

THE PROGNOSTIC VALUE OF T STAGE AND LYMPHOID METASTASIS IN PATIENTS WITH STAGE 3 COLON CANCER

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Introduction - Purpose : Colorectal cancer (CRC) is the third most commonly diagnosed cancer in males and the second in females. Pathologic stage is the most indicator of outcome following resection of colorectal cancer. In the AJCC TNM staging system, N stage is more prominent than T stage. Our aim of this study was to compare the prognostic significance of T stage and N stage of colorectal cancer with stage III.

Methods - Tools : We retrospectively evaluated 475 patients operated with the diagnosis of stage 3 colon cancer between 1990-2014 in Marmara University. All patients diagnosed with colon cancer were confirmed by histologic pathology. The patients were stratified into four groups as T4N2, T4N1, T1-3N2, and T1-3N1 according to T and N stage. Chi square test was performed for categorical variables. Survival rates were calculated using the Kaplan-Meier method, and the differences between the groups were assessed by the log-rank test.

Findings : Of the patients, 38 were in T4N2, 44 were in T4N1, 103 were in T1-3N2 and 290 were in T1-3N1 group. The median follow-up time was 49 months. Relapse rates during follow-up were 21/38 (%55.3), 21/44 (%47.7), 34/103 (%33) and 92/290 (%31.7) in patients with T4N2, T4N1, T1-3N2 and T1-3N1 respectively (p=0.01). Median DFS time in patients with T4N2 was 24 months (16.5-31.4 %95CI), while those with T4N1 was 37.5 months (26-49 %95 CI). The median OS was 42.5 months (17-68) and 74 months (51-96) in patients with T4N2 and T4N1 respectively. The ratio of local recurrence in patients with T4N2 (%23,7) and T4N1 (%18,2) groups was significantly higher than in patients with T1-3N2 (%8,7) and T1-3N1 (%10,3) groups

($p=0,038$). The ratio of peritoneal carcinomatosis, like local recurrence ratios, were significantly higher in the T4N2 (%15,8) and T4N1 (%9,1) groups than T1-3N2 (%2,9) and T1-3N1 (%4,6) groups ($p=0,002$).

Discussion : We found in this study that, the patients with similar T stages have comparable relapse rates and survival times irrespective of lymph node stage. However, in patients with similar N stages, those with T4 stage were more likely to have higher recurrence rate and worse survival times compared with those with T1-3 stage disease.

Keywords: colorectal cancer, stage III,