%, respectivamente. La edad superior a los 70 años mostró la peor supervivencia observada en los análisis univariantes y multivariantes. Sólo el estadio en la clasificación FIGO fue un factor pronóstico independiente de la supervivencia observada y relativa.

Conclusiones: La supervivencia en los pacientes con cáncer de ovario es limitada. En nuestro estudio basado en un registro de población, sólo la edad en el momento del diagnóstico y el estadio de FIGO fueron factores pronósticos independientes para la supervivencia observada, mientras que sólo el estadio de la FIGO se podría considerar un factor pronóstico en la supervivencia relativa.

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Introduction

Ovarian cancer accounts for 5% of all cancers among women and causes more deaths than any other female genital tract cancer. In Spain (Europe) approximately 8/100,000 habitants will develop ovarian cancer. Ovarian cancer is often diagnosed at an advanced stage, and about 70–80% of them will be found at an advanced stage. For this group of patients 5-year-survival is lower than 20%.

Several prognostic factors for ovarian cancer have been studied and reported in an attempt to increase tumor-free survival. The most important and constant prognostic factors reported have been International Federation of Gynecology and Obstetrics (FIGO) stage, size of residual tumor after primary surgery and age at diagnosis. Other variables, such as time period, histological type and grade, performance status, preoperative CA 125 levels or other molecular markers seem not to be so predictive. 4–6

The main objective of this population registry cancerbased study was to evaluate prognostic factors for ovarian cancer survival in the European Province of Castellon (Spain) during the period 2004–2008.

Methods

The Province of Castellon is located in the Comunitat Valenciana at the Mediterranean coast in the East of Spain (Europe). The population of Castellon officially reached 604,333 people in 2011, as recorded by the National Statistics Institute of Spain. Although most patients with ovarian cancer are treated in the Castellon University

General Hospital — where this study was conducted — there are also 3 public hospitals and 1 private hospital in this province.

According to the Castellon Cancer Registry, follow-up period was since 1 January 2004 to 31 December 2012. The Castellon Cancer Registry Database was used to identify eligible ovarian cancer patients. This population cancer registry is included in the EUROCARE study. Out of a total of 236 patients with ovarian cancer in the database diagnosed between 1 January 2004 and 31 December 2008, there were 207 finally analyzed due to excessive missing data in 29 cases. Patients without histological confirmation and those with borderline cancers or cancers with a low malignant potential were excluded. The incidence rate was adjusted to standard world's population and it is reported as the new diagnosed cases per 100,000 person-year.

The following available variables were studied: age at diagnosis, FIGO stage, ¹ histology and grade of differentiation (according to the WHO classification). ⁸ For this study, histological types were grouped in several groups according to a condensed IARC-classification. ⁹ The data analysis was approved by our Ethical and Clinical Investigation Committee.

Statistical analysis

Quantitative variables were defined as median and range. Qualitative variables were described as frequency and percentages. To calculate Expected survival for a similar population without ovarian cancer Ederer's method was used adjusting women's mortality tables by age and year in the Comunitat Valenciana for the period 2004—2008, obtained from the National Statistics Institute of Spain. Observed survival was defined as time between diagnosis and date

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