

(19.2%), 간(11.5%), 뇌(7.7%) 순서였다.

원격전이에 영향을 미치는 인자로 AJC의 T병기, N병기, Ho의 T병기, N병기, 연령, 성별, 치료방법, 방사선 치료에 대한 관해율, 세포유형등을 분석해보았으나 Ho의 N병기에서만 NO, N1, N2, N3로 감에 따라 원격전이의율의 증가 양상을 보였다($p < 0.05$).

원격 전이 발생시기는 환자의 81%에서 방사선 치료 시작부터 2년이내에 일어나는 것을 보여 비교적 초기에 발생함을 알수 있었다. 원격전이가 발생한 26명의 환자에 있어서, 원격전이후 생존율을 살펴보면 중앙 생존치가 9개월이었고 1년생존율 40%, 2년 생존율 21.8%를 보여 비인강암 환자에서 일단 원격전이가 발생하면 그 예후가 불량함을 알 수 있었다.

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Advanced T3 and T4 Glottic Carcinoma ; Yumc Experience(1980-1988)

*Department of Radiation Oncology Yonsei
University College of Medicine*

Hyun Soo Shin, M.D., Hyung Sik Lee, M.D.,
Eun Ji Chung, M.D., Gwi Eon Kim, M.D.,
Juhn Kyu Loh, M.D., Chang Ok Sun, M.D.

Between January 1980 and September 1988, 68 patients with advanced T3 & T4 glottic carcinoma were treated with irradiation alone and irradiation + surgery in the Department of Radiation Oncology and ENT, Yonsei University College of Medicine.

The mean age was 60 years old (range 33 to 79 years old). The 34 patients were treated with irradiation alone, and the remaining 34 patients with surgery and irradiation. Initial nodal presentation was 37% (25/68) ; 31% (11/34) in RT alone group and 41% (14/34) in combined treatment group. The minimum follow-up was 2years.

The local control rate after treatment was 59%

in RT alone group and 74% in combined treatment group ; 65% for node negative and 45% for node positive patients treated with RT alone ; 75% for node negative and 71% for node positive patients treated with combined treatment. The treatment failure was observed in 26 patients ; 13 patients for primary local failure, 6 patients for regional nodal failure, 5 patients for local and regional failure, 2 patients for primary failure and distant metastasis, and 2 patient for regional failure and distant metastasis. The overall 5-year survival rate was 59% ; 47% in RT alone group and 71% in combined treatment group ; 58% for node negative and 45% for node positive patients treated with RT alone ; 60% for node negative and 86% for node positive patients treated with combined treatment.

In conclusion, RT alone is prefer in patients with node negative as a treatment modality over combined surgery and RT since the treatment results were comparable and furthermore functional preservation could be achieved.

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설암에서 DNA Ploidy의 예후인자로서의 중요성

예수병원 외과, 해부병리과*

박윤규 · 이삼열 · 박상희
정을삼 · 이광민*

원광대학교 의과대학 미생물과교실

정 헌 택

설암은 임상적으로 진행이 빠르고 그 예후가 매우 불량한 것으로 여겨지고 있다. 또한 병리학적 병기(stage)외에는 예후 측정을 위한 다른 방법이 많이 알려져 있지 않다. 저자들은 1983년부터 1988년까지 만 6년간 예수병원 두경부 중앙외과에서 경험한 설암환자 총 65명 중 유식세포 분석 분리기