

## T3T4声门区喉鳞癌治疗结果和预后因素分析

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### Analysis of Treatment Results and Prognostic Factors of Advanced T3T4 Laryngeal Glottic Carcinoma

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**摘要** 目的 分析T3T4声门区喉癌预后及相关因素。方法 回顾分析110例T3T4期声门区喉鳞癌临床资料,分析不同方案治疗的生存率和预后因素。结果 总体5年生存率和控制率分别为59.1%和68.6%。其中,综合治疗组分别为72.0%和76.9%,单纯手术治疗组为50.0%和60.7%,单纯放射治疗组为41.7%和56%,差异有统计学意义(P<0.05)。(≤60岁)、颈部淋巴结阴性和原发部位控制患者的5年生存率分别为76.5%,67.8%和67.3%,高于高龄(≥61岁)(47.9%),颈部淋巴结转移(16.7%)和原发部位复发(10.7%)患者,差异有统计学意义(P<0.01)。总体复发率23.64%。病理高分化和颈部淋巴结阴性患者5年控制率分别为76.6%和73.6%,高于低分化(48%)和颈部淋巴结转移(43.6%)患者,差异有统计学意义(P<0.05)。单因素和多因素分析显示病理低分化,颈部淋巴结转移是影响肿瘤复发的独立预测因素(P<0.05);年龄、颈部淋巴结转移和原发部位复发是影响患者生存的独立预测因素(P<0.05)。结论 T3T4声门区喉鳞癌综合治疗效果优于单一治疗。病理低分化,颈部淋巴结转移是影响T3T4声门区喉癌复发的独立预测因素;高龄、颈部淋巴结转移和原发部位复发是影响患者生存的独立预测因素。

**关键词:** 鳞癌 声门区喉癌 复发 预后

**Abstract:** Objective To analyze the outcomes and factors affecting prognosis of advanced T3 T4 glottic carcinoma. Methods To review the records of 110 patient s of T3 T4 glottic squamous cell carcinoma. Sur2 vival and locoregional cont rol rates by different therapy were estimated and prognostic factors for survival and recurrence were identified. Results The overall survival and locoregional cont rol rates was 59. 1 % and 68. 6 % at five year ,the combined methods was 72. 0 % and 76. 9 % ,surgery was 50. 0 % and 60. 7 % , and radiotherapy was 41. 7 % and 56 % ,respectively ,there was a significant difference compared combined methods with radiotherapy or surgery ( P < 0. 05) . Survival rates of patient s for the young ( ≤60 years) , jugular lymph node negative and primary lesion cont rol were 76. 5 % ,67. 8 %and 67. 3 % at five year ,su2 perior to the elder ( ≥61 years) (47. 9 %) ,jugular lymph node metastasis (16. 7 %) and primary lesion recurrence (10. 7 %) respectively ,there was a significant difference ( P < 0. 01) . Overall recurrence rate was 23. 64 % . Cont rol rates of patient s of differentiation well and jugular lymph node negative was 76. 6 % and 73. 6 % ,superior to the differentiation poorly (48 %) and jugular lymph node metastasis (43. 6 %) , and had a significant difference ( P < 0. 05) . Differentiation poorly and jugular lymph node metastasis was independent predictive factors for locoregional recurrence ,and old ,jugular lymph node metastasis and pri2 mary lesion recurrence for survival on univariate and multivariate analysis. Conclusion Effect of com2 bined methods was superior to the simple for advanced glottic squamous cell carcinoma. Differentiation poorly and J ugular lymph node metastasis was independent predictive factors for locoregional recurrence , and elder ,jugular lymph node metastasis and primary lesion relap se for survival.

**Key words:** Squamous cell carcinoma Glottic neoplasm Recurrence Prognosis

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