Munich Cancer Registry



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ICD-10 C74: Adrenal cancer



Survival

Munich Cancer Registry Cancer Registry Bavaria - Upper Bavaria Regional Center at Klinikum Grosshadern/IBE Marchioninistr. 15 Munich, 81377 Germany

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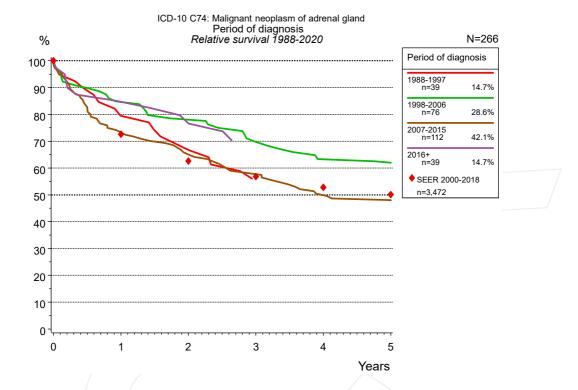


Figure 1a. Relative survival of patients with adrenal cancer by period of diagnosis. Included in the evaluation are 266 cases diagnosed between 1988 and 2020.

The survival results of the SEER program (Surveillance, Epidemiology, and End Results) of the American National Cancer Institute (NCI) are summarized as the period of diagnosis from 2000 to 2018, and are represented by colored diamonds in order to facilitate comparisons between MCR and SEER.

The presented survival curves are derived from clinical records with valid follow-up informations, which means that death certificate cases (DCO) cases are omitted from the analysis. With this one restriction, the MCR has provided populationbased statistics since 1998, collecting data on all cancer cases in the region of southern Bavaria. Historical data of previous time periods can be heavily selected, therefore, univariate survival comparisons of the presented time periods must be carefully considered. Nonetheless, all calculable survival curves are depicted to facilitate the comparison of long time follow-up analyses of relative survival between particular cancers.

Period of diagnosis								
	1988-1997		1998-	2006	2007-	2015	2016+	
	n=39		n=	76	n=1	12	n=:	39
Years	obs. %	rel. %	obs. %	rel. %	obs. %	rel. %	obs. %	rel. %
0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
1	79.0	79.5	83.9	84.6	72.3	73.3	84.5	84.6
2	68.5	66.7	77.1	78.1	64.2	65.0	78.6	76.6
3	55.2	55.9	69.0	69.8	56.1	57.7		
4	55.2	53.5	60.9	63.3	48.0	49.8		
5			59.5	61.9	45.2	48.0		
Median			7.4		3.7			

Table 1b. Observed (obs.) and relative (rel.) survival of patients with adrenal cancer by period of diagnosis for period 1988-2020 (N=266).

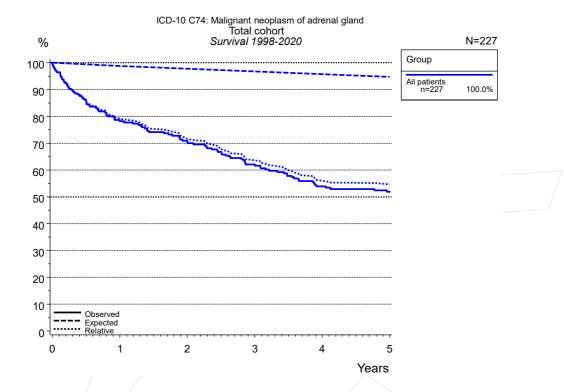


Figure 2a. Observed, expected and relative survival of the total cohort with adrenal cancer. Included in the evaluation are 227 cases diagnosed between 1998 and 2020.

Group			
All patients			
	n=2	227	
Years	obs. %	rel. %	
0	100.0	100.0	
1	78.2	79.2	
2	70.9	71.6	
3	62.1	63.7	
4	53.9	56.0	
5	51.9	54.7	
Median	5.7		

Table 2b. Observed (obs.) and relative (rel.) survival of the total cohort with adrenal cancer for period 1998-2020 (N=227).



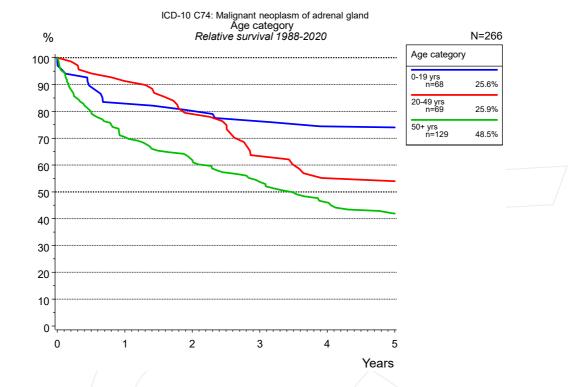


Figure 3a. Relative survival of patients with adrenal cancer by age category. Included in the evaluation are 266 cases diagnosed between 1988 and 2020.

	Age category						
		0-19) yrs	20-4	9 yrs	50+	yrs
		n=68		n=	n=69		129
	Years	obs. %	rel. %	obs. %	rel. %	obs. %	rel. %
	0	100.0	100.0	100.0	100.0	100.0	100.0
	1	83.4	82.9	91.2	91.2	68.9	70.4
	2	80.4	80.2	79.3	79.0	60.9	61.8
	3	77.4	76.3	63.4	63.3	51.1	53.7
	4	74.3	74.4	54.9	55.1	42.9	46.0
	5	74.3	74.0	54.9	54.0	37.6	41.9
	Median			6.3		3.1	

Table 3b. Observed (obs.) and relative (rel.) survival of patients with adrenal cancer by age category for period 1988-2020 (N=266).



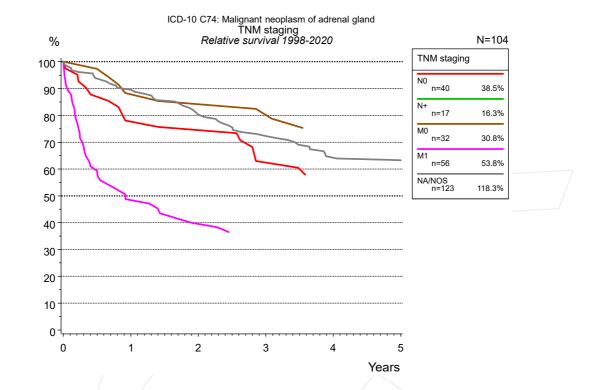


Figure 4a. Relative survival of patients with adrenal cancer by TNM staging. For 127 of 227 cases diagnosed between 1998 and 2020 valid data could be obtained for this item. For a total of 104 cases an evaluable classification was established. The accumulated percentage exceeds the 100 % value because patients are potientially considered in more than one subgroup. The grey line represents the subgroup of 123 patients with missing values regarding TNM staging (54.2 % of 227 patients, the percent values of all other categories are related to n=104). Subgroups with sample size <20 are omitted from the chart.

				TN	NM staging					
NO		0 M0		M1		NA/NOS				
		n=40		n=32		n=56		n=123		
	Years	obs. %	rel. %	obs. %	rel. %	obs. %	rel. %	obs. %	rel. %	
	0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	
	1	77.5	77.7	87.5	87.8	48.2	48.4	88.4	89.6	
	2	74.9	74.5	84.3	84.2	39.3	39.5	79.9	80.2	
	3	62.0	62.4	80.6	80.2			70.5	72.3	
	4	56.8	57.4					61.6	64.2	
	5	56.8	56.4					59.7	63.3	
	Median					0.9		9.3		

Table 4b. Observed (obs.) and relative (rel.) survival of patients with adrenal cancer by TNM staging for period 1998-2020 (N=104).

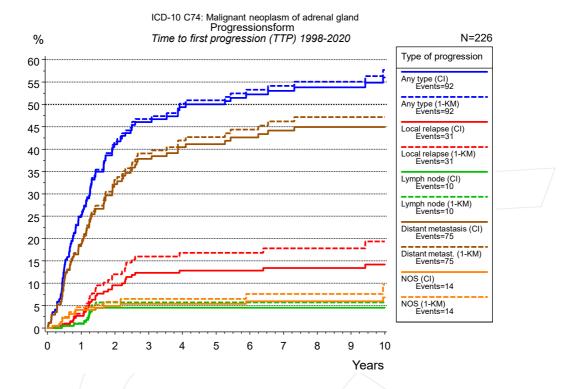


Figure 5a. Time to first progression of 226 patients with adrenal cancer diagnosed between 1998 and 2020 (in solid cancers M0 only) estimated by cumulative incidence function (CI, solid line) accounting for death as competing risk and by inverse Kaplan-Meier estimate (1-KM, dashed line). The frequency of events may be underestimated due to underreporting.

	Type of progression							
	Any type (CI)	Any type (1- KM)	Local relapse (CI)	Local relapse (1-KM)	Lymph node (CI)	Lymph node (1-KM)	Distant metastasis (CI)	
N	172	172	226	226	226	226	172	
Events	90	90	30	30	10	10	73	
compet.	12		95		113		20	
Years	%	%	%	%	%	%	%	
0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	
1	25.4	25.6	2.7	3.2	0.9	1.1	18.9	
2	41.1	41.7	9.5	12.0	4.5	5.7	32.2	
3	46.1	46.7	12.3	16.0	4.5	5.7	37.8	
4	49.4	50.2	12.8	16.8	4.5	5.7	40.4	
5	50.0	50.9	12.8	16.8	4.5	5.7	41.1	
6	52.3	53.3	12.8	16.8	4.5	5.7	42.6	
7	53.0	54.1	13.4	17.8	4.5	5.7	44.2	
8	53.8	55.1	13.4	17.8	4.5	5.7	45.0	
9	53.8	55.1	13.4	17.8	4.5	5.7	45.0	
10	56.1	57.7	14.2	19.4	4.5	5.7	45.0	

Type of progression									
cont'd	Distant metast. (1- KM)	NOS (CI)	NOS (1-KM)						
N	172	226	226						
Events	73	14	14						
compet.		113							
Years	%	%	%						
0	0.0	0.0	0.0						
1	19.2	4.0	4.6						
2	33.1	4.9	5.8						
3	39.0	5.4	6.5						
4	41.9	5.4	6.5						
5	42.7	5.4	6.5						
6	44.4	6.0	7.6						
7	46.2	6.0	7.6						
8	47.2	6.0	7.6						
9	47.2	6.0	7.6						
10	47.2	6.8	9.6						

Table 5b. Time to first progression of patients with adrenal cancer for period 1998-2020 (N=226), also showing the total of progression events (Events) and of deaths as competing risk (compet.).



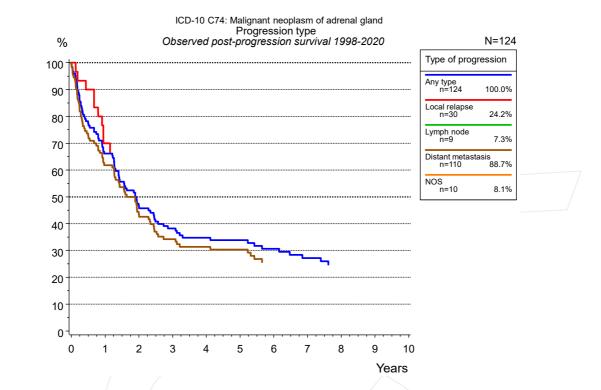


Figure 5c. Observed post-progression survival of 124 patients with adrenal cancer diagnosed between 1998 and 2020. These 124 patients with documented progression events during their course of disease represent 54.9 % of the totally 226 evaluated cases (incl. M1, n=54, 23.9 %). Patients with cancer relapse documented via death certificates only were excluded (n=22, 9.7 %). Multiple progression types on different sites are included in the evaluation even when not occuring synchronously. The NOS (not otherwise specified) class is included under the condition, that it is the one and only progression type during the course of disease. Subgroups with sample size <20 are omitted from the chart.

Medical record documentation often lacks the linguistic severity to distinguish between local relapse, regional lymph node metastasis and distant spread in solid cancers. Frequently, the statement "not specified" is the only information in registries regarding relapse of the disease. The category "Any type" denotes all cases who suffered from at least one relapse during the course of disease (incl. primary M1-status). Although, the real number of relapsed patients is likely to be much higher. The accumulated percentage of patients with local relapse or distant metastasis exceeds the 100 % value because patients are potientially considered in more than one subgroup.

	Type o	f progressior	1
	Any type	Local relapse	Distant metastasis
	n=124	n=30	n=110
Years	%	%	%
0	100.0	100.0	100.0
1	66.1	70.0	61.8
2	46.6		43.5
3	38.2		34.2
4	34.8		31.4
5	33.9		30.3
6	30.6		25.6
7	27.2		

Table 5d. Observed post-progression survival of patients with adrenal cancer for period 1998-2020 (N=124).

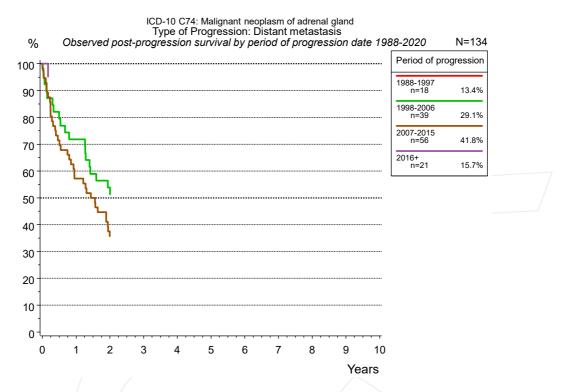


Figure 5e. Observed post-progression (distant metastasis) survival of 134 patients with adrenal cancer diagnosed between 1988 and 2020 by period of progression.

Period of progression						
	1998-2006	2007-2015	2016+			
	n=39	n=56	n=21			
Years	%	%	%			
0	100.0	100.0	100.0			
1	71.8	57.1				
2	53.8	35.7				

Table 5f. Observed post-progression (distant metastasis) survival of patients with adrenal cancer for period 1988-2020 by period of progression (N=134).

Shortcuts

MCR	Munich Cancer Registry, Germany							
NCI	National Cancer Institute, USA							
SEER	Surveillance, Epidemiology, and End Results, USA							
UICC	Union for International Cancer Control, Geneva							
DCO	Death certificate only	Death certificate provides the only notification to the registry.						
NA	Not available							
NOS	Not otherwise specified							
OS	Overall/Observed survival	Overall/Observed survival (Kaplan-Meier estimate) Date of entry: diagnosis Event: death from any cause						
RS	Relative survival	Survival compared to "general population", ratio of observed to expected survival (Ederer II method), reflecting cancer specific survival						
AS	Assembled survival	Assembled chart of observed, expected, relative survival						
CS	Conditional survival	Survival probability under the condition of surviving a given period of time						
TTP	Time to progression	Time to first progression / relapse Date of entry: diagnosis Event: (progression / relapse): first local-, lymph node recurrence, distant metastasis or unspecified progression						
	1-КМ	1 minus Kaplan-Meier estimator ("inverse" Kaplan-Meier estimator)						
	CI	Cumulative incidence Death as competing risk (according to Kalbfleisch und Prentice)						
PPS	Post-progression survival	Survival since first progression / relapse (Kaplan-Meier estimate) Date of entry (progression / relapse): first local-, lymph node recurrence, distant metastasis or unspecified progression Event: death from any cause						

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