AB005. OA01.05: Prognostic factor of T3N0M0 thymic epithelial tumor with complete resection

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Background: The 8th edition of the TNM classification for T3N0M0 thymic epithelial tumor includes tumor with invasion into different organs. We retrospectively reviewed our surgical patients undergoing complete resection for prognosticators in T3N0M0 thymic epithelial tumor.

Methods: Three hundred and ten patients with surgically treated thymic epithelial tumors were reviewed between June of 1988 and December of 2017, and 251 underwent complete resection were enrolled. Sex, age, myasthenia gravis, tumor histology, Masaoka staging, characteristics of locoregional invasion and recurrence, and the treatment for recurrence were collected. Continuous variables were compared using Student's t-test and categorical variables using the c² test, Fisher's exact test, or Spearman rank correlation. Survival analysis was performed using the Kaplan-Meier and log-rank test.

Results: Twenty-three out of 184 patients with thymoma and 36 out of 67 patients with thymic carcinoma undergoing complete resection were classified as T3N0M0. Myasthenia gravis occurred in 10 of the 23 T3N0M0 thymoma patients, whereas no patients with thymic carcinoma had myasthenia gravis. Tumor histology (thymoma vs. thymic carcinoma), lung invasion, or phrenic nerve invasion was not significantly associated with progression-free survival (P=0.621, 0.483, and 0.815, respectively) or overall survival (P=0.325, 0.501, and 0.255, respectively). Invasion into innominate vein or superior vena cava (SVC) was significantly associated with worse progression-free survival (P=0.044) and overall survival (P=0.020). Further stratification revealed invasion into innominate vein or SVC was significantly associated with worse progression-free survival (P=0.017) and overall survival (P=0.003) in T3N0M0 thymic carcinoma but not thymoma.

Conclusions: Invasion into innominate vein or superior vena cava (SVC) was a negative prognosticator in T3N0M0 thymic carcinoma undergoing complete resection.

Keywords: Thymic carcinoma; innominate vein/superior vena cava (SVC); complete resection; T3N0M0 thymic epithelial tumor

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