

Initial symptoms and their association with survival in patients with stage II-III gastroesophageal adenocarcinoma

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Background

Gastroesophageal adenocarcinoma is a devastating disease with poor overall survival (OS) even in resectable stages. Patients often suffer from symptoms such as dysphagia, weight loss, dyspepsia and gastrointestinal bleeding, which reduce the quality of life immensely. However, there exists little knowledge of the association of these initial symptoms with the OS in large European cohorts. The aim of this analysis was to investigate these factors more thoroughly to improve future patient management.

Methods

We evaluated initial symptoms and their association with the outcome in patients with stage II-III gastroesophageal adenocarcinoma treated at the Medical University of Vienna between 1990 and 2020.

Results

In total, the survival outcome of 646 patients (36% stage II, 62% stage III, 2% stage II-III) was evaluated, of which 493 (76%) patients had already died at the time of this analysis. Half of the cohort (322 pts, 50%) reported dysphagia as a main symptom at first diagnosis, 284 (44%) patients complained of weight loss, 67 patients (10%) of major weakness and 379 (59%) of dyspepsia. In initial endoscopies 202 (31%) had stenosis, 53 (8%) ulceration and 72 (11%) actively bleeding tumors. Dysphagia (median OS: no (n=209) 2.6 (95% CI 1.8-3.4) vs yes (n=322) 2.0 (95% CI 1.6-2.3) years; $p=0.012$; *Figure 1*), weight loss (median OS: no (n=236) 2.6 (95% CI 2.0-3.3) vs yes (n=284) 1.7 years (95% CI 1.4-2.0); $p=0.009$; *Figure 2*) and stenosis in endoscopy (median OS: no (n=310) 2.6 (95% CI 1.9-3.3) vs yes (n=202) 1.8 (95% CI 1.5-2.1) years; $p<0.001$; *Figure 3*) were significantly associated with the outcome. There was no statistically significant association of weakness, gastrointestinal bleeding, dyspepsia or body mass index with the OS.

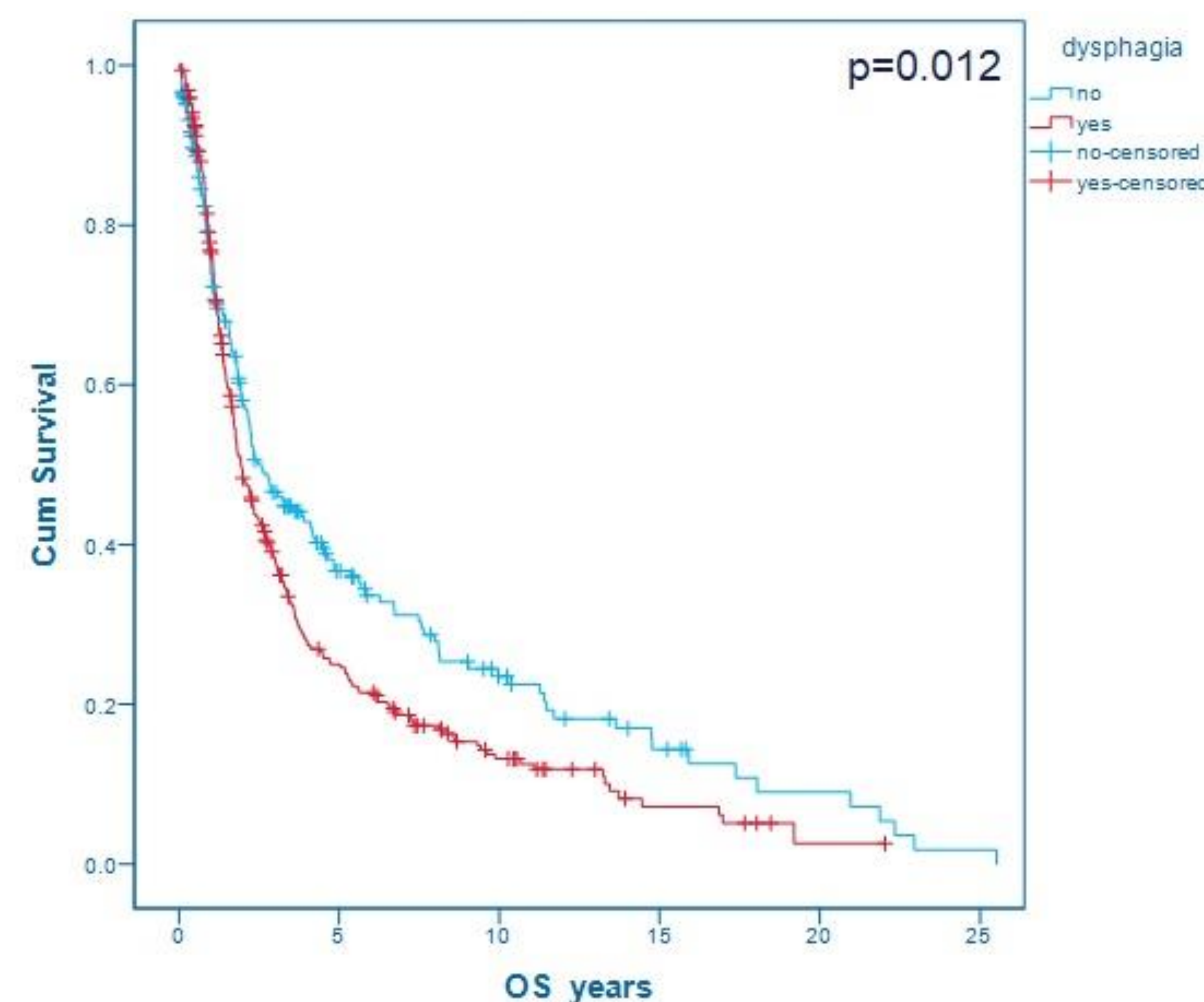


Figure 1: Association of dysphagia with the OS

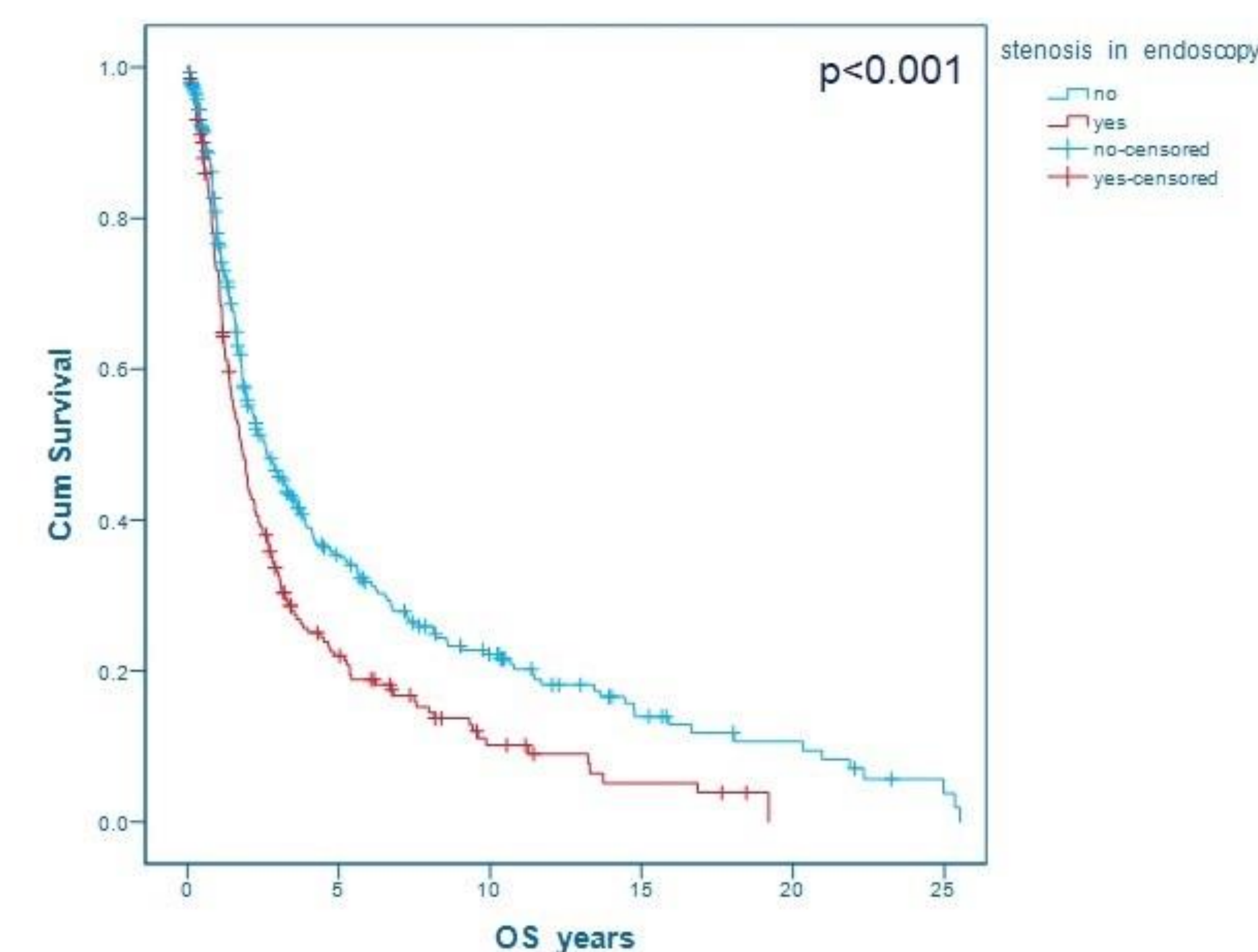


Figure 3: Association of stenosis in endoscopy with the OS

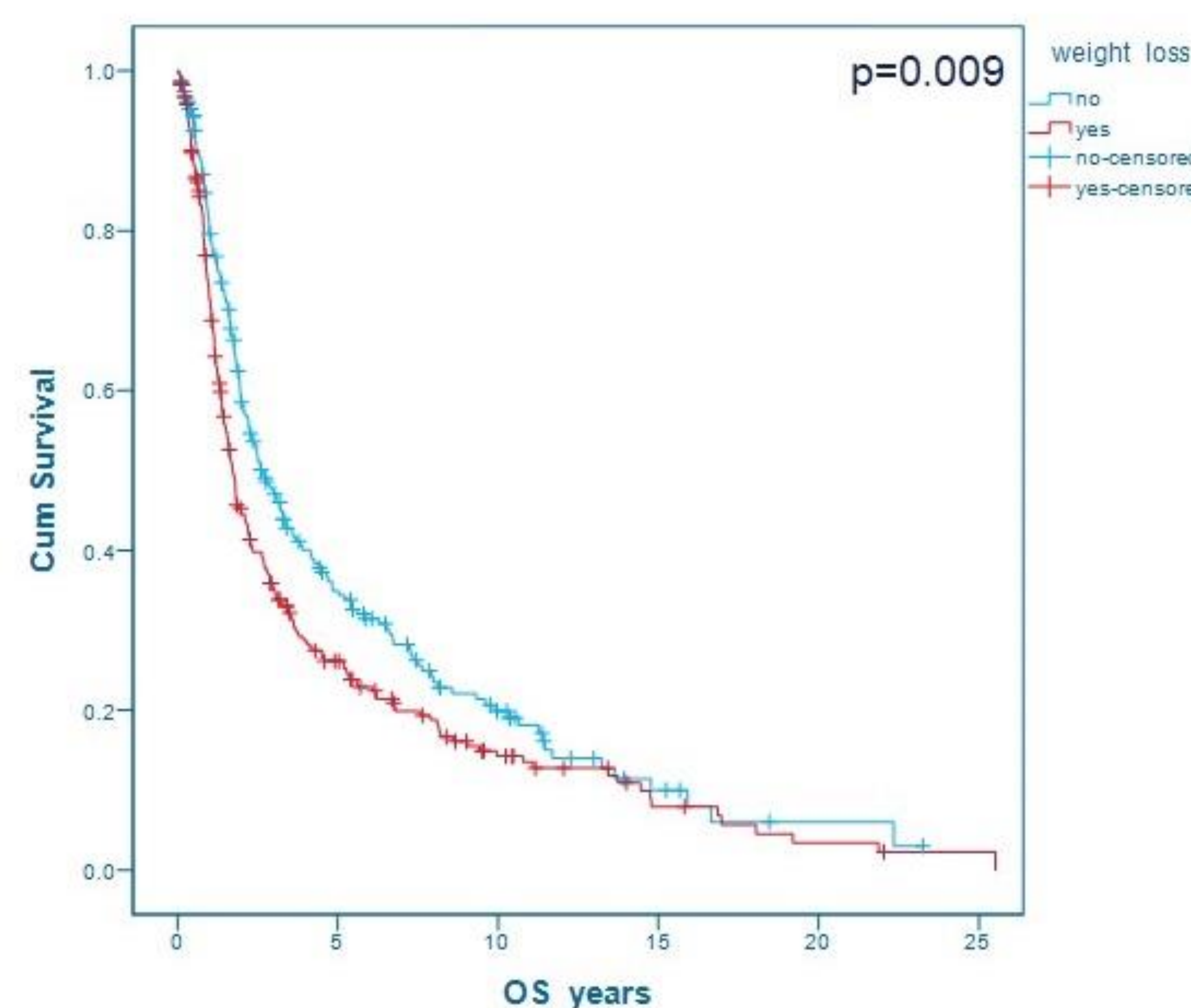


Figure 2: Association of weight loss with the OS

Conclusion

The results of this analysis of a large European cohort suggest that dysphagia and weight loss as well as stenosis in endoscopy might be prognostic markers even in resectable stages. Thus, this study is an important impulse for further prospective evaluation of these markers in this patient cohort and might lead to more awareness concerning symptoms and supportive therapeutic strategies such as nutrition counselling.

Conflicts of interest

HC.P. has received travel support from Eli Lilly, MSD, Novartis, Pierre Fabre, Pfizer and Roche.

A.I-M. participated in advisory boards from MSD and Servier, received lecture honoraria from Eli Lilly and Servier, is the local PI for clinical trials sponsored by BMS and Astellas and received travel support from BMS and Roche.

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