1	589	12.4	157815	24.0
II	303	6.4	51253	7.8
III	1190	25.0	169325	25.7
IV	2345	49.2	229240	34.8
unknown	342	7.0	50349	7.7
Histology				
Adenocarcinoma	2208	46.3	246950	37.5
Squamous	557	11.7	179428	27.3
Large Cell	443	9.3	45796	7.0
BAC	156	3.3	23836	3.6
NSCLC	578	12.1	93666	14.2
Other	827	17.3	68306	10.4

P1-037 Epidemiology and Tobacco Control Posters, Mon, Sept 3

Epidemiological study of lung cancer in western Mexico

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Objective: The aims of this study were to describe histological and clinical characteristics of lung cancer patients and its impact on diagnosis in the western region of Mexico over a period of four years and compare them with those historical series of other regions of Mexico and other countries.

Patients and methods: We studied retrospectively 1312 cases with clinical diagnosis of lung cancer, from the Department of pulmonary physiology (Western National Medical Center), from January 2002 to December 2005. Statistic analysis: Gender and age was compared with x2 test. Differences between diagnostic methods were established using comparative contingency tables. P value less than 0.05 was considered statistically significant.

Results: Accordingly gender, 57% of lung cancer patients were men and 43% women. The average age was 51 years old. 14.3% had a definitive diagnosis of lung cancer. The average of analyzed samples for each patient was 1.67; nevertheless, there was cases with until 8 samples. The average of patients with definitive diagnosis of lung cancer per year was 46.5 from 323. The most common histological type of lung cancer was adenocarcinoma (65%), followed by squamous cell lung cancer (20%). The most frequent diagnostic methods were: bronchial aspirate, pleural cytology and bronchial biopsy. Our study reveals statistical differences on frequency of lung cancer histological types compared with reports from Finland, Poland, Turkey, Spain and United States of America. Otherwise, the comparison between studies from other regions of our country and these results present similar frequencies.

P1-038 Epidemiology and Tobacco Control Posters, Mon, Sept 3

Overview of lung cancer in Dharmais National Cancer Hospital, Jakarta, Indonesia

<u>Harsal, Asrul;</u> Suratman, Eddy; Tambunan, Tagor *Dharmais National Cancer Hospital, Jakarta, Indonesia* **Background:** Lung cancer is the first cause of death in cancer patient, and Lung cancer mostly diagnosed at late stage, and survival was poor. To know the characteristic of lung cancer in our institution, we evaluated lung cancer patient about, gender ratio, mean age, stage, type of cytology, distant metastatic, treatment and others.

Methods: From January 2004 to December 2004, we collected and analyzed the data files of lung cancer patient. This is the retrospective study, some data not completely.

Results: From total of 67 patients, 51 pts are man and 16 pts are woman, and average age 57 years old. The type of cancer are; SCLC 4 % and NSCLC 96 %.

All SCLC are extensive stage, with brain metastatic, and NSCLC, stage IIIA; 2 %, IIIB; 46% and stage IV:52%.From the available data, cytology findings are; Adenocarcinoma: 54 %, Squamous Cell Ca:22 %, Large cell Ca:4 %, and no describe the type of cytology: 20 %. Distant metastatic are bones: 19 pts, brain; 6 pts, liver; 5 pts, and contra lateral of lung: 5 pts. Chemotherapy was given to 23 pts (34 %), chemoradiation for 2 pts (3%), and palliative radiotherapy for brain metastatic and bones;19 pts (28 %). Combination of chemotherapy was platinum based (cisplatin or carboplatin) combined with etoposide, paclitaxel, gemcitabine, docetaxel, and irinotecan) as first or second line chemotherapy, one patients got Gefitinib after chemotherapy.

Conclusion: Mostly diagnosis of lung cancer stage IIIB and IV. The type of cytology; Adenocarconoma is predominant, the four sites for metastatic are bones, liver, brain and lung, chemotherapy and target therapy was given for 34 % of patient.

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Multiple carcinomas in the lung cancer patients

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Background: We have observed increasing rate of patients suffering from multiple primary carcinomas over the last ten years. The aim of this study was to find significant frequencies of various malignant tumour associations, as well as common risk factors, evaluation of therapy, prognosis and survival of patients with confirmed lung cancer and additional primary malignancies.

Patients and Methods: This metastudy included 142 patients suffering from more than one primary carcinoma (synchronous or metachronous appearance), where one of the tumours was histopathologically confirmed lung cancer. Patients were registered in our department between 1995 and the fall of 2006. We have analysed their gender, age, family history, smoking status, date of the first malignancy, as well as the timing of the secondary (or tertiary) malignancies. In addition we have observed the most frequent mutual associations of the tumours, outcome of therapy, survival rates, etc.

Results: There were 118 men and 24 women, age ranging from 26 to 79 years. The longest interval between each carcinoma diagnoses was 29 years (larynx and lung cancer) and 26 years (malignant lymphoma and lung cancer). The shortest interval corresponded to a simultaneous occurrence of lung cancer duplicity with different morphology. Median time interval between malignant tumours was 3 years.

Discussion: In our group predominance of men (83%) is evident, which could be explained by pre-selection of lung carcinoma being more common in men. 84% of patients were smokers (current or