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abstract

Profile of Surviving Children With Malignancy – Experiences from National Institute of Cancer Research and Hospital, Bangladesh

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Profile of Surviving Children With Malignancy – Experiences from National Institute of Cancer Research and Hospital, Bangladesh

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Introduction: Childhood Cancer is the leading cause of death in children below 18 years. The survival rate is as low as 20% in Low- Middle Income Countries (LMIC). In Bangladesh high dropout rate, delayed diagnosis, and advanced advanced-stage disease cause the survival rate to be as low as other LMICs. The Department of Pediatric Hematology and Oncology (PHO) of NICRH, Bangladesh, started services to children with malignancy in 2008. The center acts as a tertiary-level cancer referral center for the whole country. The center doesn't have any survivorship data yet. The study was done to see the profile of surviving children among the treated children.

Methodology: The cross-sectional study was done on 30th June 2024 on children with malignancy who attended the PHO department of NICRH, Bangladesh from January 2016 to December 2020. Data was collected from a new patient registration book, follow-up records, and over the telephone from legal guardians.

Results: From January 2016 to December 2020, a total of 3080 new children with malignancy attended the pediatric outpatient department. On the last follow-up, of total of 1500 (48.7%) cases could be traced. Among these, a total of 546 children were found alive with a survival rate of 36.4% from contacted children (n=1500). The age range of surviving children is 4 months to 18 years with a Mean of 8.3 years \pm 4.4SD. Male: Female =1.6:1. Survival time ranges from 3.5 to 8.5 years with a median of 5.5 years. The highest survival rate was found in the year 2017 (47.2%) and the lowest in 2016 (26.8%).

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Survival is most commonly found in children with Hodgkin Lymphoma (72;13.2%), then Malignant bone tumor(61;11.2%), Retinoblastoma(59; 10.8%), CNS tumor (53; 9.7%), RMS and STS (48; 8.8%), Germ cell tumor(43; 7.9%), Wilms tumor(40; 7.3%) followed by NHL(34; 6.2%), ALL (27; 4.9%) and rare pediatric tumor like NPC(23; 4.2%) and LCH(19; 3.5%).

Conclusion: A low survival rate is found among treated children with malignancy like other LMICs.