

PRIMARY GASTRIC NEOPLASMS IN CHILDREN AND YOUNG ADULTS: A SEER-BASED SURVIVAL ANALYSIS

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Poster

Oesophagus

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A SEER database analysis of 324 patients under age 24 with primary gastric neoplasms found poor prognosis with median overall survival of 36 months and 5-year survival of 49.0%, with histologic type, AJCC stage, and surgery independently associated with survival.

KEY POINTS

- Nearly half (48.2%) of cases were diagnosed at stage IV, and the most common histologic type was adenocarcinoma and signet ring cell carcinoma (59.0%), followed by lymphomas (17.0%) and complex mixed or stromal neoplasms (16.4%).
- In multivariable analysis, lymphomas showed superior overall survival compared to signet ring cell carcinoma (HR = 0.16, 95% CI: 0.07–0.37), while undifferentiated carcinomas showed inferior survival (HR = 2.50, 95% CI: 1.10–5.69).
- Advanced AJCC stage was strongly associated with mortality (stage II: HR = 3.80; stage III: HR = 8.81; stage IV: HR = 8.39), and surgical resection was associated with improved overall survival (HR = 0.34, 95% CI: 0.20–0.57).
- The authors conclude that these findings underscore the need to include pediatric and young adult patients in prospective clinical trials and to discuss such rare cases in multidisciplinary tumor boards.

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