Extracapsular nodal extension and tumor deposits in Head and Neck Squamous Cell Carcinoma

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Abstract

Background Tumor deposits (TD) are considered as Extranodal Extension (ENE) in the AJCC 8th edition of Head and Neck Squamous Cell Carcinoma (HNSCC) TNM staging. Methods We analyzed TDs in patients with HNSCC who underwent surgery and adjuvant radiotherapy ± chemotherapy. Overall Survival (OS) and progression rate were compared to patients with ENE. Results ENE was detected in 50 patients, while TDs in 21. Based on the presence of ENE alone or TDs, the mean time to progression was significant (p<0.005). OS at three years was 55.7% for the whole study group, 60.4% in ENE and 38.4% in TDs. OS difference between the N2a-ENE, N3b-ENE, and the TDs ± ENE group was significant (p=0.05). The hazard ratio between ECs and TDs was Exp (B) 2.296 (p= 0.027). Conclusions The prognostic implication of TDs represents an independent risk factor, and a separate classification might be required.
The authors indicated no potential conflicts of interest.

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**Keywords:** Extranodal extension; Tumor Deposits; head and neck squamous cell carcinoma; pN3b classification; Prognosis.

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