

Hubungan obesitas dengan proporsi ukuran tumor menggunakan ultrasonografi, keterlibatan KGB aksila dan derajat histopatologi pada kanker payudara stadium I-III A di RSUPNKM tahun 2012-2014 = association between obesity with tumor size proportion by ultrasound axillary lymph node involvement and histopathological grading in breast cancer stage I-III A in Cipto Mangunkusumo Hospital 2012-2014

Wanita Idola, author

Deskripsi Lengkap: <https://lib.ui.ac.id/detail?id=20415131&lokasi=lokal>

Abstrak

[ABSTRAK

Tujuan: Menentukan hubungan obesitas dengan proporsi ukuran tumor, keterlibatan KGB aksila dan derajat histopatologi pada pasien kanker payudara stadium I – III A di RSUPNKM, serta membantu meningkatkan kualitas tatalaksana bagi klinisi.

Metode: Analisa menggunakan data sekunder pada pasien kanker payudara stadium I – III A. Dikatan obesitas bila indeks massa tubuh ≥ 25 kg/m² dan non obesitas < 25 kg/m². Hasil ukuran tumor dikelompokkan menjadi < 2 cm, 2-5 cm dan > 5 cm berdasarkan sistem staging TNM AJCC. Ukuran tumor diperoleh melalui pencitraan ultrasonografi payudara yang tersimpan pada sistem PACS. Keterlibatan KGB aksila serta derajat histopatologi diperoleh dari hasil ekspertise patologi anatomi.

Hasil: Jumlah subyek penelitian sebanyak 52 pasien kanker payudara stadium I– III A tahun 2012 - 2014 di RSUPNKM terdiri dari 26 pasien obesitas dan 26 pasien non obesitas. Tidak ada hubungan yang bermakna antara ukuran tumor berdasarkan staging dengan obesitas (P= 0,795 (uji chi square)). Tidak terdapat hubungan yang bermakna antara obesitas dengan derajat histopatologi (P=0,610, (uji mutlak fisher)). Tidak terdapat hubungan yang bermakna antara obesitas dan keterlibatan KGB aksila (P =0,404 (uji chi square)). Median ukuran tumor pada pasien obesitas 2,95 cm dan pasien non obesitas 2,73 cm. Dari 26 pasien obesitas, 25 diantaranya memiliki derajat tinggi. Dari 26 pasien non obesitas, 14 memiliki keterlibatan KGB aksila.

Kesimpulan: Pasien kanker payudara yang obesitas tidak berhubungan dengan besarnya ukuran tumor, keterlibatan KGB aksila dan derajat histopatologi yang tinggi. Namun terdapat kecenderungan pasien kanker payudara yang obesitas memiliki ukuran tumor yang lebih besar dan tingginya derajat histopatologi. Sedangkan keterlibatan KGB aksila lebih cenderung pada pasien yang non obesitas.

<hr>

ABSTRACT

Objective: Determine the relationship of obesity with tumor size proportion, axillary lymph node involvement and histopathological grading in breast cancer patients stage I-III A in Cipto Mangunkusumo hospital and to help improvement the quality of management by clinician.

Methods: Analysis using secondary data of breast cancer patient stage I-III A. Obesity grouped if body mass index ≥ 25 kg/m² and non obese < 25 kg/m². The results of tumor size are grouped into 0-2 cm, 2-5 cm and > 5 cm based on the AJCC TNM staging system. Tumor size obtained through breast ultrasound imaging from PACS system. Axillary lymph node involvement and histopathological grading obtained from the anatomical pathology expertise.

Results: The study subjects are 52 patients with stage I-IIIa breast cancer in 2012-2014 in Cipto Mangunkusumo consisted of 26 obese and 26 non-obese patients. There is no significant relationship between tumor size based on staging with obesity ($P = 0.795$ (chi square test)). There was no significant relationship between obesity and grading histopathology ($P = 0.610$, (absolute test fisher)). There was no significant relationship between obesity and the involvement of axillary lymph nodes ($P = 0.404$ (chi square test)). The median tumor size of 2.95 cm in obese patients and 2,73 cm in non-obese patients. From 26 obese patients, 25 of them had a high grading histopathology. From 26 non-obese patients, 14 of them had involvement of axillary lymph nodes.

Conclusion: Breast cancer patients who are obese are not related to the larger tumor size, involvement of axillary lymph nodes and a high grading of histopathology. However, there is a tendency that breast cancer patients who are obese had larger tumor size and high grading of histopathology. Whereas the involvement of axillary lymph nodes are more likely in non-obese patients., Objective: Determine the relationship of obesity with tumor size proportion, axillary lymph node involvement and histopathological grading in breast cancer patients stage I-IIIa in Cipto Mangunkusumo hospital and to help improve the quality of management by clinician.

Methods: Analysis using secondary data of breast cancer patient stage I-IIIa. Obesity grouped if body mass index ≥ 25 kg/m² and non obese < 25 kg/m². The results of tumor size are grouped into 0-2 cm, 2-5 cm and > 5 cm based on the AJCC TNM staging system. Tumor size obtained through breast ultrasound imaging from PACS system. Axillary lymph node involvement and histopathological grading obtained from the anatomical pathology expertise.

Results: The study subjects are 52 patients with stage I-IIIa breast cancer in 2012-2014 in Cipto Mangunkusumo consisted of 26 obese and 26 non-obese patients. There is no significant relationship between tumor size based on staging with obesity ($P = 0.795$ (chi square test)). There was no significant relationship between obesity and grading histopathology ($P = 0.610$, (absolute test fisher)). There was no significant relationship between obesity and the involvement of axillary lymph nodes ($P = 0.404$ (chi square test)). The median tumor size of 2.95 cm in obese patients and 2,73 cm in non-obese patients. From 26 obese patients, 25 of them had a high grading histopathology. From 26 non-obese patients, 14 of them had involvement of axillary lymph nodes.

Conclusion: Breast cancer patients who are obese are not related to the larger tumor size, involvement of axillary lymph nodes and a high grading of histopathology. However, there is a tendency that breast cancer patients who are obese had larger tumor size and high grading of histopathology. Whereas the involvement of axillary lymph nodes are more likely in non-obese patients.]