

Surgery associated with better survival for patients with advanced laryngeal cancer

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Patients with advanced laryngeal cancer appear to have better survival if they are treated with surgery than nonsurgical chemoradiation.

Approximately 11,000 to 13,000 cases of laryngeal cancer are diagnosed each year and [squamous cell carcinoma](#) accounts for the vast majority of these tumors. Prior to 1991, total surgical removal of the larynx with postoperative radiation was the standard of care for advanced cancer. Since then, chemoradiation has become increasingly popular treatment because it can preserve the larynx.

The authors evaluated [survival outcomes](#) for surgical vs. [nonsurgical treatment](#) for advanced [laryngeal cancer](#). The authors used data from the Surveillance, Epidemiology and End Results (SEER) database for their study of 5,394 patients diagnosed with stage III or IV laryngeal squamous cell carcinoma between 1992 and 2009.

Patients who had [surgery](#) had better 2-year and 5-year disease-specific [survival](#) (70 percent vs. 64 percent and 55 percent vs. 51 percent, respectively) and 2-year and 5-year overall survival (64 percent vs. 57 percent and 44 percent vs. 39 percent, respectively) than patients who did not under surgery. The use of nonsurgical treatment increased over time: 32 percent in the 1992 to 1997 patient group, 45 percent in the 1998 to 2003 group and 62 percent in the 2004 to 2009 group. The gap in survival between the two groups consistently narrowed over subsequent years. Patients who were diagnosed between 2004 and 2009 had better survival than those diagnosed earlier and this may be due to

improvements in radiation and chemotherapy strategies.

"Patients need to be made aware of the modest but significant survival disadvantage associated with nonsurgical therapy as part of the shared decision-making process during treatment selection." Uchechukwu C. Megwalu, M.D., M.P.H., of the Ichan School of Medicine at Mount Sinai, New York, and colleagues wrote in their article.

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