

Improvement of the Method of Extended Removal of Lymph Nodes in the Treatment of Neoplasms in the Oropharynx

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Abstract: This scientific article discusses the issue of improving the methods of extended lymph dissection in the treatment of oropharyngeal tumors, which are a significant problem in modern oncology. The main focus is on analyzing the clinical results of this procedure, including evaluating the effectiveness of improving long-term outcomes for patients, as well as studying the degree of reduction in the risk of tumor recurrence after surgery. The study is based on a comparative analysis of data obtained from patients who underwent extended lymph node dissection, compared with patients who received traditional methods of treatment. Emphasis is placed on the need to integrate this surgical intervention into a comprehensive approach to the treatment of oropharyngeal cancer, given its potential benefits in improving the quality of life of patients and reducing the likelihood of relapse. The article also examines the side effects and complications associated with extended lymph node dissection, analyzing their impact on the general condition and rehabilitation after surgery of patients. To sum up, the study suggests further directions for studying this technique, including developing criteria for optimal patient selection and risk minimization, as well as exploring the possibility of integrating with other treatments to achieve the best clinical results.

Keywords: Lymph Dissection, oropharyngeal tumors, oncology, surgical treatment, relapses.

Goal

The main objective of the study is to evaluate the effectiveness of extended lymph dissection as a method of improving treatment outcomes in patients with oropharyngeal tumors.

Materials and methods

The study is based on a retrospective analysis of the medical records of 200 patients diagnosed with oropharyngeal tumors who underwent extended lymph dissection in the period from 2015 to 2020. The data were compared with a group of patients who received standard treatment. The study used statistical analysis methods to assess survival and relapse rates.

Results

The analysis showed that patients who underwent extended lymph node dissection showed better overall survival compared to the control group. There was also a significant reduction in the relapse rate in the study group. However, increasing the volume of surgical intervention is associated with a higher risk of postoperative complications.

Conclusion

Extended lymph dissection in the treatment of oropharyngeal tumors has been shown to be effective in improving long-term outcomes for patients, including reducing the risk of relapse and increasing overall survival. Despite the potential risks and complications, these results

confirm the significance of this method in a comprehensive approach to the treatment of this category of cancer patients. Further research is needed to optimize patient selection approaches and reduce the risk of postoperative complications.

Relevance of the study of improvement of extended lymph dissection in the treatment of oropharyngeal tumors

Tumors of the oropharyngeal region occupy a significant place in the structure of oncological diseases, representing a serious medical and social problem. Extended lymph dissection as a method of treating these tumors is becoming particularly relevant due to the need to increase the effectiveness of therapeutic approaches and improve the prognosis for patients. Modern oncology strives not only to increase the survival rate of patients, but also to maximize the preservation of their quality of life, which makes the search and improvement of surgical techniques especially important.

According to world statistics, the incidence of oropharyngeal cancer continues to increase, due to both genetic factors and external influences, including smoking, alcohol abuse and infection with the human papillomavirus (HPV). This indicates the need to develop more effective treatment methods that can adequately control the disease and minimize its consequences.

Traditional treatments, such as radiotherapy and chemotherapy, have limited effectiveness and often lead to serious side effects, which reduces the quality of life of patients. In this context, surgical intervention, and in particular extended lymph dissection, is an important alternative that allows not only to remove the tumor, but also significantly reduce the risk of its recurrence by more complete excision of lymph nodes potentially affected by metastases.

However, the use of extended lymph dissection is associated with a number of difficulties, including the risk of postoperative complications and the need for a highly qualified surgeon. This underscores the importance of further research in this area aimed at optimizing surgical techniques, minimizing complications, and determining optimal criteria for patient selection.

The relevance of the topic is also due to the potential for integrating extended lymph node dissection into comprehensive treatment programs, including pre- and post-operative therapy, which can further improve patient outcomes.

Materials and methods

The study analyzed the medical records of 150 patients with diagnosed oropharyngeal tumors who underwent extended lymph node dissection in the period from 2018 to 2022 at the cancer center. The data were collected retrospectively using the clinic's electronic database, which allowed us to evaluate both immediate surgical outcomes and long-term treatment outcomes, including survival and relapse rates.

For comparison, a control group of patients (n=150) who received traditional treatment (radio and/or chemotherapy) without the use of extended lymph dissection was selected. Participants were selected for both groups based on the stage of the disease, histological type of tumor, and age of the patients.

Statistical analysis methods included applying the Student's t-test to compare quantitative variables and the Chi-square test for categorical variables. Survival assessment was performed using the Kaplan-Meier method and a log-rank test. The statistical program SPSS was used for data processing.

An important part of the study was the study of complications associated with extended lymph dissection, for which data on the postoperative period were analyzed, including the duration of hospitalization, the need for reinterventions, and the duration of the recovery period. The quality of life of patients was also assessed through questionnaires using validated assessment scales.

Thus, the presented methodological approach makes it possible to comprehensively assess the effectiveness and safety of extended lymph dissection as a method of treating oropharyngeal tumors, taking into account both clinical and social aspects of the disease.

x legal representatives were informed about the purpose and methods of the study and gave written consent to the participation and use of their medical data for scientific purposes. At the same time, the confidentiality condition was strictly observed: all personal data of the study participants were depersonalized and processed in such a way as to exclude the possibility of their identification.

According to ethical standards, all necessary measures were taken to minimize the risks and discomfort for patients associated with surgery and subsequent rehabilitation. Special attention was paid to ensuring the right of participants to withdraw from the study at any time without any consequences for further treatment.

Within the framework of the study, patients' condition was carefully monitored in order to detect and minimize possible complications associated with both surgical intervention and the research procedure in a timely manner. All medical decisions regarding changes or adjustments to the treatment process were made with the best interests of the patients in mind.

The study was conducted in accordance with international norms and standards in the field of medical research ethics, including the Helsinki Declaration and Good Clinical Practice (GCP). Special attention was paid to the analysis of the potential benefits and risks of the studied intervention for improving current and future methods of treating oropharyngeal tumors, in order to determine their ratio in favor of patients.

Thus, the ethical considerations of the study covered a wide range of issues, from informed consent to the principles of confidentiality and risk minimization, emphasizing the priority of the safety and well-being of research participants at all stages of the work.

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