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Survival after laryngectomy: a review of 133 patients with laryngeal carcinoma.

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Abstract

Survival trends in survival for laryngeal cancer in Europe are varied. Five-year survival varied around 60-64% but numbers below 50% have been commonly reported. The aim of this study was to assess the factors influencing survival in patients with laryngeal cancer in our region. A total of 128 male and 5 female patients with larynx cancer (91 glottic and 42 supraglottic) were treated at Patras University Hospital between March 1992 and August 2004. Except 3, all were smokers and 56 (41%) heavy alcohol users. Postsurgical staging showed that most had been classified at stages III (38%) and IV (49%). By histology, 31 tumors were classified as poorly differentiated, 78 as moderately differentiated and 23 as well differentiated. All patients underwent laryngectomy with extension of the procedure where appropriate. Also, a total of 45 patients received adjuvant therapy (either chemotherapy or radiotherapy). Farmers, construction workers, professional drivers and mechanics and coffee shop and bar employees account for more than 70% of patients. Results showed that 64 (48.1%) patients died during the follow-up, 58 (43.6%) of them died from cause related to their disease. With a median follow-up of 25 months, the 5-year disease-free survival (DFS) was 53% and the 5-year overall survival (OS) was 45%. Significant prognostic factors for OS included patient age, advanced staging, heavy alcohol use and poor tumor differentiation while for DFS affected mainly by poor tumor differentiation. We conclude that the disease stage at presentation, tumor grade and alcohol consumption prove to be important predictors for the OS as well as the DFS in our series.