

PD13-05 - National Cancer Database comprehensive survival analysis of nonmetastatic rare histological variant prostate adenocarcinoma

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Introduction & Objective

- Five rare histological variants of PCa: mucinous, ductal, neuroendocrine (NEC), signet ring cell (SRC), and adenosquamous (ASC).
- Ductal, NEC, ASC and SRC display compromised survival outcomes when compared to nonvariant PCa and have been shown to present more frequently with metastases.
- Aim: to describe overall survival (OS) outcomes in men with nonmetastatic rare variant PCa.



Methods

- Selected 1,345,618 cases of PCa from 2004
 -2015 using the National Cancer Database (NCDB).
- Exclusion of individuals with metastatic disease at presentation \rightarrow 947,579
- Cases were selected using ICD-O-3 codes.



https://www.facs.org/quality-programs/cancer/ncdb



Methods

- Estimated 5-year OS for all rare variants versus nonvariant PCa.
- Cox regression studied effect of histological subtype on OS.
- Covariates: age at diagnosis, race, comorbidities, location, insurance status, household income quartile, hospital type, year of diagnosis, serum PSA, clinical tumor stage, Gleason grade group and treatment modality.



https://www.facs.org/quality-programs/cancer/ncdb



Results



Results

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Regression analyses → mortality was found to be greatest in ASC (HR: 8.49, 95% CI: 4.42-16.32) and NEC (HR: 5.73, 95% CI: 4.91-6.69) and was lowest in mucinous (HR: 1.02, 95% CI: 0.79-1.32).

Conclusions

- NEC, ASC, ductal and SRC have compromised outcomes, even when presenting at a nonmetastatic stage.
- Our findings are of importance in counselling patients and setting realistic expectations.

