Munich Cancer Registry



- Incidence and Mortality
- Selection Matrix
- Homepage
- Deutsch

ICD-10 C84: Mature T/NK-cell I.



Survival

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

https://www.tumorregister-muenchen.de/en

https://www.tumorregister-muenchen.de/en/facts/surv/sC84_E-ICD-10-C84-Mature-T-NK-cell-I.-survival.pdf

Index of figures and tables

Fig./Tbl		Page
1a	Relative survival by period of diagnosis (chart)	3
1b	Survival by period of diagnosis (table)	3
2a	Survival by sex (chart)	4
2b	Survival by sex (table)	4
2c	Conditional survival by sex (chart)	5
2d	Conditional survival by sex (table)	5
3a	Relative survival by age category (chart)	6
3b	Survival by age category (table)	6
4a	Relative survival by Ann Arbor staging (chart)	7
4b	Survival by Ann Arbor staging (table)	7
5a	Time to first progression (chart)	8
5b	Time to first progression (table)	8
5c	Observed post-progression survival (chart)	9
5d	Observed post-progression survival (table)	9
5e	Observed post-progression survival by period of progression (chart)	10
5f	Observed post-progression survival by period of progression (table)	10

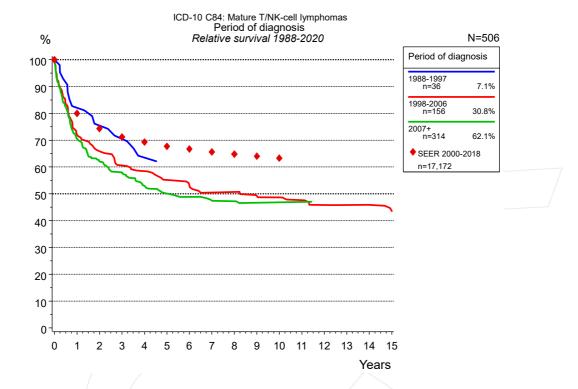


Figure 1a. Relative survival of patients with Mature T/NK-cell I. by period of diagnosis. Included in the evaluation are 506 cases diagnosed between 1988 and 2020.

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+	
	n=36		n=156		n=314	
Years	obs. %	rel. %	obs. %	rel. %	obs. %	rel. %
0	100.0	100.0	100.0	100.0	100.0	100.0
1	80.6	82.1	70.5	72.0	69.3	70.6
2	72.2	75.4	63.8	65.9	59.9	62.1
3	66.7	70.5	57.7	60.5	55.1	58.0
4	58.3	63.5	55.0	58.4	49.5	53.0
5	55.6	61.9	50.9	55.2	45.9	50.1
6	55.6	61.6	48.1	53.1	44.2	48.8
7	55.6	61.3	45.2	50.5	42.6	47.5
8			45.2	50.7	42.1	47.2
9			42.9	49.2	40.7	46.7
10			42.2	48.6	40.7	46.8
11			40.6	47.6	40.7	47.0
12			38.3	45.8	39.5	46.0
13			37.6	45.8		
14			36.8	45.9		
15			34.3	43.6		
Median			5.9		3.9	

Table 1b. Observed (obs.) and relative (rel.) survival of patients with Mature T/NK-cell I. by period of diagnosis for period 1988-2020 (N=506).

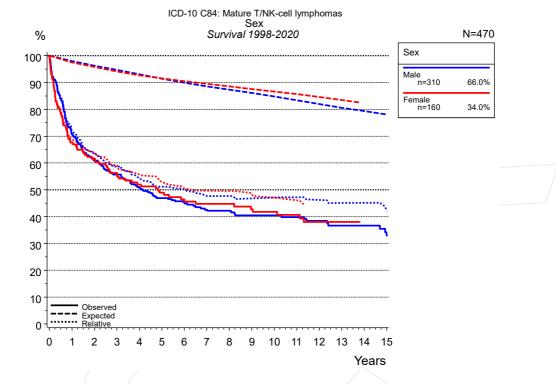


Figure 2a. Survival of patients with Mature T/NK-cell I. by sex. Included in the evaluation are 470 cases diagnosed between 1998 and 2020.

		Sex			
	Ma	le	Ferr	nale	
	n=3	310	n=1	60	
Years	obs. %	rel. %	obs. %	rel. %	
0	100.0	100.0	100.0	100.0	
1	70.8	72.2	67.6	68.8	
2	60.9	63.2	61.7	63.8	
3	55.7	58.7	56.3	59.1	
4	51.0	54.5	52.0	55.7	
5	46.9	51.1	48.9	53.0	
6	45.3	50.0	45.6	50.4	
7	42.6	47.7	44.8	49.7	
8	42.1	47.7	44.8	49.6	
9	40.5	46.8	42.8	48.3	
10	40.5	47.1	41.8	47.1	
11	39.8	47.2	40.7	46.1	
12	38.4	46.2	38.0	44.3	
13	36.7	45.1	38.0	43.9	
14	36.7	45.1			
15	32.9	42.1			
Median	4.1		4.8	7	

Table 2b. Observed (obs.) and relative (rel.) survival of patients with Mature T/NK-cell I. by sex for period 1998-2020 (N=470).

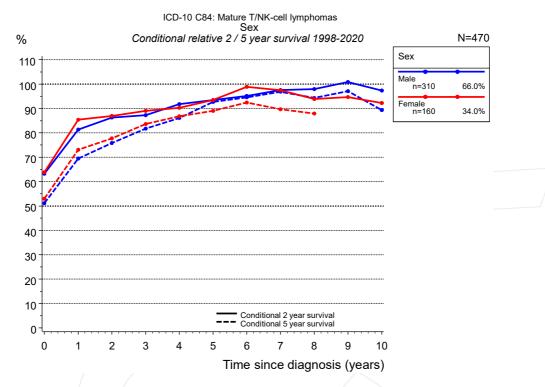


Figure 2c. Conditional relative 2 / 5-year survival of patients with Mature T/NK-cell I. by sex. For 470 of 470 cases diagnosed between 1998 and 2020 valid data could be obtained for this item.

			Sex			
		Male		F	emale	
		Cond. s	surv. %		Cond. s	urv. %
Years	n	2 yrs	5 yrs	n	2 yrs	5 yrs
0	310	63.2	51.1	160	63.8	53.0
1	211	81.3	69.5	103	85.4	73.1
2	177	86.3	75.8	93	87.0	77.7
3	157	87.3	81.7	81	89.0	83.6
4	141	91.8	86.1	71	90.2	86.8
5	124	93.5	92.7	61	93.5	89.0
6	106	95.1	94.5	55	98.9	92.4
7	91	97.6	96.9	48	97.5	89.7
8	78	98.0	94.3	47	93.8	87.9
9	71	100.9	97.1	42	94.7	
10	63	97.4	89.4	38	92.2	

Table 2d. Conditional relative 2 / 5-year survival of patients with Mature T/NK-cell I. by sex for period 1998-2020 (N=470).

Conditional relative survival rates refer to the relative survival probability, in this case for 2 and 5 years after cancer diagnosis, compared to the age- and sex-matched population (=100 %) under the condition of being alive for a certain time period (x-axis in Figure 2a). The results illustrate to what extent the cancer induced mortality of particular subgroups declines in the subsequent years after detection of the malignancy. For instance, according to the presented survival statistics, patients in the subgroup sex="Male", who are alive at least 3 years after cancer diagnosis, the conditional relative 2-year survival rate is 87.3% (n=157).

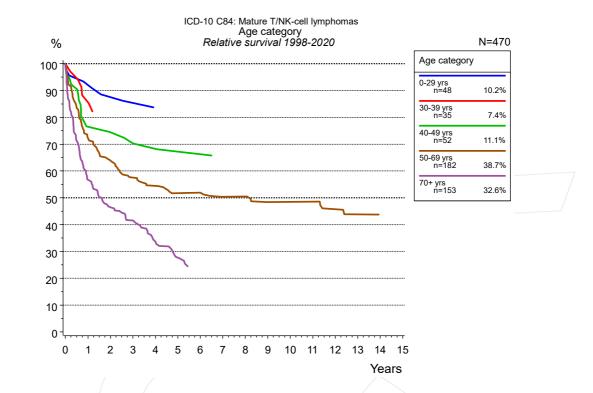


Figure 3a. Relative survival of patients with Mature T/NK-cell I. by age category. Included in the evaluation are 470 cases diagnosed between 1998 and 2020.

				Age	categ	ory				
	0-29	yrs	30-39	9 yrs	40-49	9 yrs	50-69	9 yrs	70+	yrs
	n=	48	n=	35	n=	52	n=1	82	n=153	
Years	obs. %	rel. %								
0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
1	93.3	92.1	88.2	85.7	76.5	76.5	71.7	72.4	53.9	56.
2	88.5	87.5	82.2	81.5	74.2	74.4	62.7	63.9	42.3	46.
3	86.1	85.4	82.2	80.7	72.0	70.3	55.9	57.5	36.0	41.6
4	83.6	83.7	82.2	79.8	69.7	68.2	52.5	54.5	27.6	33.7
5	83.6	82.9	82.2	78.9	67.4	67.2	48.9	51.7	21.1	27.6
6	83.6	82.1			67.4	66.2	48.2	51.9		
7	83.6	81.3					46.1	50.4		
8	83.6	80.5					46.1	50.4		
9	83.6	79.7					42.6	48.4		
10							42.6	48.5		
11							41.6	48.6		
12							38.4	45.8		
13							35.6	43.8		
14							33.9	43.7		
Median							4.6		1.3	

Table 3b. Observed (obs.) and relative (rel.) survival of patients with Mature T/NK-cell I. by age category for period 1998-2020 (N=470).

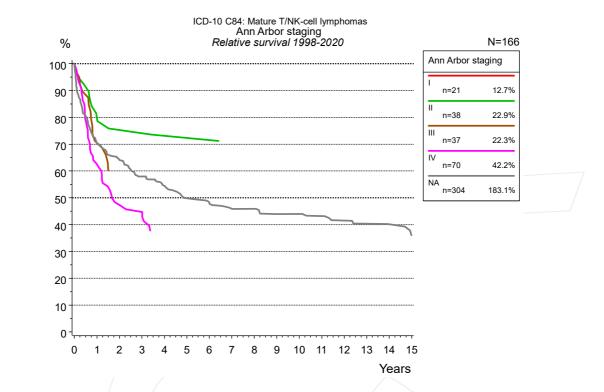


Figure 4a. Relative survival of patients with Mature T/NK-cell I. by Ann Arbor staging. For 167 of 470 cases diagnosed between 1998 and 2020 valid data could be obtained for this item. For a total of 166 cases an evaluable classification was established. The grey line represents the subgroup of 304 patients with missing values regarding Ann Arbor staging (64.7 % of 470 patients, the percent values of all other categories are related to n=166).

Ann Arbor staging										
	I		I	l I	II	1	١١	/	N	A
	n=	21	n=	38	n=	37	n=	70	n=3	04
Years	obs. %	rel. %								
0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
1			80.6	79.9	70.3	70.6	61.3	62.5	68.8	70.4
2			74.9	75.3			46.3	47.3	61.6	64.2
3			74.9	74.1			43.3	44.8	54.6	57.9
4			72.0	73.1					50.6	54.5
5			72.0	72.3					45.3	49.8
6			72.0	71.5					42.8	48.1
7									40.5	45.9
8									40.0	45.9
9									37.2	43.9
10									37.2	44.0
11									35.9	43.2
12									33.8	41.5
13									32.2	40.3
14									31.0	40.1
15									27.2	36.0
Median							1.6		4.0	

Table 4b. Observed (obs.) and relative (rel.) survival of patients with Mature T/NK-cell I. by Ann Arbor staging for period 1998-2020 (N=166).

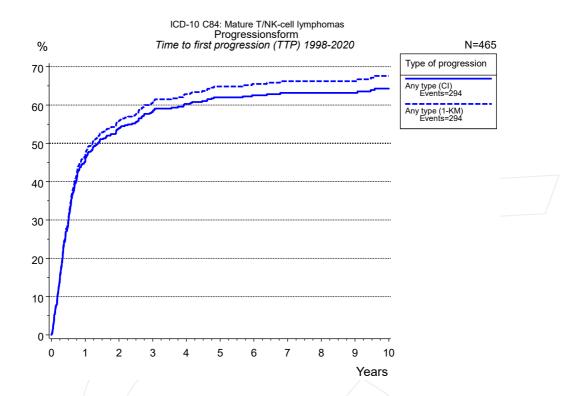


Figure 5a. Time to first progression of 465 patients with Mature T/NK-cell I. diagnosed between 1998 and 2020 (in solid cancers M0 only) estimated by cumulative incidence function (CI, solid line) accounting for death as competing risk and by inverse Kaplan-Meier estimate (1-KM, dashed line). The frequency of events may be underestimated due to underreporting.

Type of progression				
	Any type (CI)	Any type (1- KM)		
N	465	465		
Events	290	290		
compet.	42			
Years	%	%		
0	0.0	0.0		
1	45.6	47.0		
2	54.0	56.0		
3	58.1	60.5		
4	60.3	62.8		
5	62.0	64.8		
6	62.6	65.5		
7	63.2	66.2		
8	63.2	66.2		
9	63.2	66.2		
10	64.3	67.6		

Table 5b. Time to first progression of patients with Mature T/NK-cell I. for period 1998-2020 (N=465), also showing the total of progression events (Events) and of deaths as competing risk (compet.).

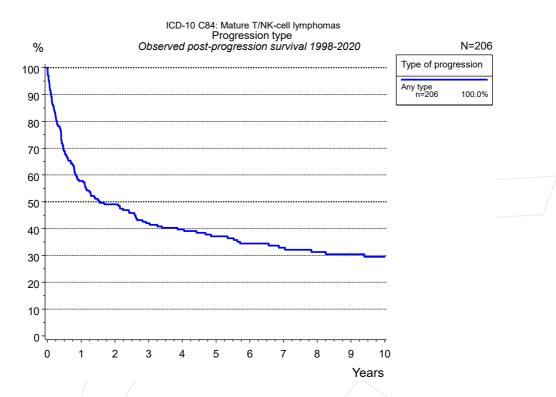


Figure 5c. Observed post-progression survival of 206 patients with Mature T/NK-cell I. diagnosed between 1998 and 2020. These 206 patients with documented progression events during their course of disease represent 44.3 % of the totally 465 evaluated cases. Patients with cancer relapse documented via death certificates only were excluded (n=88, 18.9 %).

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.

٦	Гуре of	
pro		
-	Any type n=206	
Years	%	
0	100.0	
1	57.8	
2	49.1	
3	42.0	
4	39.7	
5	37.1	
6	34.4	
7	32.9	
8	31.3	
9	30.5	
10	29.5	

Table 5d. Observed post-progression survival of patients with Mature T/NK-cell I. for period 1998-2020 (N=206).

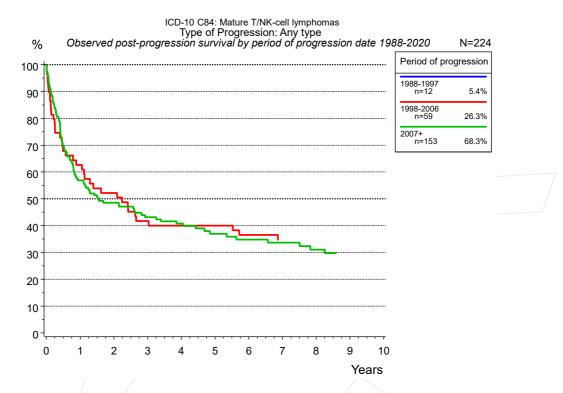


Figure 5e. Observed post-progression (any type) survival of 224 patients with Mature T/NK-cell I. diagnosed between 1988 and 2020 by period of progression.

Period of progression						
	1998-2006	2007+				
	n=59	n=153				
Years	%	%				
0	100.0	100.0				
1	62.6	56.9				
2	52.2	48.5				
3	41.7	43.2				
4	40.0	40.7				
5	40.0	37.0				
6	36.5	34.8				
7	34.8	33.6				
8		31.1				

Table 5f. Observed post-progression (any type) survival of patients with Mature T/NK-cell I. for period 1988-2020 by period of progression (N=224).



Shortcuts

MCR	Munich Cancer Registry, Germany								
NCI	National Cancer Institute, L	National Cancer Institute, USA							
SEER	Surveillance, Epidemiology	r, and End Results, USA							
UICC	Union for International Can	cer 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							

Recommended Citation

Munich Cancer Registry. Survival ICD-10 C84: Mature T/NK-cell I. [Internet]. 2022 [updated 2022 Apr 15; cited 2022 Jun 1]. Available from: https://www.tumorregister-muenchen.de/en/facts/surv/sC84_E-ICD-10-C84-Mature-T-NK-cell-I.-survival.pdf

Copyright

The content of the public web site provided by the Munich Cancer Registry is available worldwide and free of charge. All documents are free to download, utilize, copy, print-out and distribute, providing that the MCR is referenced.

Disclaimer

The Munich Cancer Registry reserves the right to not be responsible for the topicality, correctness, completeness or quality of the information provided. Liability claims regarding damage caused by the use of any information provided, including any kind of information which is incomplete or incorrect, will therefore be rejected.