

Munich Cancer Registry



- ▶ Incidence and Mortality
- ▶ Selection Matrix
- ▶ Homepage
- ▶ *Deutsch*

ICD-10 D39.1: Borderline ovarian tumor

Survival

Year of diagnosis	1988-1997	1998-2019
Patients	128	1,683
Diseases	128	1,684
Cases evaluated	114	1,477
Creation date	01/28/2021	
Database export	01/07/2021	
Population (females)	2.48 m	



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

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

https://www.tumorregister-muenchen.de/en/facts/surv/sD391_E-ICD-10-D39.1-Borderline-ovarian-tumor-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 of total cohort (chart)	4
2b	Survival of total cohort (table)	4
3a	Observed survival by age category (chart)	5
3b	Relative survival by age category (chart)	5
3c	Survival by age category (table)	6
4a	Relative survival by FIGO (chart)	7
4b	Survival by FIGO (table)	7

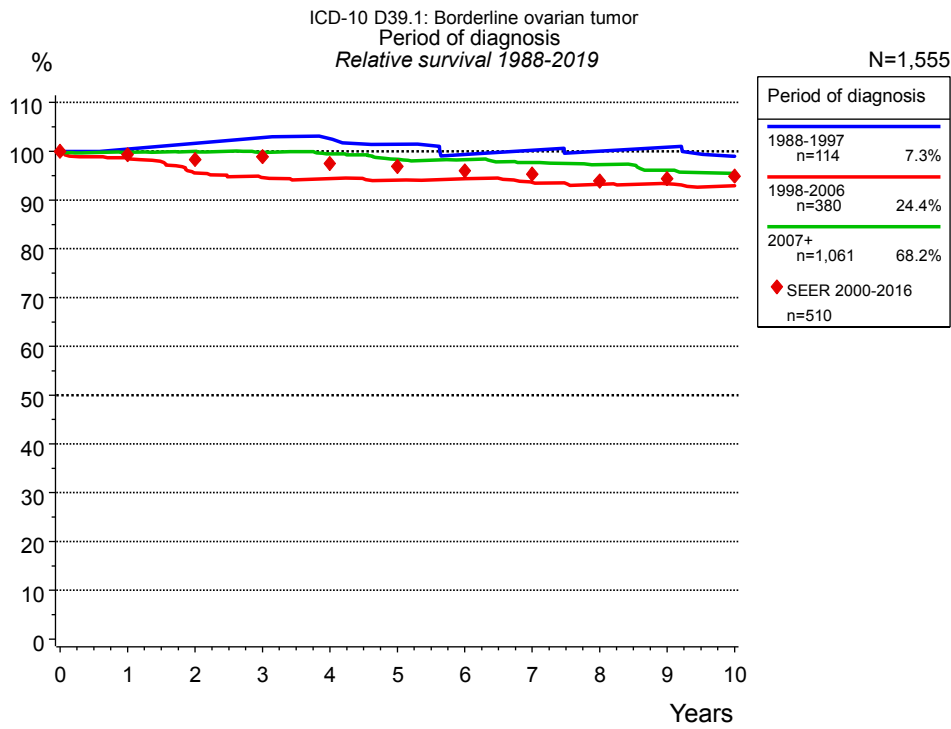


Figure 1a. Relative survival of patients with borderline ovarian tumor by period of diagnosis. Included in the evaluation are 1,555 cases diagnosed between 1988 and 2019.

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 2016, 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 population-based 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.

Years	Period of diagnosis					
	1988-1997 n=114		1998-2006 n=380		2007+ n=1,061	
	obs. %	rel. %	obs. %	rel. %	obs. %	rel. %
0	100.0	100.0	100.0	100.0	100.0	100.0
1	99.1	100.5	97.8	98.6	99.1	99.8
2	99.1	101.6	93.8	95.5	98.5	99.9
3	99.1	102.8	92.1	94.6	97.5	99.8
4	97.3	102.6	91.2	94.4	96.4	99.5
5	94.6	101.5	90.1	94.1	94.6	98.4
6	91.0	99.4	89.5	94.3	93.5	98.3
7	91.0	100.2	87.7	93.6	92.3	97.7
8	89.1	100.0	86.5	93.2	91.0	97.3
9	89.1	100.8	85.5	93.4	89.3	96.1
10	85.5	99.0	84.3	93.0	88.0	95.5
Median	23.2					

Table 1b. Observed (obs.) and relative (rel.) survival of patients with borderline ovarian tumor by period of diagnosis for period 1988-2019 (N=1,555).

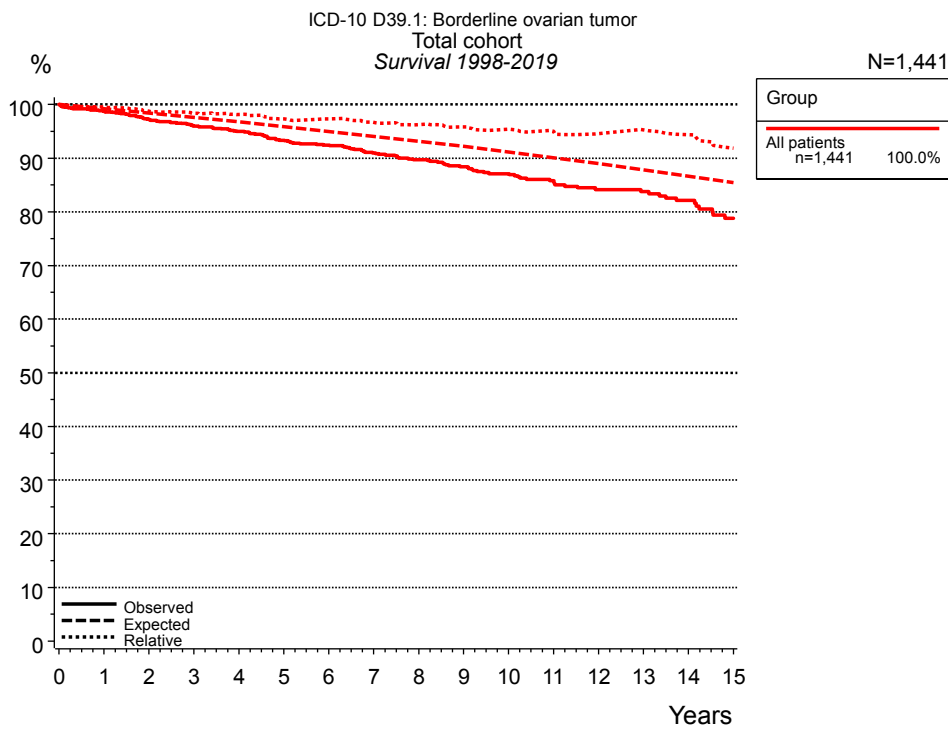


Figure 2a. Observed, expected and relative survival of the total cohort with borderline ovarian tumor. Included in the evaluation are 1,441 cases diagnosed between 1998 and 2019.

Years	Group	
	obs. %	rel. %
0	100.0	100.0
1	98.7	99.5
2	97.2	98.8
3	96.0	98.3
4	95.0	98.1
5	93.3	97.3
6	92.5	97.3
7	91.0	96.7
8	89.7	96.2
9	88.4	95.8
10	87.1	95.4
11	85.8	95.0
12	84.1	94.5
13	83.8	95.3
14	82.1	94.4
15	78.8	91.8
Median		

Table 2b. Observed (obs.) and relative (rel.) survival of the total cohort with borderline ovarian tumor for period 1998-2019 (N=1,441).

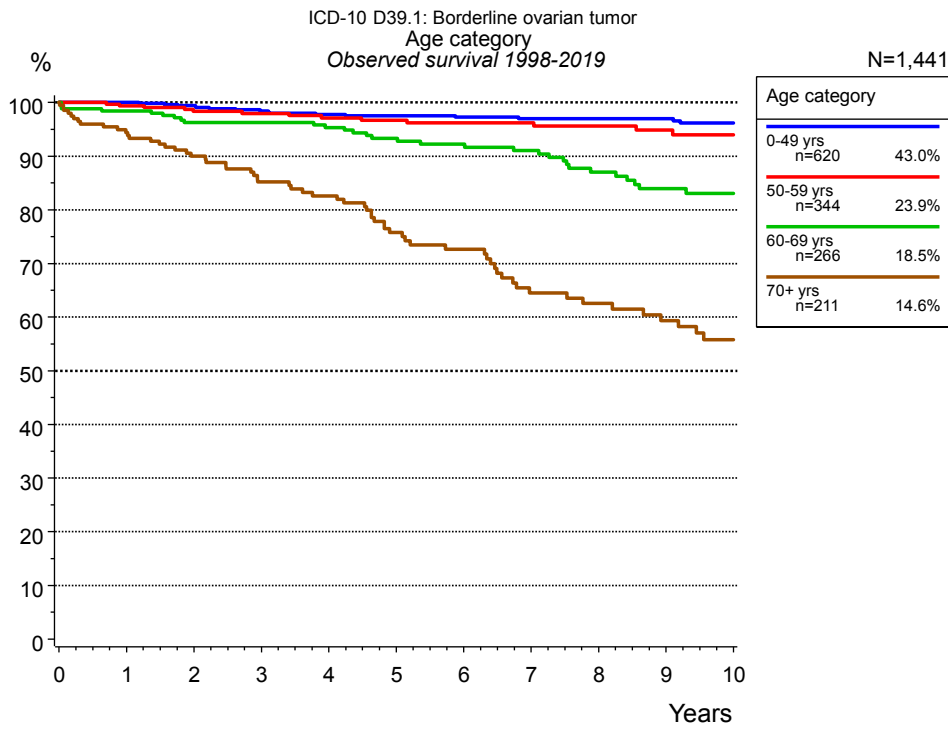


Figure 3a. Observed survival of patients with borderline ovarian tumor by age category. Included in the evaluation are 1,441 cases diagnosed between 1998 and 2019.

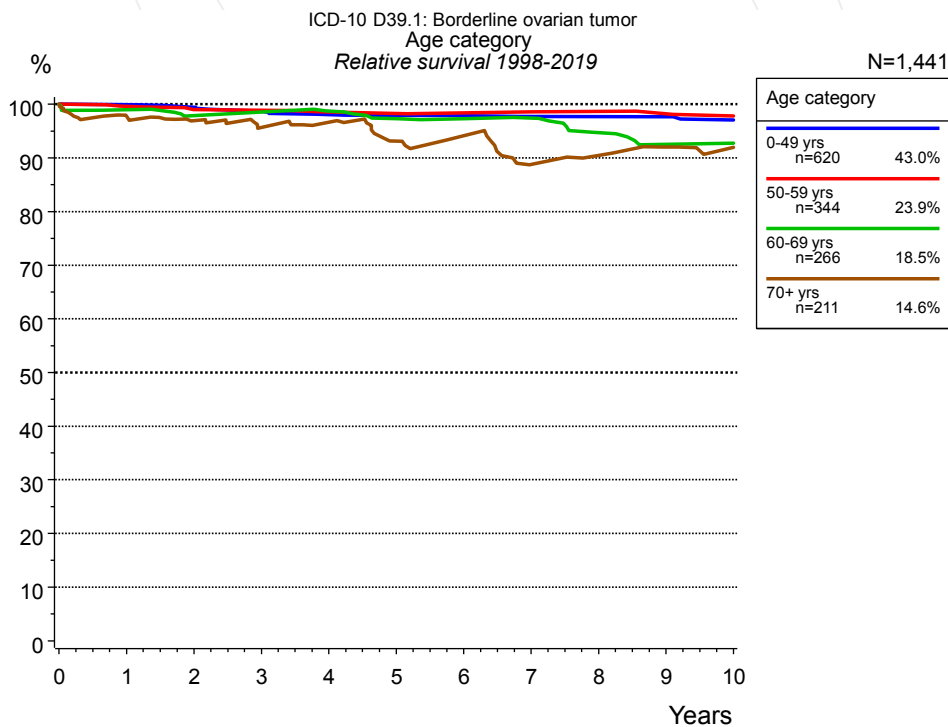


Figure 3b. Relative survival of patients with borderline ovarian tumor by age category. Included in the evaluation are 1,441 cases diagnosed between 1998 and 2019.

Years	Age category							
	0-49 yrs n=620		50-59 yrs n=344		60-69 yrs n=266		70+ yrs n=211	
	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	100.0	99.9	99.4	99.6	98.4	99.0	94.4	97.7
2	99.4	99.4	98.3	99.0	96.3	97.9	90.0	96.9
3	98.4	98.7	98.0	98.9	96.3	98.5	85.2	95.7
4	97.8	98.1	97.1	98.5	95.3	98.7	82.6	96.6
5	97.5	97.9	96.7	98.3	93.3	97.3	75.8	93.1
6	97.3	97.9	96.2	98.4	92.3	97.3	72.6	94.1
7	97.0	97.7	96.2	98.6	91.1	97.4	64.5	88.8
8	97.0	97.7	95.6	98.7	87.1	94.7	62.5	90.4
9	97.0	97.7	94.8	98.2	83.9	92.5	59.4	92.0
10	96.2	97.1	94.0	97.8	83.1	92.7	55.8	91.9
Median							12.9	

Table 3c. Observed (obs.) and relative (rel.) survival of patients with borderline ovarian tumor by age category for period 1998-2019 (N=1,441).

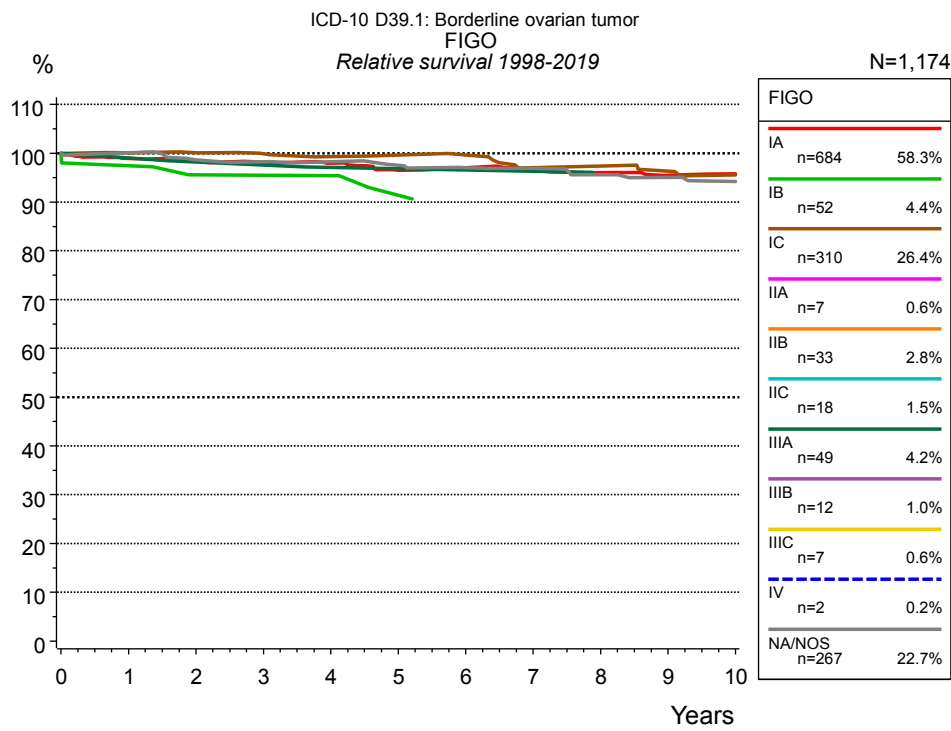


Figure 4a. Relative survival of patients with borderline ovarian tumor by FIGO. For 1,203 of 1,441 cases diagnosed between 1998 and 2019 valid data could be obtained for this item. For a total of 1,174 cases an evaluable classification was established. The grey line represents the subgroup of 267 patients with missing values regarding FIGO (18.5 % of 1,441 patients, the percent values of all other categories are related to n=1,174). Subgroups with sample size <20 are omitted from the chart.

Years	IA n=684		IB n=52		IC n=310		IIB n=33		IIIA n=49		NA/NOS n=267	
	obs. %	rel. %	obs. %	rel. %	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	100.0	100.0	100.0	100.0
1	98.1	98.9	98.0	97.5	99.6	100.1	100.0	99.4	100.0	99.0	99.6	100.1
2	96.9	98.4	93.6	95.6	98.9	100.1	100.0	98.8	97.7	98.2	97.1	98.7
3	95.6	98.0	93.6	95.5	97.6	99.9	100.0	98.2	97.7	97.6	96.2	98.2
4	94.8	98.0	93.6	95.4	96.2	99.3			95.1	97.1	95.3	98.3
5	92.7	96.5	88.3	91.4	95.7	99.7			95.1	96.8	93.8	97.6
6	92.2	97.0	85.3	90.6	95.1	99.7			95.1	96.5	92.3	97.0
7	91.1	96.7	85.3	90.4	91.4	97.1			95.1	96.3	91.1	96.9
8	89.5	96.0	85.3	90.3	91.4	97.4					89.3	95.6
9	87.9	95.5			89.8	96.3					88.0	95.1
10	87.5	95.8			88.0	95.5					86.5	94.3
Median												

Table 4b. Observed (obs.) and relative (rel.) survival of patients with borderline ovarian tumor by FIGO for period 1998-2019 (N=1,174).

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-KM 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 D39.1: Borderline ovarian tumor [Internet]. 2021 [updated 2021 Jan 28; cited 2021 Mar 1]. Available from: https://www.tumorregister-muenchen.de/en/facts/surv/sD391_E-ICD-10-D39.1-Borderline-ovarian-tumor-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.