# **Munich Cancer Registry**



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# P-NET: Pancr. neuroend. tumor

### Survival

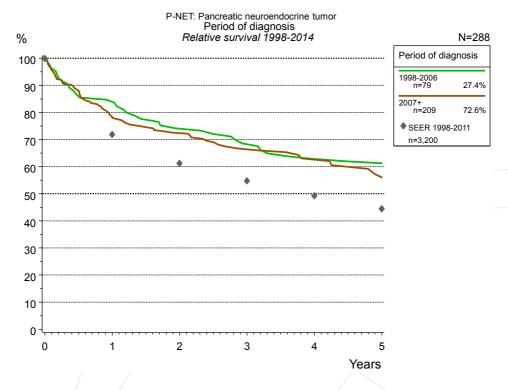
Year of diagnosis	1998-2014
Patients	363
Diseases	363
Cases evaluated	288
Creation date	04/11/2016
Export date	12/23/2015
Population	4.64 m



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

http://www.tumorregister-muenchen.de/en/facts/surv/shPNETE-P-NET-Pancr.-neuroend.-tumor-survival.pdf

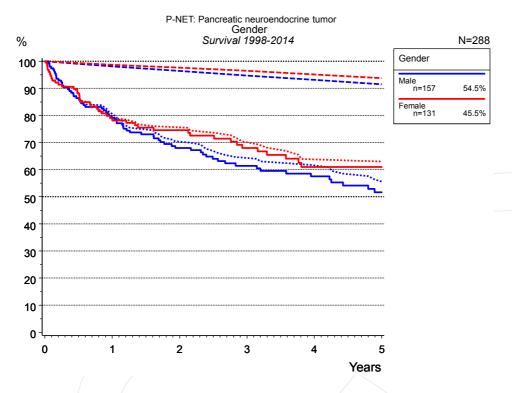


**Figure 1a.** Relative survival of patients with pancr. neuroend. tumor by period of diagnosis. Included in the evaluation are 288 cases diagnosed between 1998 and 2014.

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					
	1998-2006		2007+		
	n=79		n=2	209	
Years	obs. %	rel. %	obs. %	rel. %	
0	100.0	100.0	100.0	100.0	
1	83.5	83.9	76.8	78.0	
2	72.0	74.0	70.5	72.4	
3	65.5	68.3	63.9	66.4	
4	59.1	62.9	59.6	62.6	
5	57.8	61.3	53.2	56.1	

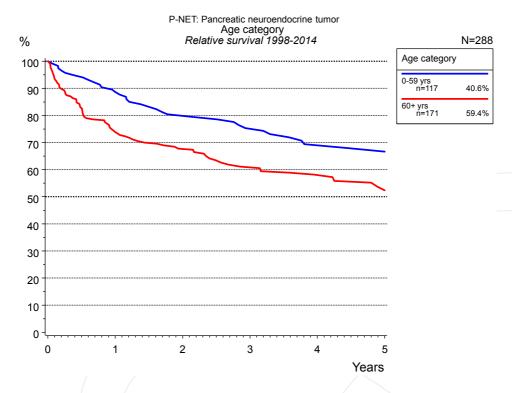
**Table 1b.** Observed (obs.) and relative (rel.) survival of patients with pancr. neuroend. tumor by period of diagnosis for period 1998-2014 (N=288).



**Figure 2a.** Survival of patients with pancr. neuroend. tumor by gender. Included in the evaluation are 288 cases diagnosed between 1998 and 2014.

Gender				
	Male		Female	
	n=157		n=1	131
Years	obs. %	rel. %	obs. %	rel. %
0	100.0	100.0	100.0	100.0
1	79.2	80.6	78.2	79.1
2	68.0	70.3	74.6	75.6
3	61.4	64.3	68.0	70.1
4	57.6	61.6	61.0	63.8
5	51.7	55.6	61.0	63.0

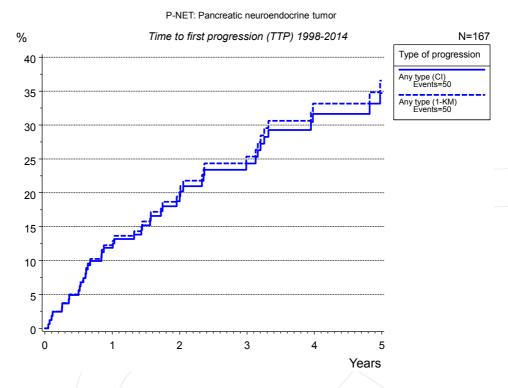
**Table 2b.** Observed (obs.) and relative (rel.) survival of patients with pancr. neuroend. tumor by gender for period 1998-2014 (N=288).



**Figure 3a.** Relative survival of patients with pancr. neuroend tumor by age category. Included in the evaluation are 288 cases diagnosed between 1998 and 2014.

Age category					
	0-59 yrs		60+ yrs		
	n=117		n=1	171	
Years	obs. %	rel. %	obs. %	rel. %	
0	100.0	100.0	100.0	100.0	
1	88.4	88.7	72.2	73.9	
2	80.0	79.9	64.6	67.7	
3	74.6	75.1	56.9	60.8	
4	68.5	69.0	52.4	58.0	
5	66.9	66.6	46.9	52.4	

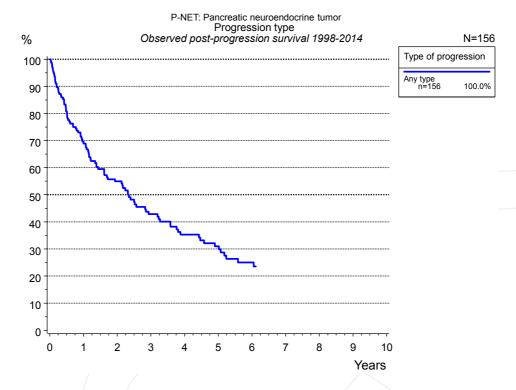
**Table 3b.** Observed (obs.) and relative (rel.) survival of patients with pancr. neuroend. tumor by age category for period 1998-2014 (N=288).



**Figure 5a.** Time to first progression of 167 patients with pancr. neuroend. tumor 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)		
	n=167	n=167		
Years	%	%		
0	0.0	0.0		
1	11.9	12.3		
2	18.7	19.5		
3	24.3	25.3		
4	31.6	33.2		
5	34.7	36.6		

**Table 5b.** Time to first progression of patients with pancr. neuroend. tumor for period 1998-2014 (N=167).

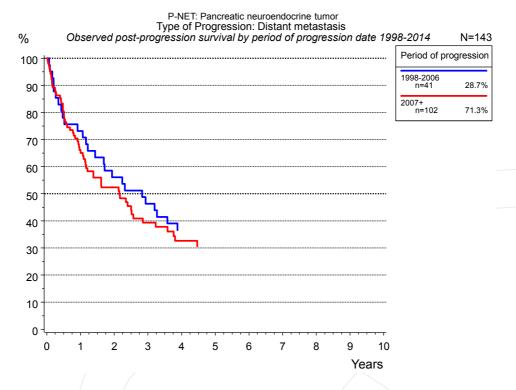


**Figure 5c.** Observed post-progression survival of 156 patients with pancr. neuroend. tumor diagnosed between 1998 and 2014. These 156 patients with documented progression events during their course of disease represent 54.7 % of the totally 285 evaluated cases (incl. M1, n=118, 41.4 %). Patients with cancer relapse documented via death certificates only were excluded (n=12, 4.2 %).

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 n=156
Years	%
0	100.0
1	68.9
2	54.9
3	42.8
4	35.3
5	31.0
6	25.0

**Table 5d.** Observed post-progression survival of patients with pancr. neuroend. tumor for period 1998-2014 (N=156).



**Figure 5e.** Observed post-progression (distant metastasis) survival of 143 patients with pancr. neuroend. tumor diagnosed between 1998 and 2014 by period of progression.

Period of progression				
	1998-2006	2007+		
	n=41	n=102		
Years	%	%		
0	100.0	100.0		
1	73.2	65.1		
2	56.1	52.4		
3	46.3	39.4		
4	36.6	32.6		

**Table 5f.** Observed post-progression (distant metastasis) survival of patients with pancr. neuroend. tumor for period 1998-2014 by period of progression (N=143).

#### **Shortcuts**

Munich Cancer Registry, Germany				
National Cancer Institute, USA				
R Surveillance, Epidemiology, and End Results, USA				
Union for International Can	cer Control, Geneva			
Death certificate only	Death certificate provides the only notification to the registry.			
Not available				
Not otherwise specified				
Overall/Observed survival	Overall/Observed survival (Kaplan-Meier estimate) Date of entry: diagnosis Event: death from any cause			
Relative survival	Survival compared to "general population", ratio of observed to expected survival (Ederer II method), reflecting cancer specific survival			
Assembled survival	Assembled chart of observed, expected, relative survival			
Conditional survival	Survival probability under the condition of surviving a given period of time			
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)			
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			
	National Cancer Institute, L Surveillance, Epidemiology Union for International Cand Death certificate only Not available Not otherwise specified Overall/Observed survival Relative survival Assembled survival Conditional survival Time to progression			

#### **Recommended Citation**

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