



HUBUNGAN ANTARA STATUS KLINIKOPATOLOGIS PADA PENDERITA KANKER PAYUDARA USIA MUDA (<35 TAHUN) YANG MENJALANI OPERASI MASTEKTOMI DENGAN KEJADIAN REKURENSI LOKOREGIONAL DI RSUP DR.SARDJITO TAHUN

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Hubungan Antara Status Klinikopatologis Pada Penderita Kanker Payudara Usia Muda (<35 tahun) Yang Menjalani Operasi Mastektomi Radikal Modifikasi dengan Kejadian Rekurensi Lokoregional di RSUP dr.Sardjito Tahun 2014-2016

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Abstrak

Pendahuluan

Kanker payudara semakin meningkat insidensinya pada usia muda. Kami melakukan penelitian ini untuk melihat hubungan antara status klinikopatologis pada penderita kanker payudara pada usia muda (<35 tahun) yang telah menjalani operasi mastektomi radikal modifikasi dengan kejadian rekurensi lokoregional di RSUP dr.Sardjito tahun 2014-2016.

Metode

Penelitian dilakukan dengan subjek semua pasien kanker payudara yang berusia <35 tahun di RSUP dr.Sardjito tahun 2012-2014 yang telah menjalani operasi mastektomi radikal modifikasi. Data klinikohistopatologi dicatat dan dianalisa. Subjek dibagi menjadi usia sangat muda (<30 tahun) dan usia muda (30-35 tahun) kemudian data data rekurensi lokoregional dicatat. Variabel kemudian dibandingkan dengan uji Pearson Chi Square. Nilai $p < 0.05$ (CI 95%) dinyatakan secara statistik terdapat perbedaan bermakna.

Hasil

(-)

Kesimpulan

Terdapat perbedaan bermakna antara usia yang sangat muda terhadap rekurensi lokoregional pasien Kanker payudara. Kanker payudara pada usia sangat muda bersifat invasif dan mempunyai tipe histologi jenis ductal serta keterlibatan limfonodi yang lebih banyak dibanding pada usia muda (30-35 tahun). Perlu penelitian lanjut dengan sampel yang lebih banyak.

Kata kunci:kanker payudara, usia sangat muda, rekurensi lokoregional



CORRELATIONS BETWEEN CLINICOPATHOLOGIC FACTORS TO LOCAL-REGIONAL RECURRENCE AMONG EARLY BREAST CANCER (<35 y.o.) AFTER MASTECTOMY IN SARDJITO GENERAL HOSPITAL 2014-2016

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Background

Early breast cancer patient tends to increase every year. It has higher degree of malignancy, higher recurrence, and worse prognosis than old age. We studied clinicopathologic factors that play significant role in local-regional recurrence after mastectomy in Sardjito General Hospital 2014-2016

Methods

We analyzed early breast cancer patient's (<35 y.o.) who underwent mastectomy and has local-regional recurrence in 1 year of follow up. Data were collected from medical record and pathology anatomy laboratory. We observed clinicopathological factors i.e. age, stade, subtype, size, limph node status, and grade. Chi square and fisher exact test were used to analized.

Result

From 92 samples, recurrence was found in 17 patients (18,48%). Twenty one patients (22,83%) were 20-30 y.o. and 71 were 30-35 y.o. (77,18%), with tumor size <2cm (3 patients, 3,27%), 2-5 cm (40 patients, 43,47%), >5 cm (49 patients, 53,26%). Tumor stage I-II was found in 12 patients (48,91%), stage III-IV in 80 patients (51,09%). There were 11 patients with no limph node affected (11,95%), 1-3 (42 patients, 45,66%), 4-9 (29 patients, 31,53%), >9 (10 patients, 10,86%). Grade I was found in 10 patients (10,86%), II (37 patients, 40,22%), III (45 patients, 48,92%). There were 54 patients with ER positive (58,70%), PR positive was found in 28 patients (30,43%), Her2Neu was positive in 27 patients (29,35%). Luminal A was found in 46 patients (50%), Luminal B 18 patients (19,57%), Her2Neu overexpression 15 patients (16,30%), There were 13 patients with Triple negative (14,13%). Clinicopathologic factors that play significant role in local-regional recurrence ($p < 0,05$, CI 95%) were nodal status ($p = 0,000067$) and grade ($p = 0,008905$).

Conclusion

Local-regional recurrence rate among early breast cancer was high (18,48%). Nodal status and grade were significant factors for local-regional recurrence.

Key words: Early breast cancer, local-regional recurrence, clinicopathologic factors.