

Poster 6: Characterization of Patients with Recurrent and Persistent Cervical Cancer after Chemoradiation Therapy: A Retrospective Chart Review

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Topic: Cervival

Objectives

The primary objective of this study is to characterize patients with recurrent cervical cancer greater than and less than six months after completing chemoradiation (CRT) therapy and identify risk factors for short-term recurrence, defined in this study as within six months of treatment completion.

Methods

A retrospective chart review was performed over a 5-year time frame at a large, South Texas institution with a predominantly underserved Hispanic population and high-volume cervical cancer. Patients were identified using ICD9 and 10 codes for cervical cancer. All patients with diagnosis of recurrent cervical cancer were included. Pertinent demographic, oncologic, and treatment information was collected. Primary outcome was percentage of patients with recurrence within six months of completing treatment. Statistical analysis included univariate analysis to compare variables. Fischer's exact test and Chi-squared was used for categorical variables and Wilcoxon rank sum test for continuous variables. A p value less than 0.05 is considered statistically significant.

Results

Seventy-six patients met inclusion criteria for recurrent cervical cancer during the study period. Thirty-five patients recurred within six months of completing treatment and forty-one patients had a recurrence after greater than six months. Patients with short-term recurrence were more likely to have positive amphetamine use (11.4% vs 0%, p= 0.041) than those with recurrence greater than six months. Patients with long-term recurrence had a higher incidence of proteinuria compared to those with short-term recurrence (14.6% vs 0%, p=0.027). There was no difference between groups with regard to stage, demographics, oncologic factors, and medical comorbidities.

Conclusions

Amphetamine use was significantly greater in the short-term recurrence population. Amphetamine use has been linked to cancer progression in other cancer types, due activation of DNA damage pathways. Further information is needed to determine the implications of proteinuria in patients with long-term recurrence. Characterization and identification of risk factors in patients with short-term recurrent cervical cancer may lead to early interventions, specifically substance use programs and counseling for patients with substance use disorders, with the goal of improving time to recurrence.