

Survival of breast, ovarian, and cervical cancer in Cali, Colombia. 2015-2018

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INTRODUCTION

In Colombia, the incidence and mortality rates per 100,000 women per year in 2020 due to breast, cervical and ovarian cancer were 47.8, 13.3, 6.3, and 13.6, 7.3, and 7.3, respectively (1). There are variations in the ages of presentation of these tumors, and low- and middle-income countries register the highest number of cases and deaths. The anatomical staging of the cancer is one of the most critical prognostic predictors because it makes it possible to determine a clinical-stage without molecular markers.

AIM

To determine the pathological stage and survival of patients diagnosed with breast, ovarian and cervical cancer in Cali, Colombia, from 2015-2018

METHODS

The Population-based Cancer Registry of Cali, the Secretary of Health of the District of Santiago de Cali, and the National Department of Statistics of Colombia (DANE) provided the information on incidence, mortality and life tables. Women diagnosed with breast, cervical and ovarian cancer registered between 2015 and 2018 were included. Non-invasive cancer precursor lesions were excluded. Pathologic reports determined the pathologic stage, and 5-year Net Survival was estimated using the Pohar-Perme method.

RESULTS

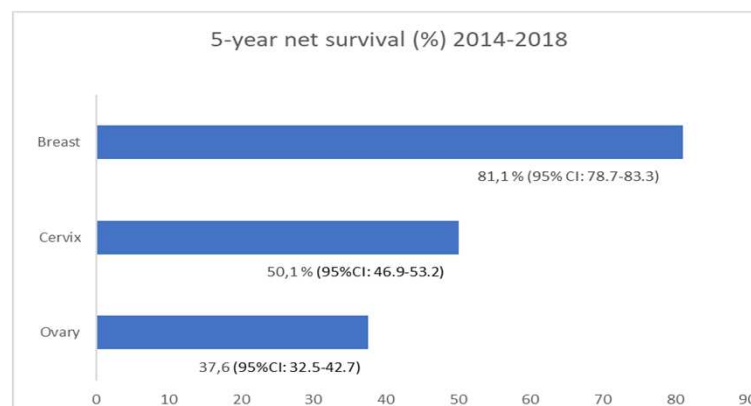


Figure 1: The Five- year Net Survival

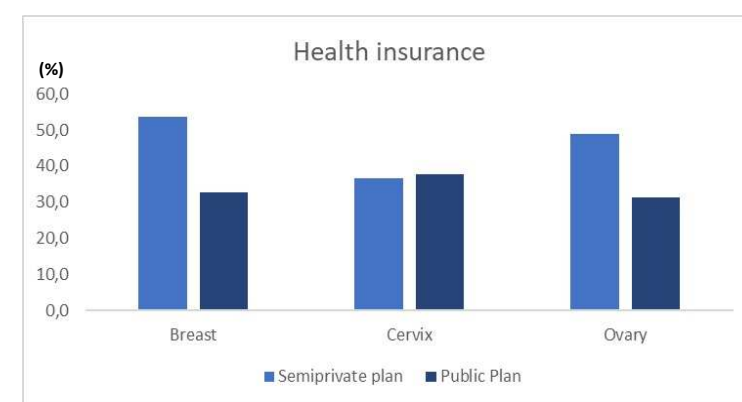


Figure 3: There were 3,325 cases of breast cancer, 830 cervical cancer, and 528 ovarian cancer. 74.2% had semi-private or public health insurance, and in women with cervical cancer, it was 64%.

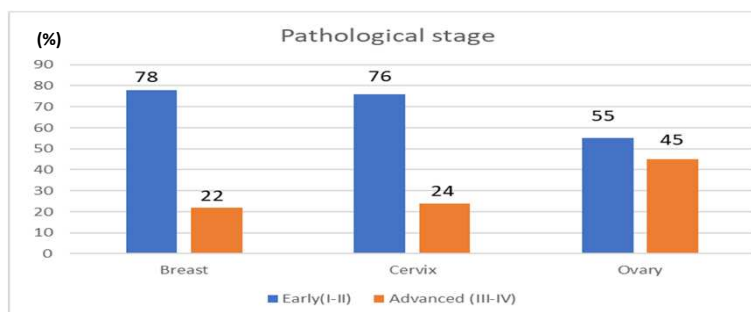


Figure 2: Staging was obtained in (1217/4683)26.9% of the cases. In this group, the early stages predominated in women with breast (78%) and cervix (76%) cancer. in ovarian cancer, 45% of the patients were diagnosed in advanced stages (III and IV).

There were 3,325 cases of breast cancer, 830 cervical cancer, and 528 ovarian cancer. 74.2% had semi-private or public health insurance, and in women with cervical cancer, it was 64%. The mean age at diagnosis was 59, 51, and 58 years, respectively.

DISCUSSION

There is a limitation in interpreting the results because the information from the pathology reports is insufficient, making it difficult to determine the staging. Women with cervical cancer had a higher proportion of health insurance granted by the state. Cancers with opportunity screening activities (breast and cervix) had a higher proportion of early stages. Advances in cancer control in Cali are not enough because differences in clinical outcomes of cancer patients persist compared to high-income countries.