



Sinonasal Adenocarcinoma—Experience of an Oncology Center

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ABSTRACT

Introduction and Objectives: Sinonasal tumours represent only 3% of all head and neck cancers. Adenocarcinoma is the second most frequent histopathology type. Hardwood exposure has been considered a risk factor. Sinonasal adenocarcinoma grows silently which leads to a late diagnosis and low survival rates. The aim of this study was to present our experience in the management of the patients with sinonasal adenocarcinoma.

Method: Retrospective medical records review of patients with sinonasal adenocarcinomas (1974 to 2009).

Results: From 301 patients with sinonasal tumors, 67 had histology of adenocarcinoma. Patient average age was 60.1 ± 11.1 years (30 - 84 years). 83.6% were man. 65.7% had history of working with wood. 70.1% of the patients had advance disease. The most common treatment strategy was external surgery (lateral rhinotomy (47.8%), sublabial (17.9%) or cranio-facial resection (6%)) or endoscopic approaches with postoperative radiotherapy. The 3 and 5 years overall survival rate were 60% and 49%, respectively.

Conclusions: Our group study showed similar epidemiologic characteristics than other series. We confirmed sinonasal adenocarcinomas tendency to late diagnosis and wood dust exposure relation. In our experience, the limited surgical treatment (without craniofacial resection) and postoperative radiotherapy has good survival rates results, similar to other departments who consider the craniofacial resection as the standard treatment.

KEYWORDS

Sinonasal Adenocarcinomas; Wood Dust; Surgical Treatment; Radiotherapy

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