Munich Cancer Registry

- Incidence and Mortality
- Selection Matrix
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- *Deutsch*

ICD-10 C00: Lip cancer

Survival

Year of diagnosis	1988-1997	1998-2014
Patients	82	328
Diseases	82	329
Cases evaluated	71	219

Creation date	04/11/2016
Export date	12/23/2015
Population	4.64 m

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

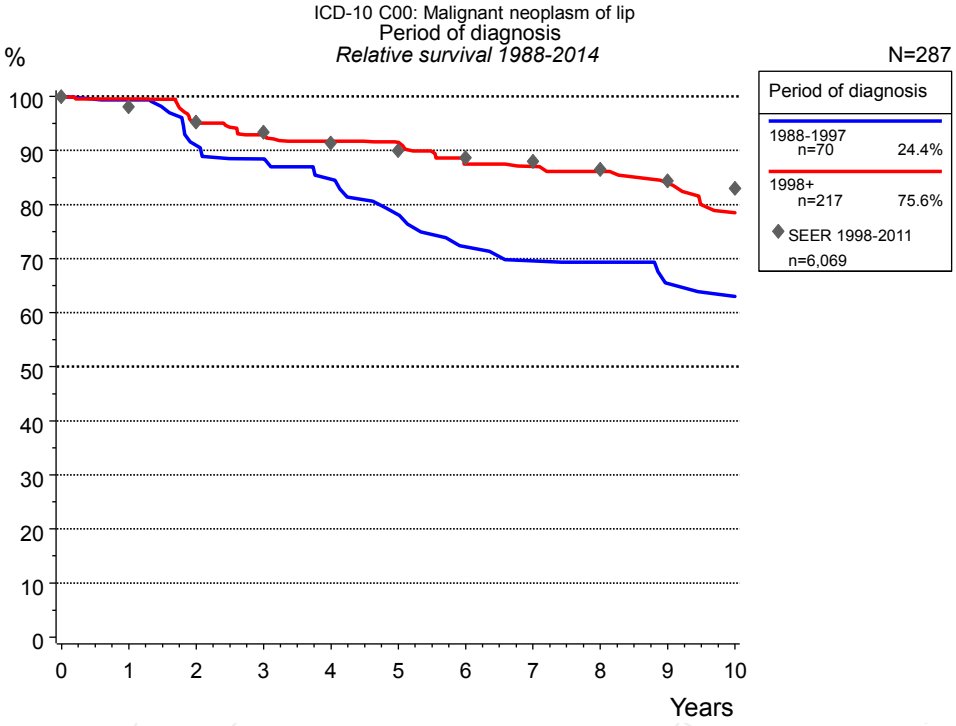

Figure 1a. Relative survival of patients with lip cancer by period of diagnosis. Included in the evaluation are 287 cases diagnosed between 1988 and 2014.

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 1998 to 2011, and are represented by gray 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.

Period of diagnosis				
	1988-1997 n=70		1998+ n=217	
Years	obs. %	rel. %	obs. %	rel. %
0	100.0	100.0	100.0	100.0
1	97.1	99.3	97.7	99.5
2	85.2	90.9	87.1	95.1
3	80.6	88.4	82.1	92.9
4	74.5	84.7	79.5	91.7
5	66.8	78.1	74.7	91.5
6	58.9	72.2	68.1	87.5
7	55.7	69.6	65.9	87.1
8	54.0	69.4	63.2	86.2
9	49.0	65.4	59.3	83.9
10	47.2	63.0	53.8	78.5

Table 1b. Observed (obs.) and relative (rel.) survival of patients with lip cancer by period of diagnosis for period 1988-2014 (N=287).

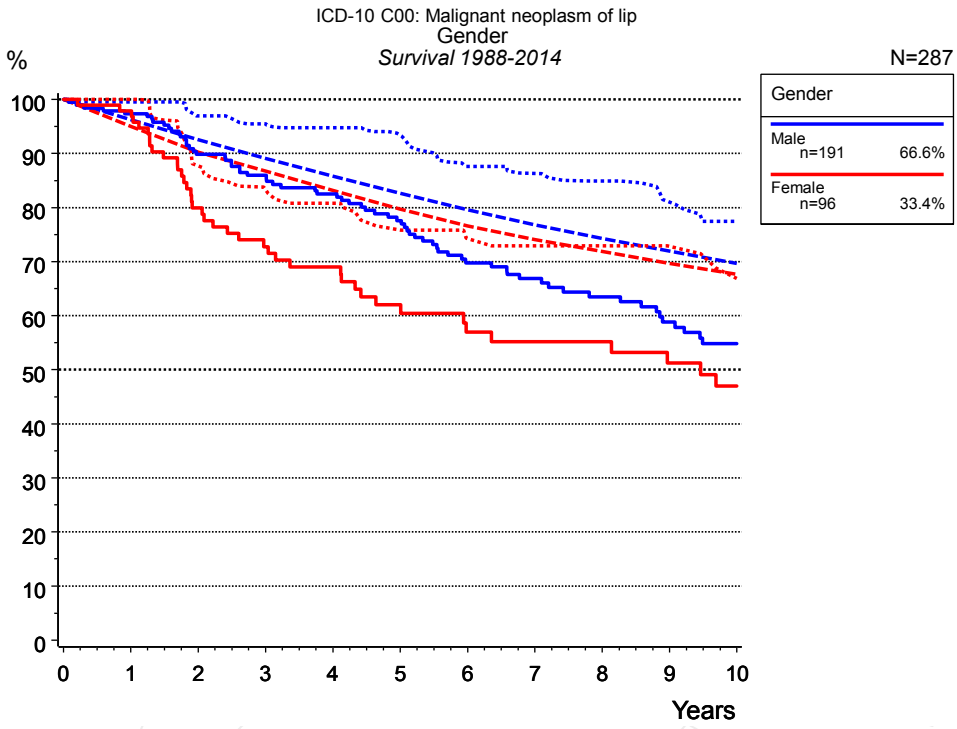

Figure 2a. Survival of patients with lip cancer by gender. Included in the evaluation are 287 cases diagnosed between 1988 and 2014.

	Gender			
	Male n=191		Female n=96	
Years	obs. %	rel. %	obs. %	rel. %
0	100.0	100.0	100.0	100.0
1	97.4	99.5	97.9	100.0
2	89.8	97.0	79.9	87.7
3	86.0	95.5	72.8	83.3
4	82.5	94.8	69.0	80.8
5	77.6	93.4	62.0	75.8
6	69.8	87.6	57.0	74.2
7	66.9	86.3	55.2	72.9
8	63.5	84.9	55.2	72.9
9	58.8	81.0	51.2	72.8
10	54.8	77.5	47.0	66.9

Table 2b. Observed (obs.) and relative (rel.) survival of patients with lip cancer by gender for period 1988-2014 (N=287).

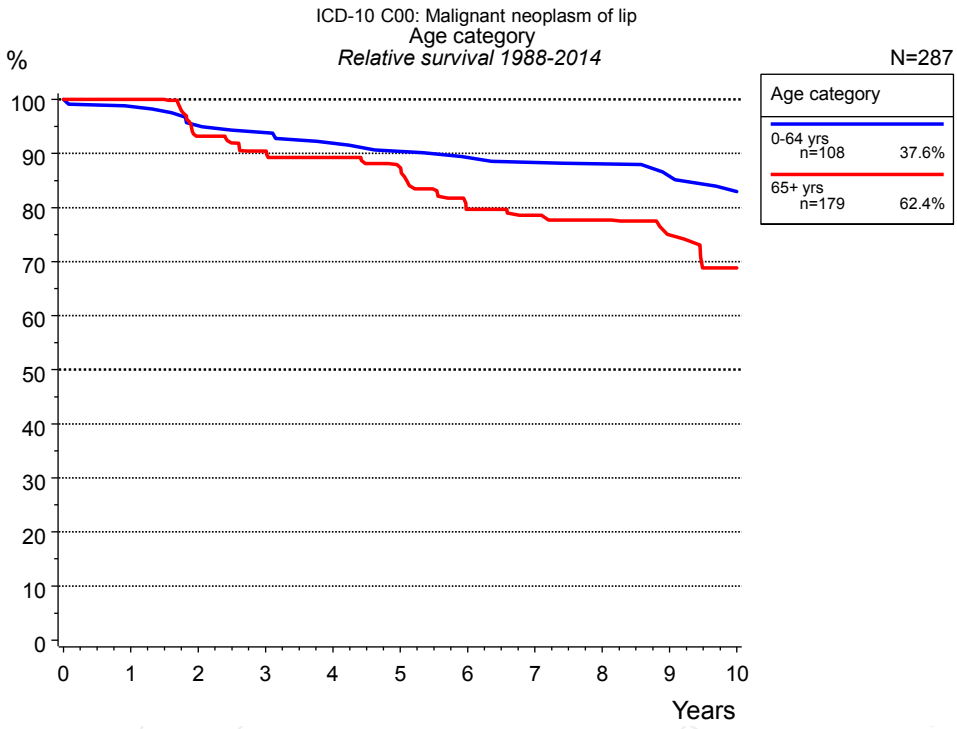

Figure 3a. Relative survival of patients with lip cancer by age category. Included in the evaluation are 287 cases diagnosed between 1988 and 2014.

	Age category			
	0-64 yrs n=108		65+ yrs n=179	
Years	obs. %	rel. %	obs. %	rel. %
0	100.0	100.0	100.0	100.0
1	98.1	98.7	97.2	100.0
2	94.3	95.1	82.0	93.2
3	92.3	93.9	75.3	90.5
4	89.1	91.9	71.6	89.2
5	86.8	90.4	64.1	87.4
6	84.4	89.3	54.2	79.7
7	83.1	88.4	50.8	78.6
8	81.6	88.1	47.8	77.7
9	78.6	85.8	42.2	74.9
10	75.3	83.0	37.4	68.8

Table 3b. Observed (obs.) and relative (rel.) survival of patients with lip cancer by age category for period 1988-2014 (N=287).

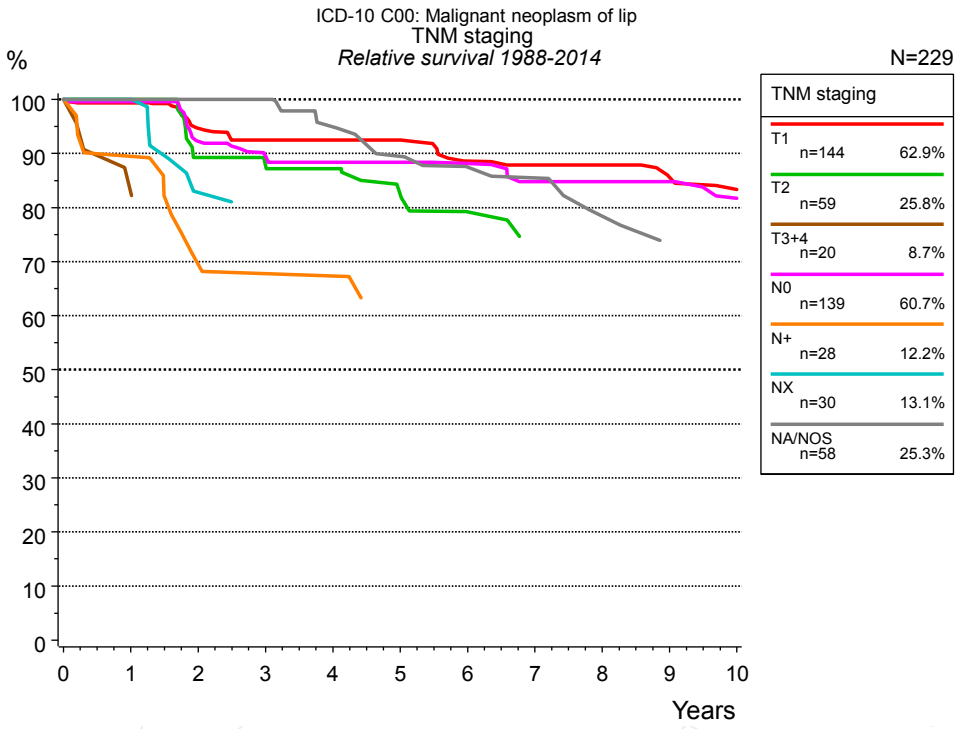

Figure 4a. Relative survival of patients with lip cancer by TNM staging. For 229 of 287 cases diagnosed between 1988 and 2014 valid data could be obtained for this item. The accumulated percentage exceeds the 100% value because patients are potientially considered in more than one subgroup. The grey line represents the subgroup of 58 patients with missing values regarding TNM staging (20.2 % of 287 patients, the percent values of all other categories are related to n=229).

	TNM staging													
	T1 n=144		T2 n=59		T3+4 n=20		N0 n=139		N+ n=28		NX n=30		NA/NOS n=58	
Years	obs. %	rel. %	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	100.0	100.0
1	97.9	99.4	98.3	100.0	84.4	82.8	97.1	99.6	89.3	89.5	100.0	100.0	100.0	100.0
2	87.9	94.7	80.3	89.3			84.9	92.3	67.9	69.5	75.9	82.8	98.2	100.0
3	84.3	92.5	76.6	87.8			80.1	89.5	64.3	67.8	72.4	81.0	90.7	100.0
4	81.9	92.5	74.7	87.2			78.3	88.4	64.3	67.3	72.4	81.0	81.2	94.9
5	78.5	92.5	66.2	82.4			76.5	88.4					72.9	89.5
6	72.1	88.6	59.3	79.2			71.6	88.2					66.1	87.5
7	70.1	87.8	54.1	74.7			67.2	84.8					63.6	85.5
8	69.0	87.8	54.1	74.7			67.2	84.8					54.9	78.4
9	63.9	85.6	54.1	74.7			64.6	84.8						
10	61.1	83.4					60.3	81.7						

Table 4b. Observed (obs.) and relative (rel.) survival of patients with lip cancer by TNM staging for period 1988-2014 (N=229).

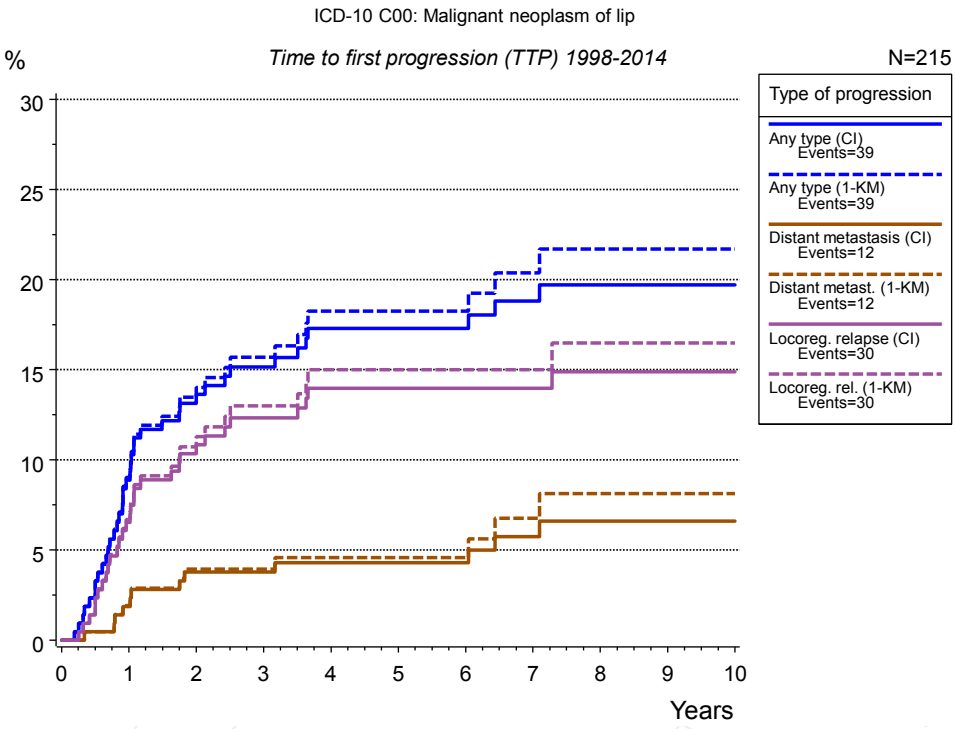

Figure 5a. Time to first progression of 215 patients with lip cancer diagnosed between 1998 and 2014 (M0 only in solid cancers) estimated by cumulative incidence function (CI, solid line) accounting for death as competing risk and by inverse Kaplan-Meier estimate (1-KM, dashed line). The frequency of events may be underestimated due to underreporting.

	Type of progression					
	Any type (CI)	Any type (1-KM)	Distant metastasis (CI)	Distant metast. (1-KM)	Locoreg. relapse (CI)	Locoreg. rel. (1-KM)
	n=215	n=215	n=215	n=215	n=215	n=215
Years	%	%	%	%	%	%
0	0.0	0.0	0.0	0.0	0.0	0.0
1	8.9	9.0	1.9	1.9	6.5	6.7
2	13.1	13.5	3.8	3.9	10.3	10.7
3	15.1	15.7	3.8	3.9	12.3	13.0
4	17.3	18.3	4.3	4.6	14.0	15.0
5	17.3	18.3	4.3	4.6	14.0	15.0
6	17.3	18.3	4.3	4.6	14.0	15.0
7	18.8	20.4	5.7	6.8	14.0	15.0
8	19.7	21.7	6.6	8.1	14.9	16.5
9	19.7	21.7	6.6	8.1	14.9	16.5
10	19.7	21.7	6.6	8.1	14.9	16.5

Table 5b. Time to first progression of patients with lip cancer for period 1998-2014 (N=215).

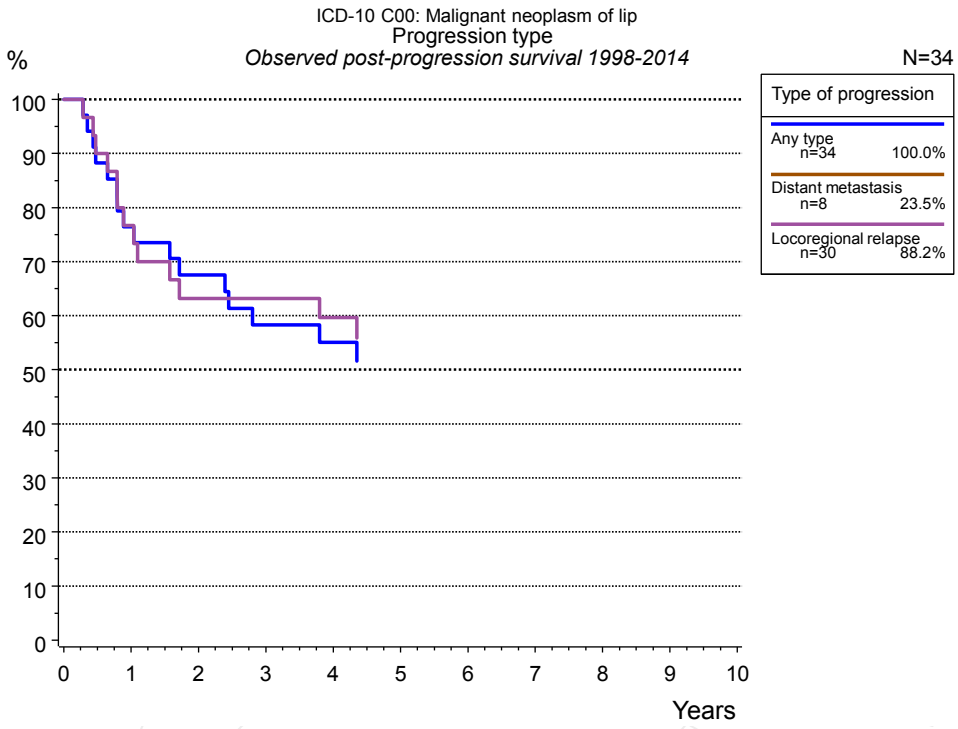

Figure 5c. Observed post-progression survival of 34 patients with lip cancer diagnosed between 1998 and 2014. These 34 patients with documented progression events during their course of disease represent 15.8 % of the totally 215 evaluated cases. Patients with cancer relapse documented via death certificates only were excluded (n=5, 2.3 %). Multiple progression types on different sites are included in the evaluation even when not occuring synchronously. Subgroups with sample size <15 are dropped 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 of progression		
	Any type	Distant metastasis	Locoregional relapse
	n=34	n=8	n=30
Years	%	%	%
0	100.0	100.0	100.0
1	76.5		76.7
2	67.5		63.2
3	58.3		63.2
4	55.1		59.6

Table 5d. Observed post-progression survival of patients with lip cancer for period 1998-2014 (N=34).

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

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