

SURVIVAL EVALUATION IN PATIENTS WITH A DIAGNOSIS OF CUTANEOUS MELANOMA SUBMITTED TO SENTINEL LYMPH NODE BIOPSY

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INTRODUCTION

Cutaneous melanoma is the most aggressive and most lethal skin cancer, usually evolving with lymph node and systemic spread in the more advanced stages. Sentinel lymph node biopsy is important for the identification of the lymphatic drainage chain of the primary malignant neoplasm for the correct staging and treatment of the disease and is an important predictor of prognosis and patient selection for clinical trials.

METHODS

The study is a retrospective cohort that evaluates patients with melanoma submitted to sentinel lymph node biopsy between May 2000 and April 2010 in National Cancer Institute of Brazil (INCA), with pathological material reviewed at the Pathology Department (DIPAT) of INCA. Follow up period is 5 years. The primary endpoint is to evaluate the survival and prognosis of patients with cutaneous melanoma submitted to sentinel lymph node biopsy according to the staging of the primary lesion, Breslow thickness, mitosis and ulceration, analyzing which factors are related to the involvement of other non-sentinel lymph nodes in therapeutic lymphadenectomy. The project has a database collected from approximately 600 eligible patients during this period. For survival analysis, Kaplan Meyer method and logrank to obtain p values. Associations between measures will be evaluated using Pearson Chi-square. Associations with a p value of less than 0,05 will be considered statistically significant.

DISCUSSION

Sentinel lymph node biopsy is the fruit of several decades of experiments and observations. This technique was valid worldwide in 1992, but only in May 2000, the technique for identifying the first lymph node in the lymphatic chain to receive malignant cells from the primary malignant neoplasm, the sentinel lymph node, was used at the INCA which in turn, have not yet raised the result of this procedure in their patients, which is why they continue to use the technique recommended worldwide. Until the present time, the bibliographic material available in the national and international literature does not present conclusive results on the efficacy of sentinel lymph node biopsy in the prolongation of global survival and relapse-free survival in patients treated with melanoma. They are therefore justifications for the development of the project to survey the results achieved with the technique and the knowledge of the importance of its continuation in the INCA, a reference body for teaching, research and assistance in the country.

REFERENCES

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