

# Tilmelding af Foredrag

## Foredragets titel

Prognostic Value of Lymph Node Yield, Lymph Node Density, and pN in Oral Cancer

## Forfatter(e)

Helene Stampe (1), Kathrine Kronberg Jakobsen (2), Jesper Filtenborg Tvedskov (3), Irene Wessel (4), Katalin Kiss (5), Jeppe Friberg (6), Amanda Oester Andersen (7), Christian Grønhøj (8), Christian von Buchwald (9), and Anders Christensen (10)

## Afdeling/praksis

1., 2., 3., 4., 7., 8., 9., 10. Afdeling for Øre-Næse-Halskirurgi og Audiologi, Rigshospitalet  
5. Afdeling for Patologi, Rigshospitalet  
6. Afdeling for Kræftsygdomme, Rigshospitalet

## Uddannelsesniveau

Læge, KBU

## Introduktion

Objectives: To investigate thresholds for lymph node yield (LNY), lymph node density (LND), and pN in patients with oral squamous cell carcinoma in relation to previous findings in the literature.

## Materiale/metode

Study Design: Retrospective register-based study.  
Setting: Copenhagen Oral Cavity Squamous Cell Carcinoma database.

Methods: Appropriate thresholds for LNY, LND, and pN were determined by areas under the curve and subsequently subjected to multivariate analysis. Five-year overall survival (OS) and 3-year recurrence-free survival (RFS) were determined by Kaplan-Meier survival curves.

## Resultater

In total, 413 patients diagnosed with OSCC were included. In the pN0 cohort, no superior/prognostic LNY cutoff values were detected. In the pN+ cohort, AUC determined thresholds of LNY, LND, and pN to be 21 nodes, 5%, and 3 metastases, respectively. The 5-year OS was 52% for patients with LNY >21 vs 38% for patients with LNY <21 ( $P < .05$ ), 60% for patients with LND <5% vs 38% for patients with LND >6% ( $P < .05$ ), and 43% for patients with pN <3 vs 26% for patients with pN >3 ( $P < .05$ ).

## Diskussion

Increasing number of LNY was associated with better survival. LNY depends clearly on the technique of the surgeon and the pathologist. Besides being a prognosticator of survival, LNY has the potential as an important surgical quality indicator. LND was associated with diminished survival outcome, and based on our findings, LND could serve as an helpful tool in OSCC cancer staging and adjuvant treatment planning.

## Unavngivet

- Ønsker kun præsentation af poster

## Forfatters fulde navn

Helene Stampe

## Forfatters email



[helenestampe@outlook.com](mailto:helenestampe@outlook.com)