

IMPACT OF SERUM ALBUMIN CONCENTRATION AND NEUTROPHIL-LYMPHOCYTE RATIO SCORE ON GASTRIC CANCER PROGNOSIS

Jorge Nogueiro^{1,2}, Teresa Costa¹, Pedro Viegas¹, Daniel Ribeiro¹, Vítor Devezas¹, André Pereira¹, Hugo Santos-Sousa^{1,2}, José Barbosa^{1,2}, Elisabete Barbosa^{1,2}.

¹Faculty of Medicine, University of Porto.
²Department of General Surgery, São João University Medical Center



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 available measures of these status, that could help on risk-stratification.

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

RESULTS|

METHODS|

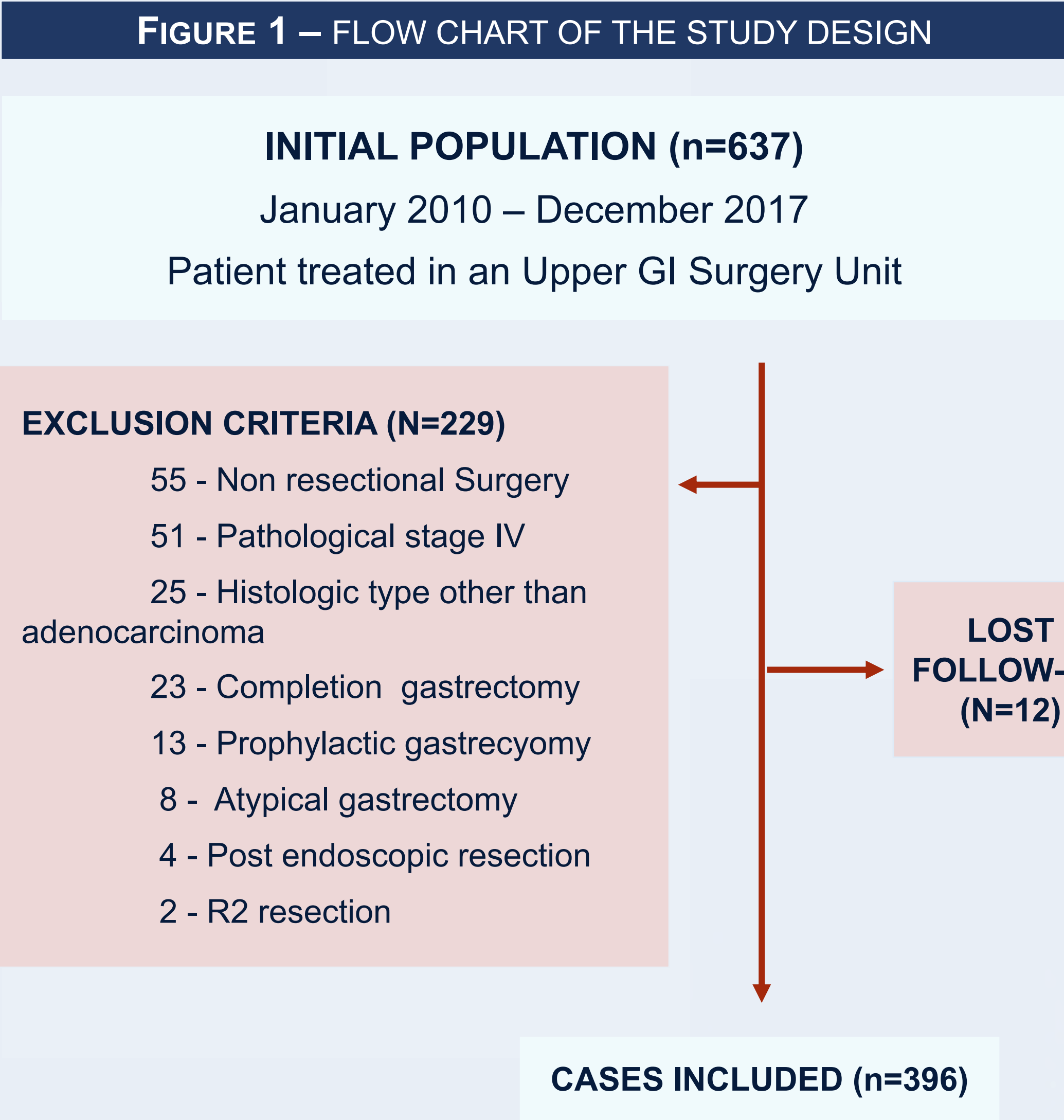
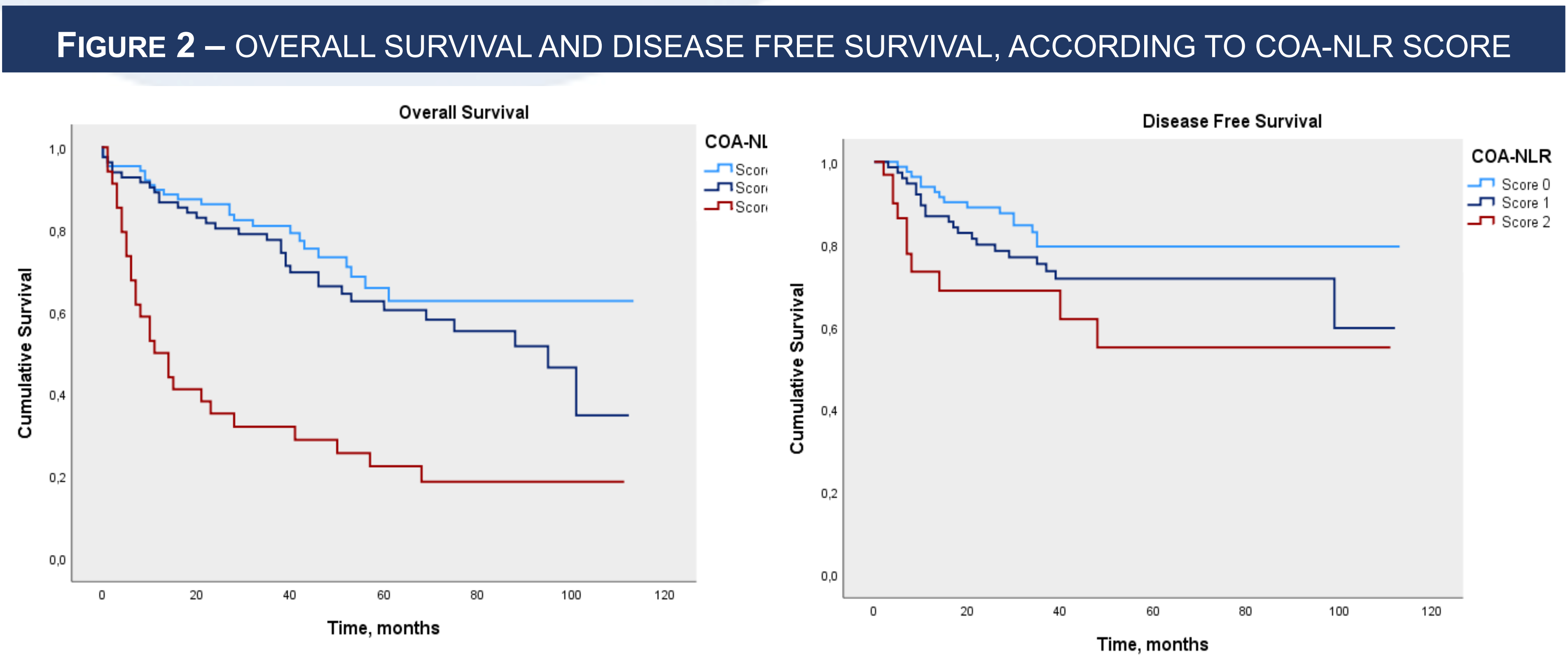


TABLE 1 – CLINICOPATHOLOGICAL FEATURES OF PATIENTS WITH GASTRIC CANCER	
Age at surgery [years, median (IQR)]	68 (59-76)
Gender	
Male	226 (57,1%)
Female	170 (42,9%)
Surgery approach	
Open	201 (50,8%)
Laparoscopic	195 (49,2%)
Pathological stage	
I	182 (46,0%)
II	95 (24,0%)
III	118 (29,8%)

TABLE 2 – SURVIVAL ANALYSIS	Hazard Ratio	95%CI	P values
OVERALL SURVIVAL (OS)			
COA	1,130	1,086-1,176	<0,001
NLR	1,061	1,004-1,222	0,036
COA-NLR	2,072	1,531-2,805	<0,001
COA-NLR adjusted to pStage and age	1,566	1,145-2,143	0,005
DISEASE FREE SURVIVAL (DFS)			
COA	1,076	1,016-1,142	0,013
COA-NLR	1,674	1,115-2,513	0,013

COA-NLR SCORE	
Score 0 COA (≥35 g/L) + NLR<2,585	87
Score 1 COA (≥35 g/L) + NLR≥2,585 COA (<35 g/L) + NLR<2,585	82
Score 2 COA (<35 g/L) + NLR>2,585	34



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.