IMPACT OF SERUM ALBUMIN CONCENTRATION

AND NEUTROPHIL-LYMPHOCYTE RATIO SCORE ON

GASTRIC CANCER PROGNOSIS

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TABLE 1 – CLINICOPATHOLOGICAL FEATURES OF

PATIENTS WITH GASTRIC CANCER

BACKGROUND Preoperative immunological and nutritional status are significantly related to overall survival of cancer patients. Serum albumin concentration (COA) and neutrophil-lymphocyte ratio (NLR) are simple and widely

METHODS

FIGURE 1 – FLOW CHART OF THE STUDY DESIGN

INITIAL POPULATION (n=637)

January 2010 – December 2017 Patient treated in an Upper GI Surgery Unit



0,036

available measures of these status, that could help on riskstratification.

AIM Evaluate the **impact of COA-NLR score** on the prognosis of gastric cancer (GC) patients submitted to curative-intent resectional surgery.

68 (59-76)

226 (57,1%)

RESULTS

Age at surgery

Male

Gender

[years, median (IQR)]

	EXCLUSION CRITERIA (N	N-229)			
	55 - Non resection	nal Surgery			
	51 - Pathological s	stage IV			
score on the	25 - Histologic type adenocarcinoma	e other than	LOST		
	23 - Completion g	gastrectomy	FOLLOW-UP (N=12)		
	13 - Prophylactic g	gastrecyomy	()		
ts submitted to	8 - Atypical gastro	rectomy			
	4 - Post endoscop	pic resection			
	2 - R2 resection				
		CASES INCLUE	INCLUDED (n=396)		
$T_{ABIE 2} = SUDV/V/AU ANAUVSU$					
	Hazard Ratio	95%CI	P values		
OVERALL SURVIVAL (US)					
COA	1,130	1,086-1,176	<0,001		
	-	- -	÷		

1,004-1,222

EVALUCION ADITEDIA (NI-220)

1,061

Female	170 (42,9%)	CC		2 072	1 531-2 805	<0 001
Surgery approach				2,072	1,001-2,000	\U ,UU1
Open	201 (50,8%)		NIP adjusted to nStage an	d ago 1 566	1 1/5_2 1/3	0.005
Laparoscopic	195 (49,2%)	COA	COA-NER aujusteu to polage and age		1,140-2,140	0,005
Pathological stage						
	182 (46,0%)	DISEAS	E FREE SURVIVAL (DFS)			
	95 (24,0%)	CC)A	1,076	1,016-1,142	0,013
	118 (29,8%)	CC	DA-NLR	1,674	1,115-2,513	0,013
COA-N	ILR SCORE	Figur	RE 2 – OVERALL SURVIVAL AN	D DISEASE FREE SURV	IVAL, ACCORDING TO CO	A-NLR SCORE
			Overall Survival	004 NI	Disease Free Surviv	/al
Score u COA (≥35 g/L) + N	NLR<2,585 87	1,0 0,8				COA-NLR Score 0 Score 1 Score 2
Score 1				<u>ē</u>		
COA (≥35 g/L) + N	JLR≥2,585 82	ive Su		0,6 e N		

NLR



CONCLUSION

Higher COA-NLR score was significantly associated with worse OS and DFS.

COA-NLR was an independent prognostic factor when adjusted to pStage and age.

COA-NLR score is an easily way to stratify patients with higher risk of poor prognosis after surgery.