

Title	甲状腺癌の治療成績（補遺）：年令と予後
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甲状腺癌の治療成績(補遺)

年令と予後

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Treatment of Thyroid Cancer (Supplement)

Correlation between Age and Prognosis

By

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Previously a report on the treatment of thyroid cancer was published by the present authors²⁾. Most cases were treated with surgery and postirradiation with X-ray or cobalt 60. This time, by the hand of the same material, a few analyses of the result are made.

When we assess 12 deceased cases out of treated 76, a tendency is observed that the cases experienced a longer period between the onset of symptoms and the initiation of treatment had more benefit prognosis than those who visited surgeons shortly after awareness of their disease (Fig. 1). This means that the course of the disease *per se* has marked influence on the prognosis.

The influence of age on the prognosis was then studied. While there were 45 cases (59.2%) of less than 50 year old, none was died. On the other hand, comparing the age-corrected cumulative survival rate²⁾ of every decade (Table 2, Fig. 2), one can recognize that older the patient, worse the prognosis. This result is in accordance with Halman's report¹⁾.

先にわれわれの教室で昭和26年4月から39年3月までに治療した甲状腺癌について報告したが、その際検討し残した点についてここに報告する。

対象ならびに治療法は本誌27巻³⁾に記載してあるが、概要を記すと、総数76例、乳嚢状ならびに濾胞状腺癌87%、未分化癌5%、その他4%、不明4%である。ほとんどが手術と放射線治療(エックス線またはCo⁶⁰の後照射)の併用である。

一般に、癌は早期発見の重要性が強調せられる一方、初診時までの経過が長いもの程予後がよいということもいわれる。われわれの例で、症状初発から治療開始までの経過期間と予後との関係を見ると(第1表)、相関は見られないが、一応組織

Table 1. Correlation of the Prognosis and the Interval between the Onset of Symptoms and the Initiation of the Treatment.

The Interval between the Onset of Symptoms and the Initiation of the Therapy	No. of Cases	Died	Approximate Ratios of Died to No. of Cases
< 1mo.	6	0	0/6
1 mo. < 6 mo.	11	3	1/4
6 mo. < 1 yr.	12	1	1/12
1 yr. — 3 yr.	22	2	1/11
3 yr. — 5 yr.	11	1	1/11
5 yr. — 10 yr.	7	2	1/3
10 yr. <	7	3	1/2

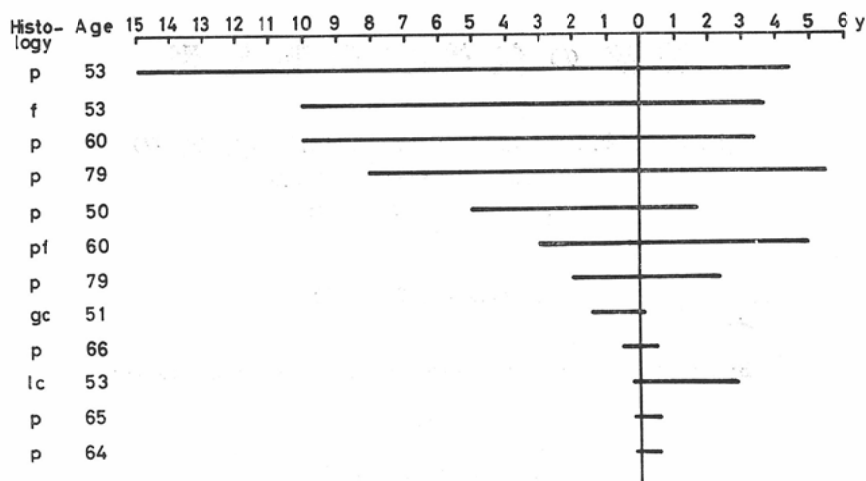


Fig. 1. Correlation of the prognosis and the interval between the onset of symptoms and the initiation of the treatment, and age and pathologic diagnosis, concerning with 12 deceased cases. p designates papillary adenocarcinoma, f follicular adenocarcinoma, pf mixed papillary and follicular adenocarcinoma, gc undifferentiated giant cell carcinoma, and lc undifferentiated large cell carcinoma.

像を問題にせず死亡した12人をグラフにとつてみると(第1図),発症より治療開始までの期間が短いもの程予後が悪い傾向が見られる。病気の経過の緩慢なものは医者にかかるのが遅れるが予後は割と長く,経過の早いものは早く医者にかかるにかかわらず予後が短い。

Table 2. Age-corrected Cumulative 5 Year Survival

Age at Diagnosis	No. of Cases	Crude Cumulative 5 Year Survival Rate	Age corrected Cumulative 5 Year Survival Rate
10-49	45	100	100
50-59	20	68.5	70.0
60-69	9	41.5	43.8

また年齢との関係を見ると,初診時50才未満のものが45人(59.2%)あるにかかわらず死亡者は1例もなく,10才ごとに余命補正累積生存率²⁾を求めてみると(第2表,第2図),年代が進むに随つて予後が悪くなっている。第2図で一番上の線が10才から49才までの患者で,二番目が50才から59才まで,一番下の線が60才から69才までである。Halman¹⁾も年をとる程予後が悪いといつて

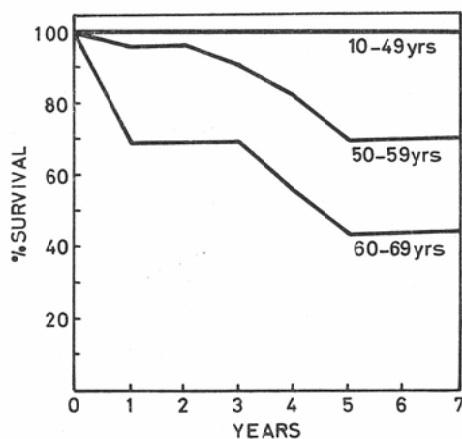


Fig. 2. Survival of thyroid cancer, related to age at diagnosis.

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