



3-YEAR AND 5-YEAR SURVIVAL RATE OF PATIENTS WITH CERVICAL CANCER WHO COMPLETED CONCURRENT CHEMORADIOTHERAPY IN UST HOSPITAL BENAVIDES CANCER INSTITUTE

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Objectives. The primary objective of this study is to determine the 3-year and 5-year survival rates and prognostic factors of patients with stage IB1 - IVA cervical cancer after concurrent chemoradiotherapy.

Methodology. The population for this study includes patients with Cervical cancer FIGO Stage IB1-IVA who underwent concurrent chemoradiotherapy in the Benavides Cancer Institute of the University of Santo Tomas Hospital between January 2009 – December 2014. The medical records of 161 patients with Cervical Cancer were reviewed and analyzed. A total of 20 patients were excluded because they were no able to meet the criteria: 11 patients completed chemoradiotherapy however did not have regular follow-up, and 9 patients did not complete their chemoradiotherapy. In the final analysis only 141 patients were included. Multivariate analysis using Cox proportional hazards regression model was performed to predict the significant effect on overall survival of patients based on the age, gravidity, stage, tumor size, histologic grading and the clinical response.

Results. The following prognostic factors were found to be significant for the 3-year and 5-year survival rates of patients with cervical cancer: a.) stage of the disease, b.) size of the tumor, c.) histologic grading and d.) response to treatment. For the 3-year survival rate, Stage 1B1-IIA had a 90.30% survival rate, 90.91 % for tumor size of less than 2.0cm, 86.4% for a well differentiated histologic grading and 96.66% for complete remission after treatment. For the 5-year survival rate: 90.30% for Stage 1B1-IIA, 90.91% for tumor size of less than 2.0cm, 74.18% for a well differentiated histologic grading and 88.93% for those with complete remission. The staging and tumor size factors are correlated having a high survival rate for both 3-years and 5-years. The most common complications encountered were vesicovaginal fistula found in 4.96% of patients and obstructive uropathy in 4.26% of patients.

Conclusion. Significant prognostic factors that determined the survival rates of patients with Cervical Cancer Stage IB1- IVA were the stage of the disease, size of the tumor, histologic grading and response to treatment. Most of the patients with cervical cancer who underwent concurrent chemoradiotherapy had no complications; however, a few developed vesicovaginal fistula and obstructive uropathy.

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