中文題目：肺癌小於 2 公分的實質性變化對於疾病預後的影響

英文題目：Characteristics of solid parts on the prognosis of lung cancer less than 2 cm in size

作　　者：吳珈潤[1], 吳致瑩[2], 吳青陽[3], 王智亮[4], 楊宗穎[1], 曾政森[1], 徐國軒[1], 黃彥翔[1], 徐中平[5], 莊政諺[5], 林志鴻[5], 曾政森[1], 曾建華[6], 陳焜結[1], 張基晟[1]

服務單位：[1]台中榮民總醫院內科部胸腔內科, [2]台中榮民總醫院病理部, [3]林口長庚醫院外科部胸腔及心臟血管外科, [4]林口長庚醫院內科部肺腫瘤及內視鏡科, [5]台中榮民總醫院外科部胸腔外科, [6]衛生福利部雙和醫院胸腔內科

Background*:* Lung cancer patients can have advanced-stages at diagnosis, even the tumor size is <2 cm. We aimed to study the relationship between image characteristics, clinical, and histopatholoigcal results.

Method*:* We used Taiwan Cancer Registry (TCR) database from 2009 to 2013 for initial survey. For detailed analysis, we retrospectively enrolled lung cancer patients with primary tumor size <2 cm for lymph node (LN) and distant metastasis evaluation, with clinicopathological characteristics, including solid part ratio (SPR) (tumor diameter at the mediastinal/lung window) over chest computed tomography scans, pathological diagnosis, disease-free survival (DFS), and overall survival (OS).

Results

53,982 patients from TCR were surveyed and 3,148 had tumor size <2 cm; 18.0% had LN involvement, and 16.4% had metastasis. For detailed analysis, 307 patients were enrolled. Clinical LN involvement and distant metastasis increased significantly when SPR ≥50% compared with <50% (23.7% vs 0% for LN involvement; 29.0% vs 0% for distant metastasis; both p<0.001). For 247 surgical treatment patients, SPR ≥50% revealed more advanced pathological stage, and more tumors containing micropapillary or solid subtypes when diagnosed adenocarcinoma. With SPR ≥50%, significantly worse DFS (HR, 16.47; 95% CI, 2.14–126.77; p=0.007) and a trend of worse OS (HR, 6.40; 95% CI, 0.78–52.23; p=0.083) were noted in multivariate survival analysis.

Conclusion

For lung cancer patients with primary tumor <2 cm, SPR ≥50% was related to more advanced stages, the presence of micropapillary or solid components of adenocarcinoma subtypes, worse DFS, and a trend of worse OS.