

2nd Global Students' Conference of Biomedical Sciences

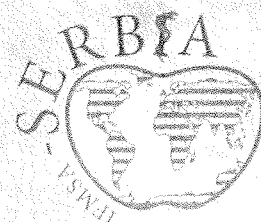
from 15th to 18th October 2015,
Belgrade, Republic of Serbia



GSC Belgrade

ABSTRACT BOOK

conference
organiser:
IFMSA-Serbia



Supported by:
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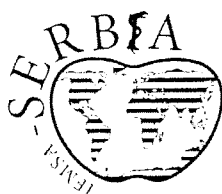
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SECOND GLOBAL STUDENTS' CONFERENCE OF BIOMEDICAL SCIENCES
BELGRADE, 15TH - 18TH OCTOBER 2015, REPUBLIC OF SERBIA

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LARYNGEAL CANCER MORTALITY IN SERBIA, 1991-2010: A JOINPOINT ANALYSIS

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Background

Laryngeal cancer is one of the most common head and neck cancers.

Aim

The aim of this descriptive epidemiological study was to analyze the mortality trend of laryngeal cancer in Serbia (excluding the Kosovo and Metohia) from 1991 to 2010.

Materials and Methods

Laryngeal cancer was defined as ICD-9 code 161 and ICD-10 code C32. Mortality data were obtained from the Statistical Office of the Republic of Serbia. The age-standardized laryngeal cancer mortality rates (per 100,000) were calculated by direct standardization, using the World Standard Population. Average annual percentage of change (AAPC) and the corresponding 95% confidence interval (CI) was computed for trend using the joinpoint regression analysis.

Results

In Serbia 8,814 deaths were recorded (7,470 men and 714 women) due to laryngeal cancer during the study period. The age-standardized rate was 3.1 per 100,000 men and women per year. Significantly decreased trend in laryngeal cancer mortality was recorded continuously from 1991 to 2010 (AAPC = - 0.7%, 95% CI = -1.3 to -0.2). Mortality rates for laryngeal cancer in men have been falling on average -1.0% (95% CI = -1.5 to -0.4) each year over the observed period. No significant increased trend was recorded in women (AAPC = + 1.2%, 95% CI = -0.3 to 2.7). According to comparability test, laryngeal cancer mortality trends in men and women were parallel (final selected model failed to reject parallelism, $P > 0.05$). Laryngeal cancer mortality rates showed relatively stable trends in all aged 50 and over during observed period, while significant decreased mortality trend was noticed in aged 40-49 years only (AAPC = - 3.4%, 95% CI = -5.0 to -1.8).

Conclusion

Similar trends in laryngeal cancer mortality have been reported in most of other European countries. Further decreased trend could be achieved with more effective preventive measures.

Keywords: laryngeal cancer, mortality, trend, joinpoint regression analysis