

*Materials of Conferences***ANALYSIS OF SURVIVALS OF PATIENTS WITH NEWGROWTHS WITHOUT PRIMARY-DIAGNOSED FOCUS**

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Prognosis and survival of cancer patients mostly depend on the stage of sickness that defines on the base of introoperational findings, histological structure of newgrowth and the level of its differentiation. The patients with newgrowths without primary-diagnosed focus are often admitted to in-patient department with 3–4th stage of newgrowth process that affects the prognosis of sickness.

Aim of the research: to study survivals of the patients with newgrowths without primary – diagnosed focus.

Materials and methods of research. 204 patients with newgrowths without primary-diagnosed focus, treated in PSE “Regional oncological health center” in Karaganda city during 2006–2014 and department of palliative aid of clinic hospital in Lodz city (Poland) were exposed to analysis. Depending on pathogenic diagnosis we defined 9 groups of patients with newgrowths without primary-diagnosed focus: 1 – lymphoproliferative sicknesses, 2 – carcinoma (low-differentiated, serosal, adenocarcinoma, ovarian cancer, metastases), 3 – sarcomata (chondro-low differentiated, pseudo-spindle-cell, osteo-, mielo, small-cell, fibro-, lipo-, giant-cell), 4 – nerve roots newgrowths (neuroblastoma, neuroschwannoma), 5 – newgrowths of blood vessels (perithelial endothelioma, histiocytoma), 6 – melanoma, 7 – dermoid cancer, 8 – other newgrowths, 9 – innocent developments. The analysis of survival of patients with newgrowths without primary-diagnosed focus was conducted within gapless method according to Kaplan – Meier, where the survival in time gap equal to 1 month within computer program «**Statistics 10.0**» was defined.

Results of research and their discussion. The common survival of all patients with newgrowths without primary – diagnosed focus during the first year was equal to 72%, during two years – 62%, three years – 58%, four years – 50% and five years – 41%.

Furthermore, the survival of patients was calculated according to pathogenic diagnosis. One-year survival of patients with lymphoproliferative sicknesses (group 1) according to Kaplan – Meier composed 70%, then during two-five years – 63%.

Survival of patients with carcinoma (group 2) composed: during the first year – 71%, during two years – 62%, three, four and five years – 50%.

One-year survival of patients with sarcomata (group 3) comprised 52%, two- and three-year – 48%, four-year – 3%, five-year – 0%.

Common survival of the patients with newgrowths of nerve roots (group 4) composed: during the first year – 82%, during two years – 70%, three and four years – 62%, five years – 20%.

One-year survival of patients with newgrowths of blood vessels (group 5) according to Kaplan – Meier composed 70%, two-year – 60%, three- and four-year – 40%, five-year – 0%.

Survival of patients with melanoma (group 6) composed: during the first and second year – 62%, three years – 48%, four years – 0% and five years – 0%.

One-year survival of the patients with dermoid cancer (group 7) comprised 90%, two and three-year – 39%, four-year – 19%, five-year – 0%.

Survival of patients with other newgrowths (group 8) comprised: during the first year – 80%, the second year – 60%, the third and fourth – 40%, the fifth – 0%.

Conclusion. Almost all patients with newgrowths without primary – diagnosed focus were admitted to in-patient department with the 4th stage of newgrowth process, but the survival in detached different groups of the patients is different. Patients with lymphoproliferative sicknesses have the highest level of survival – one, three and five-year survival is equal to 70% and for 63% as relevant.

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THE ROLE OF ULTRASONOGRAPHY IN DIAGNOSTICS PANCREATIC DISEASES IN CHILDREN¹Ulyanovskaya S.A., ²Bazhenov D.V.,
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Purpose – to study the data of ultrasound examination of the children’s pancreas. Materials and methods. The analysis of the 480 stories of infant’s city Hospital Novodvinsk Arkhangelsk region (2007–2012). 11720 results and ultrasound of the pancreas on materials Regional Children’s Clinical Hospital (2011–2014). The data are statistically processed by methods of nonparametric statistics.