

FERNANDA GONZALEZ ROCHA SOUZA (DO); FERNANDO LUIZ DIAS; IZABELLA COSTA SANTOS.

Brazilian National Cancer Institute (INCA)



Laryngeal cancer accounts for 25% of head and neck cancer and 2% of all malignancies, accounting for the death of 83.000 people per year worldwide. According to INCA, for the 2018-2019 biennium, 7.670 new cases are estimated, with 6.390 new cases in men and 1.280 in women corresponding in incidence to 8th place for males and 16th for females.^{1,2} Laryngeal cancer and its various types of treatment can have a considerable impact on the daily life of patients.^{3,4} These treatments may result in some degree of dysfunction in speech, swallowing, breathing and appearance, making it of paramount importance to assess the quality of life of these patients.^{5,6,7,8} The instruments of evaluation of QOL are important tools to measure the effect of these treatments on the life of the patients.^{9,10}

OBJECTIVE

Evaluate the quality of life and prognostic factors of patients with laryngeal cancer covering all modalities of treatments, enrolled in the head and neck surgery section of INCA.

METHODOLOGY

Cross-sectional study in patients with laryngeal cancer, stages I to IV, covering all modalities of treatments, enrolled in the

head and neck surgery section of the INCA. The fourth version of the University of Washington Quality of Life Questionnaire was used.

PRELIMINARY RESULTS

Of the 383 patients evaluated to date, the following results were found; in relation to staging, T0 / Tis 4%, T1 14%, T2 31%, T3 34%, T4 17%. About 61% did radiotherapy. Considering the surgical modalities, 19% performed total laryngectomy, 78% partial surgeries and 3% microsurgeries. About 88% were men, 62% were smokers at diagnosis and 52% were alcoholics, 9% required TQT prior to treatment. In the UW-QOL questionnaire, 52% of the patients presented composite scores above 80.

FINAL CONSIDERATIONS

This Project is approved by CEP/INCA under No. 96/09. Despite the relatively low incidence of laryngeal cancer compared to other types of cancer, the disease's impact remains high because of treatment-related outcomes, which may have a negative functional and psychosocial impact on patients' lives. Reason that highlights the importance of studying these patients to evaluate how the different staging of the disease, its treatments and how other socio-demographic characteristics influence QOL and overall survival.

REFERENCES

- 1. GLOBOCAN 2012 (IARC). Section of Cancer Surveillance. Disponível em <u>http://globocan.iarc.fr/Pages/fact_sheets_population.aspx</u>. Acesso em 09 de jul. 2017.
- 2. INSTITUTO NACIONAL DE CÂNCER JOSÉ ALENCAR GOMES DA SILVA. Coordenação de Prevenção e Vigilância. **Estimativa 2018:** Incidência do Câncer no Brasil. Rio de Janeiro: INCA, 2017. 128 p.
- 3. SANTOS, R. A. et al. Avaliação Epidemiológica de Pacientes com Câncer no Trato Aerodigestivo Superior: Relevância dos Fatores de Risco Álcool e Tabaco. Revista Brasileira de Cancerologia 2012; 58(1): 21-29.
- 4. OOZEER, N. B. et al. Functional status after total laryngectomy: cross-sectional survey of 79 laryngectomees using the Performance Status Scale for Head and Neck Cancer. J Laryngol. Otology; 124: 412-416, 2010.
- 5. HASSAN, S. J., WEYMULLER, E. A. Jr. Assessment of quality of life in head and neck cancer patients. Head Neck 1993; 15: 485-496.
- 6. WILLIAMSON, J. S., INGRAMS, D., JONES, H. Quality of life after treatment of laryngeal carcinoma: a single centre cross-sectional study. Ann R Coll Surg Engl 2011; 93:591-595.
- 7. GHAZALI, N., LOWE, D., ROGERS, S. N. Enhanced patient reported outcome measurement suitable for head and neck cancer follow-up clinics. Head & Neck Oncology 2012 4:32.
- 8. METCALFE, C. W., LOWE, D., ROGERS, S. N. What patients consider important: Temporal variations by early and late stage oral, oropharyngeal and laryngeal subsites. J. Craniomaxillofac. Surg 42: 641-647, 2014.
- 9. ROGERS, S. N. et al. Screening for dysfunction to promote multidisciplinary intervention by using the University of Washington Quality of Life Questionnaire. Arch Otolaryngol. Head Neck Surg.; 135(4): 369-375, 2009.
- 10.LARAWAY, D. C., ROGERS, S. N. A structured review of journal articles reporting outcomes using the University of Washington Quality of Life Scale. Br. J. Oral Maxillofac. Surg.; 50: 122-131, 2012.
- 11.SOUZA, F. G. R. Avaliação da Qualidade de Vida em pacientes com neoplasias malignas avançadas de cavidade oral e laringe submetidos a cirurgias radicais. 69 f. Dissertação (Mestrado em Oncologia) Pós-Graduação em Oncologia, Instituto Nacional de Câncer José Alencar Gomes da Silva, Rio de Janeiro, 2014.

Projeto Gráfico: Setor de Edição e Informação Técnico-Científica / INCA

