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Impact of the new immunohistochemical panel for the diagnosis of lung cancer on overall patients outcome

A. Bordoni¹, M. Bongiovanni², P. Mazzola¹, L. Mazzucchelli², A. Spitale¹

¹Ticino Cancer Registry, Institute of Pathology, Locarno, Switzerland,

²Institute of Pathology, Locarno, Switzerland

Background. The availability of targeted therapies created the need for precise subtyping of lung cancers. Aim of the study is to analyse the impact of the new immunohistochemical diagnostic panel on incidence and survival of lung cancer patients by histotypes.

Methods. Patients were selected from the Ticino Cancer Registry and categorized into the four WHO-defined histotypes. 2-year overall survival (OS) was performed for patients with a 24-month complete follow-up (incidence period 1996–2008). Trend analysis of survival probability was computed.

Results. 2467 lung cancers were selected: 40.4% adenocarcinoma; 21.2% large cell carcinoma, 15.3% small cell carcinoma, 23.1% squamous cell carcinoma. We observed an increasing trend of 2-year OS of all cases, an improved and decreased OS in SqCC and LCC, respectively.

Conclusions. The introduction of an immunohistochemical panel could have influenced not only the incidence of different lung cancer subtypes, but also the short-term outcome of patients, raising the need for

cautious interpretations of previous studies and clinical trials where the diagnosis of lung cancers was based on histological evaluation without ancillary immunohistochemical studies.