

## PubMed

U.S. National Library of Medicine  
National Institutes of Health

Display Settings: Abstract

[Hinyokika Kiyō. 2010 Feb;56\(2\):75-9.](#)

### [Prognostic factors in patients with metastatic renal cell carcinoma]

[Article in Japanese]

Inoue R, Takahashi A, Takasugi S, Masumori N, Tsukamoto T, Hasegawa T.

The Department of Urlogy, Sapporo Medical University School of Medicine.

To identify prognostic factors for survival and risk classification in Japanese patients, we studied clinical parameters in 79 patients with metastatic renal cell carcinoma (mRCC) treated at our institution from 1988 to 2004. Univariate and multivariate analyses were performed to identify prognostic factors for survival. In univariate analysis, the absence of nephrectomy, metastasis at first visit, ECOG performance status (PS) 2 or more, liver metastasis, brain metastasis, low hemoglobin (<lower limit of normal), C-reactive protein (CRP) >0.3, and serum lactate dehydrogenase (LDH) higher than 1.5 times the upper normal limit were significantly associated with poor outcome. Multivariate analysis demonstrated that two variables remained significant : hepatic metastasis and high LDH. Hepatic metastasis, high LDH, nephrectomy, metastasis at first visit, poor ECOG PS and CRP >0.3 were used to categorize patients into three groups. The 2-year survival rate was 72.9% for the patients with no or one risk factor, 40.2% for those with two and 15.1% for those with three or more. According to Motzer's criteria, the 2-year survival rates for patients with favorable risk, intermediate risk, and poor risk were 85.1, 33.0, and 13.1 % respectively. Our prognostic criteria are simple, and can be used to categorize Japanese patients with mRCC into three risk groups.

PMID: 20185990 [PubMed - in process]

Publication Types

You are here: [NCBI](#) > [Literature](#) > [PubMed](#)

[Write to the Help Desk](#)