Determinants of Survival in Early Stage (T1-2N0M0) Oral Cavity Cancer – A Population-Based Study

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Abstract

Objectives: (1) Evaluate practice patterns for early stage OCSCC and (2) Compare survival outcomes for early stage OCSCC based upon treatment modality.

Methods: Retrospective review of SEER 18 Registry Database from 1988 to 2008. Data was performed for 8274 patients with T1-2N0M0 OCSCC treated from 1988 to 2008. Treatment groups included surgical resection, definitive radiation, and surgery combined with definitive radiation. Patients with prior malignancies other than non-melanoma skin cancers and those in whom the status of radiation or surgery was unknown were excluded from analysis. Univariate and multivariate analyses were performed using the Cox-Regression model. The primary outcomes were overall and disease-specific survival.

Results: Traditional management of early stage oral cavity squamous cell carcinoma (OCSCC) involves surgical resection with postoperative radiation given based upon adverse pathologic features. Despite this, current national treatment guidelines list both surgical resection and definitive radiation as adjuvant therapy options for early stage OCSCC. There remains a paucity of data comparing the two treatment modalities. The primary objectives of this study were to evaluate the practice patterns for treatment of early stage OCSCC and to compare survival outcomes by treatment modality on a population level.

Conclusions: Primary radiation without surgery continues to be used in a subset of early-stage OCSCC, where it is associated with decreased overall and disease-specific survival.

Introduction

Methods

Table: Population Characteristics

Table 1: Overall Survival and Disease-Specific Survival

Discussion

Conclusion

References