

Cervical adenocarcinoma in young women versus older women: A five and ten-year hospital-based survival study in Brazil.

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INTRODUCTION

The clinical practice hypothesized that young women with cervical adenocarcinoma have worse prognosis than older ones. However, there is no evidences supporting this hypothesis. **Aim.** To estimate a 5- and 10-year survival according to age, and death-risk-associated factors, in a cohort of women diagnosed with cervical adenocarcinoma treated in the National Cancer Institute(INCA) in Brazil.

MATERIALS AND METHODS

A retrospective prognostic study was carried out in a hospital-based cohort of women diagnosed with cervical adenocarcinoma and treated in the Hospital of Cancer-II/INCA. From Jan/1999 to Dec/2012, 1060 women were included. Five- and 10-year survival curves were estimated by the Kaplan-Meier method. Differences between survival curves were assessed by *log-rank test*(IC95%). Prognostic factors were assessed by the Proportional Cox Regression semi-parametric method. The 95%CI for crude and adjusted Hazard Ratios were estimated by the Wald test.

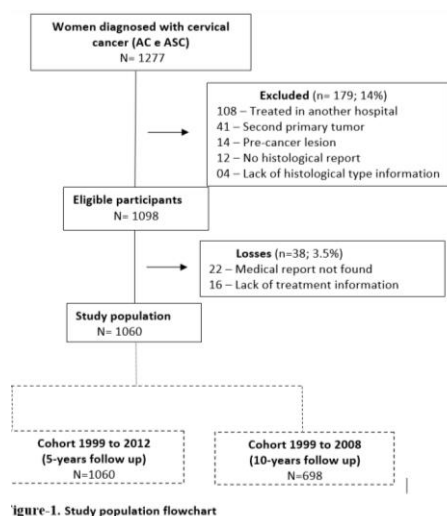


Figure-1. Study population flowchart

RESULTS

Five-year survival was 45.4%, ranging from 62.6% among women aged 18-44 to 40.1% among ≥ 56 years old. A 10-year specific survival was 50.1%, ranging from 61.6% in women aged 18-44-yr/o to 39.8% in those ≥ 56 -yr.

Table 5. Proportional Cox regression model for 5 and 10 years death risk in a hospital-based cohort of Brazilian women diagnosed with cervical adenocarcinoma.

Variable	5-years follow up		10-years follow up	
	Adjusted HR ^a	95%CI	Adjusted HR ^a	95%CI
Age				
18 to 44 years	1.25	0.95 – 1.64	1.22	0.83 – 1.78
45 to 55 years	1		1	
56+ years	1.25	0.97 – 1.61	1.49	1.04 – 2.15
Stage (FIGO)				
I	1		1	
II	1.67	1.17 – 2.40	2.35	1.41 – 3.92
III	3.10	2.12 – 4.55	5.69	3.26 – 9.92
IV	3.03	1.71 – 5.36	5.93	2.49 – 14.11
Histological grade				
G1	1		1	
G2	1.09	0.81 – 1.48	1.07	0.69 – 1.67
G3	1.65	1.21 – 2.27	2.13	1.37 – 3.32
Treatment protocol				
Surgery (with/without chemo + radiation)	1		1	
Radiation (with/without chemotherapy)	1.38	0.97 – 1.97	1.41	0.87 – 2.28
Chemo only/no treatment	3.13	1.98 – 4.95	3.85	1.96 – 7.54
Number of pregnancy				
0-1	1		-	-
3 to 4	0.73	0.55 – 0.96	-	-
5+	1.11	0.87 – 1.42	-	-
Education (years)				
12+	1		1	
0-11	0.87	0.54 – 1.41	1.46	0.46 – 4.65
Illiterate	1.05	0.62 – 1.79	1.42	0.42 – 4.75
Marital status				
With a partner	-	-	1	
No partner	-	-	1.50	1.12 – 2.10
Skin color				
White	-	-	1	
Non-white	-	-	1.43	1.08 – 1.91

^aHR = Hazard Ratio adjusted by all other Variables in the model;

Bold font = statistically significant values.

-2Log-Likelihood: 4190.249 to 5-years follow up model; -2Log-Likelihood: 1976.892 to 10 years follow up model.

CONCLUSIONS

Despite the lack of statistical significance, women aged 18-44 years seemed to present a 25% worse prognosis in 5 years than women aged 45-55 years, but in 10 years those 56+ years presented a worse prognosis. Besides Stage, grade, and treatment, women with 3-4 pregnancies were protected against death in 5 years, while lack of a partner and non-white skin color increased death risk in 10 years.

Disclosure: The authors declare no conflict of interest