# **Munich Cancer Registry**



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## ICD-10 C52: Vaginal cancer

Year of diagnosis	1988-1997	1998-2014
Patients	97	295
Diseases	97	295
Cases evaluated	86	201
Creation date	04/11/2016	
Export date	12/23/2015	
Population (females)	2.36 m	

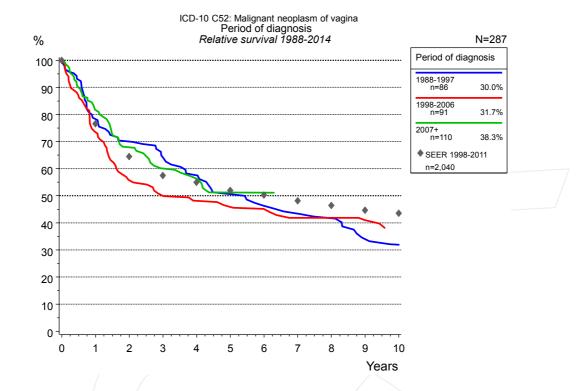
## Survival



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

 $http://www.tumorregister-muenchen.de/en/facts/surv/sC52\_E-ICD-10-C52-Vaginal-cancer-survival.pdf$ 



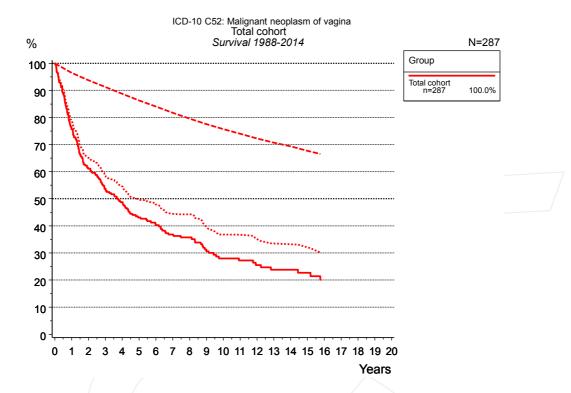
**Figure 1a.** Relative survival of patients with vaginal cancer by period of diagnosis. Included in the evaluation are 287 cases diagnosed between 1988 and 2014.

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 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.

	F	Period	of diag	gnosis	5	
	1988-	1997	1998-	-2006	200	)7+
	n=	86	n=	91	n=1	10
Years	obs. %	rel. %	obs. %	rel. %	obs. %	rel. %
0	100.0	100.0	100.0	100.0	100.0	100.0
1	76.5	78.3	71.1	73.5	79.0	81.7
2	66.9	70.0	52.2	55.7	64.2	67.9
3	59.7	64.1	46.7	50.0	54.7	60.1
4	52.5	57.5	43.3	48.1	50.5	56.3
5	43.9	50.6	41.0	45.9	44.3	51.2
6	39.1	46.2	38.7	45.1	44.3	51.1
7	36.6	43.4	35.3	41.9		
8	34.2	41.7	35.3	41.9		
9	26.9	34.0	32.8	41.0		
10	24.4	31.9	30.1	38.1		

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



**Figure 2a.** Observed, expected and relative survival of the total cohort with vaginal cancer. Included in the evaluation are 287 cases diagnosed between 1988 and 2014.

	Group	
	Total of	cohort
	n=2	287
Years	obs. %	rel. %
0	100.0	100.0
1	75.7	78.3
2	61.1	65.1
3	53.7	58.5
4	48.8	54.6
5	43.1	49.8
6	40.3	47.9
7	36.8	44.5
8	35.7	44.3
9	30.7	39.5
10	28.0	36.8
11	27.2	36.7
12	25.6	35.1
13	23.8	33.5
14	23.8	33.3
15	22.7	32.1
16	20.1	29.5

**Table 2b.** Observed (obs.) and relative (rel.) survival of the total cohort with vaginal cancer for period 1988-2014 (N=287).

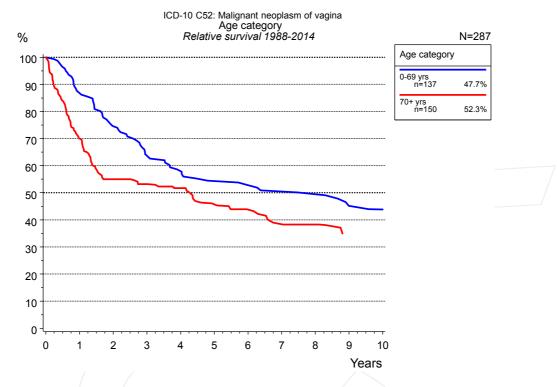
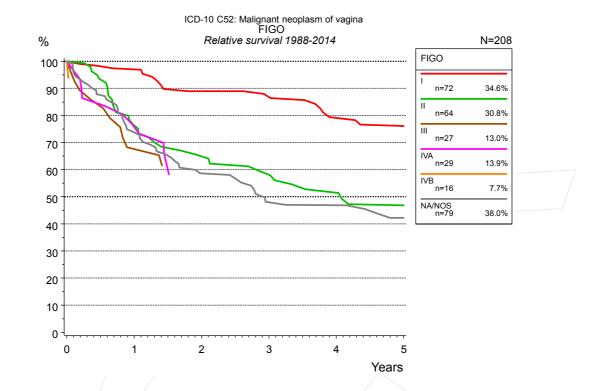


Figure 3a. Relative survival of patients with vaginal cancer by age category. Included in the evaluation are 287 cases diagnosed between 1988 and 2014.

	Age	categ	ory		
	0-69	yrs	70+ yrs		
	n=1	37	n=1	150	
Years	obs. %	rel. %	obs. %	rel. %	
0	100.0	100.0	100.0	100.0	
1	86.5	86.8	65.8	70.0	
2	73.9	74.6	49.4	55.0	
3	63.3	63.7	45.0	53.2	
4	57.3	58.0	40.9	51.7	
5	53.0	54.3	34.0	45.8	
6	51.0	52.8	30.3	43.8	
7	48.9	50.5	25.4	38.4	
8	47.8	49.5	24.3	38.3	
9	42.6	45.2	19.3	34.1	
10	41.2	43.9			

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



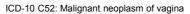


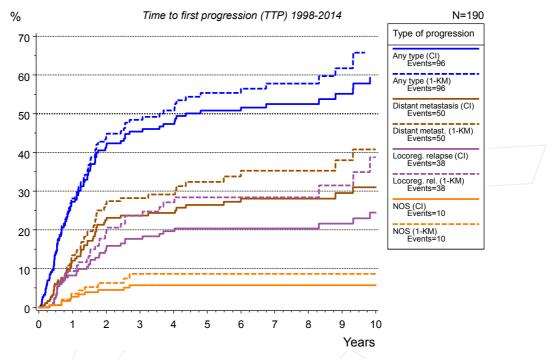
**Figure 4a.** Relative survival of patients with vaginal cancer by FIGO. For 225 of 287 cases diagnosed between 1988 and 2014 valid data could be obtained for this item. For a total of 208 cases an evaluable classification was established. The grey line represents the subgroup of 79 patients with missing values regarding FIGO (27.5% of 287 patients, the percent values of all other categories are related to n=208).

FIGO													
			1	I	II	1	IVA		IV	IVB		NA/NOS	
	n=	72	n=	64	n=	27	n=	29	n=	16	n=	79	
Years	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	95.7	97.0	74.1	76.3	66.7	67.6	74.5	75.7			70.4	73.7	
2	85.1	89.0	62.0	64.9							53.4	58.7	
3	82.0	86.8	54.9	58.1							42.4	48.0	
4	72.4	79.1	47.8	51.5							40.9	46.9	
5	69.2	76.1	42.0	46.8							34.7	42.2	

**Table 4b.** Observed (obs.) and relative (rel.) survival of patients with vaginal cancer by FIGO for period 1988-2014 (N=208).







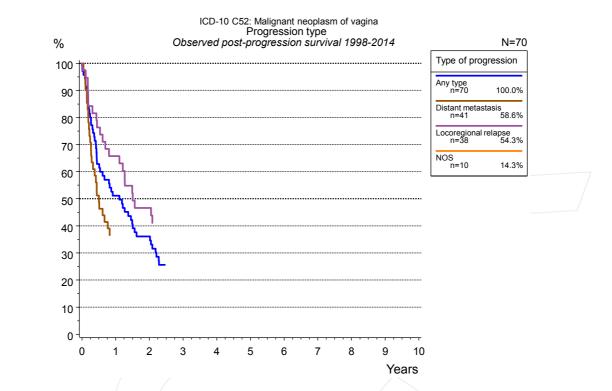
**Figure 5a.** Time to first progression of 190 patients with vaginal cancer diagnosed between 1998 and 2014 (M0 only in solid cancers) estimated by cumulative incidence function (CI, solid line) accounting for death as competing risk and by inverse Kaplan-Meier estimate (1-KM, dashed line). The frequency of events may be underestimated due to underreporting.

	Type of progression											
	Any type (CI)	Any type (1-KM)	Distant metastasis	Distant metast. (1-	Locoreg. relapse (CI)	Locoreg. rel. (1-KM)	NOS (CI)					
	n=190	n=190	(CI) n=190	KM) n=190	n=190	n=190	n=190					
Years	%	%	%	%	%	%	%					
0	0.0	0.0	0.0	0.0	0.0	0.0	0.0					
1	27.2	28.1	12.0	13.4	8.2	9.4	2.8					
2	41.7	44.1	22.5	26.6	15.2	19.6	4.5					
3	45.4	48.4	23.7	28.2	17.7	23.6	5.7					
4	47.4	50.9	24.4	29.1	19.7	27.1	5.7					
5	50.8	55.4	26.4	32.4	20.3	28.4	5.7					
6	51.6	56.5	28.1	35.3	20.3	28.4	5.7					
7	52.5	57.8	28.1	35.3	20.3	28.4	5.7					
8	52.5	57.8	28.1	35.3	20.3	28.4	5.7					
9	55.1	61.7	29.5	38.0	21.6	31.5	5.7					
10	59.3		31.0	40.8	24.5	38.8	5.7					

	Type of ogression
	NOS (1-KM)
Years	n=190 %
0	0.0
1	3.5
2	6.3
3	8.6
4	8.6
5	8.6
6	8.6
7	8.6
8	8.6
9	8.6
10	8.6

 Table 5b. Time to first progression of patients with vaginal cancer for period 1998-2014 (N=190).



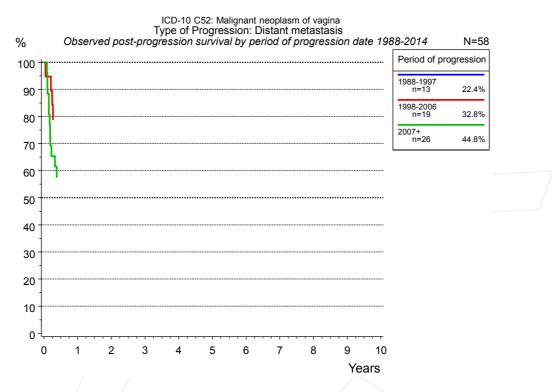


**Figure 5c.** Observed post-progression survival of 70 patients with vaginal cancer diagnosed between 1998 and 2014. These 70 patients with documented progression events during their course of disease represent 34.8% of the totally 201 evaluated cases (incl. M1, n=11, 5.5%). Patients with cancer relapse documented via death certificates only were excluded (n=37, 18.4%). 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 <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.

	Any type n=70	Type of progr Distant metastasis n=41		NOS n=10
Years	%	%	%	%
0	100.0	100.0	100.0	100.0
1	51.2		65.8	
2	36.1		46.6	
3	25.6			
4	25.6			
5	25.6			
6	25.6			
7	25.6			
8	25.6			
9	25.6			
10	25.6			

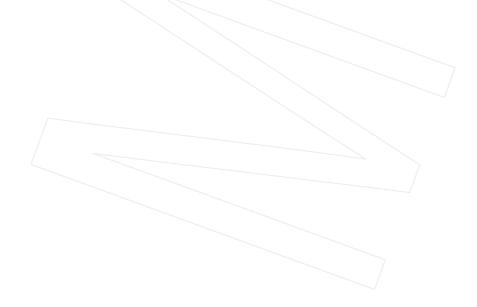
**Table 5d.** Observed post-progression survival of patients with vaginal cancer for period 1998-2014 (N=70).



**Figure 5e.** Observed post-progression (distant metastasis) survival of 58 patients with vaginal cancer diagnosed between 1988 and 2014 by period of progression.

Period of progression										
	1988-1997	1998-2006	2007+							
	n=13	n=19	n=26							
Years	%	%	%							
0	100.0	100.0	100.0							

**Table 5f.** Observed post-progression (distant metastasis) survival of patients with vaginal cancer for period 1988-2014 by period of progression (N=58).



#### Shortcuts

MCR	Munich Cancer Registry, Germany					
NCI SEER UICC	National Cancer Institute, USA Surveillance, Epidemiology, and End Results, USA Union for International Cancer Control, Geneva					
DCO NA NOS	Death certificate only Not available Not otherwise specified	Death certificate provides the only notification to the registry.				
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**

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