

CLINICOPATHOLOGICAL ANALYSIS OF PROGNOSTIC FACTORS IN COLORECTAL CARCINOMA

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Key words: colorectal carcinoma, prognostic factors, tumor stage, outcome

BACKGROUND

Prediction of prognosis is vital for therapy options in patients with colorectal carcinoma (CRC). We aimed to identify some prognostic factors that could ensure a more adequate prediction of CRC patients' outcome.

MATERIALS AND METHODS

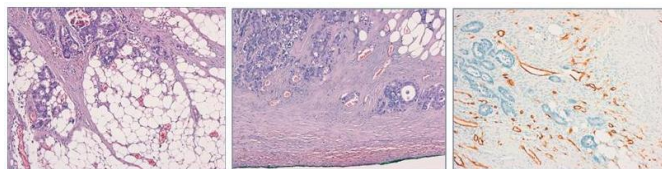
We performed a study on a group of 253 CRC patients in the County Hospital of Timișoara. The following variable parameters: age, gender, histological type, depth of tumor invasion (pT), histological grade (G), lymph node metastasis (LNM), lympho-vascular invasion (LVI) were analyzed using Fisher's exact test.

RESULTS

The incidence of CRC increased with age. Gender distribution was evidenced as follows: 159 (63%) were male patients and 94 (37%) were female patients. 234 (92%) cases were conventional adenocarcinomas (ADK nM), 19 (8%) were mucinous adenocarcinomas (ADK M). 1% of cases were pT1 stage, 9% pT2, 58% pT3 and 32% pT4 stage. 5% of the tumors were G1, 95% G2, G3, G4. In pT1&pT2 stages only 4% presented LVI, while in pT3&pT4 LVI was significantly higher, 42% of the examined cases. Only two cases from pT1&pT2 tumors showed LNM vs. 55% (127 cases) of pT3&pT4 stages.

CONCLUSIONS

Tumor stage remains the most important prognostic predictor of clinical outcome for these



patients. Pathologic assessment of various clinicopathological factors plays an essential role in patient management.

Graphical abstract: Infiltrative aspects of colorectal carcinoma

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