

Epidemiology of the Surviving Long patient of the Aljarafe-Sevilla North Health District in 2018

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One of the consequences of progress in cancer diagnosis and treatment is the increase in survival in recent decades in Europe and Spain. The number of new cancer cases is increasing due to an ageing population and the number of survivors will grow. Survival, among all cancers, is estimated to be 47.3% in men and 55.8% in women¹ and survival for high-incidence tumors, such as colorectal, breast and prostate cancer, will be greater than 50%, 86% and 71.4%, respectively in 2012. The demographic characteristics of the cancer population determine that there will be 26 million survivors by 2040, most will be between 60, 70 and 80 years old.

This is a pressure on health systems and shows the limitations to meet them in the current monitoring model. Care priorities should be identified, organizational models of clinical-health management reviewed; propose a frame of reference, integrate care levels, including primary care, to evaluate the best care options for these patients in our healthcare environment.

The knowledge available about the health of long-evolving survivors is still limited. Current information comes from studies on breast cancer survival, due to its prolonged survival, in other high-prevalence tumors, long-term physical, functional, psychological or sociocultural sequelae have not yet been sufficiently studied.

The concept of long survivor is identified by the vision of both the survivor and the medical point of view defining it from the moment Diagnosis of cancer, after finalizing the treatment toctivo, or survivor 3-5 years after having overcome the Disease.

In Spain it is estimated that there are currently around 1,500,000 people who have overcome an oncological pathology. It is the second leading cause of death and accounts for 26.4 of all deaths.

In Spain in 2018, 270,363 new cases (incidence) of invasive cancer (standardized rate by world population of 272.3 cases per 100,000) were diagnosed: 155,971 in men (328.6 cases per 100,000) and 114,392 in women (227.1 cases per 100,000). In men, the five most common cancers are: prostate, colorectal, lung, urinary bladder and kidney. In women: breast, colorectal, lung, uterine body and pancreas.

In Spain in 2018, a total of 113,584 deaths have occurred (standardized rate per world population of 92.3 per 100,000): 68 919 in men (124.8 cases per 100,000) and 44,665 in women (65.9 deaths per 100,000). It's the Second Leading Cause of Death

The overall one-year survival rate is estimated at 68.9% in men and 75.0% in women and five years is estimated at 48.9% in men and 58.0% in women. In breast cancer, 5-year survival reaches 85% and prostate cancer is 90%. Spain is in an intermediate position, with respect to the countries of the European Union.

The prevalence of cancer in people who were diagnosed with cancer (in the last 3, 5 or 10 years) increases, people live longer and survive longer. The estimated prevalence in men at 1, 3 and 5 years is 105,559, 251,258 and 356,427 respectively. In women, the figures are 84,409, 215,796 and 322,341, respectively. The most prevalent cancers at age 5 in men are: prostate, colorectal and urinary bladder, while in women they are: breast, colorectal and body of uterus. More than 60% of cancer survivors are over 65 years of age. The number of prevalent cases is expected to increase over time.

Objective: Increased incidence of new cancer cases, decreased overall and specific cancer mortality; have increased the incidence of neoplasms in the world. At the same time, improving the effectiveness of antineoplastic therapies has led to an increase in the prevalence of "long survivors" (LS, survival 5 years). According to SEOM, more than 50% of cancer patients will live at least 5 or more years after diagnosis, although there are no reliable data on the prevalence of LS in our country. For this reason, this study is carried out. The objective was to describe the prevalence and characteristics of cancer patients in the Aljarafe-Sevilla Norte Health District (DSASN).

Methodology: A cross-sectional descriptive study was conducted, using anonymised databases, of living patients in the study period (year 2018) who had in their registered medical history the diagnosis of breast (CM), prostate (CP), rectal colon (CCR) and uterine body (CCU) cancer. Statistical analysis was descriptive and bivariate using SPSS-22.

Results: Of the 663119 inhabitants registered in the DSASN, 7366 had at least one of the neoplasms studied in their medical history (Prevalence 1.1%). Of the total, 4342 (59.0%) they were women. The average age was 65.6-13.8 (95% CI 65.32-65.95). In order of frequency, the tumors tested were CM 3430 (46.6%), CP 2008 (27.3%), CCR 1752 (23.8%) CCU 170 (2.3%). Of the total number of patients, 3086 were LS (Prevalence 0.47%). Among them, the highest average survival was for CCU 9.1 years in a row of CCR and CM with 8.5 and CP with 7.9 years. Of these, 1581 did not develop relapses (R) or second neoplasms (SN), 851 had R, 6 synchronous SNs and 648 meachronic SNs.

Conclusions: The Prevalence of Long Survivor in the Aljarafe Sevilla-Norte Health District was 0.47% that meant an average of 7 patients per quota. Global average survival was established at 8.3 years. The increase in LS means a new scenario that requires the review and reformulation of the current care model of Palliative Care, adapting the provision of services to these patients with new treatment needs and care plan associated with late relapses and Second Neoplasms.

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