

AB021. Incidence, histology, and characteristics of patients from the Danish National TET Database

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Background: We present the incidence, tumour-histology and characteristics of the patients and the National Danish Thymic Tumour Database.

Methods: The cohort consists of 251 Danish patients diagnosed with a thymic malignancy between 2015 and 2021. All were identified through registration of thymoma, thymic carcinoma or thymic neuroendocrine tumour in the Danish National Pathology Database thus comprising the complete national cohort of tumours in the thymic epithelium. Data concerning the disease, treatment and patient characteristics are gathered from online records and analyzed using descriptive statistics.

Results: The average annual observed incidence rate was 7.2 thymic malignancies per 1,000,000, while the average age standardized incidence rate was 3.9/1,000,000 using the Segi Standard World Population weights and 4.6/1,000,000 using European Standard Population. The mean age was 64.2 years at the time of TET diagnosis ranging from 16 to 89 years. A slight increase in the TET incidence was seen in women. Thymoma was the most frequent histologic diagnosis in the cohort being accountable for 217 (86%) of the cases. Thymic carcinomas were observed in 31 (12%) cases, while the residual 3 cases (1%) were thymic neuroendocrine tumors. A total of 149 (58%) of the tumours were in TNM-stage T1a at the time of discovery making it the most frequent tumor stages. Thymic carcinomas were accountable for 8 of 14 (57%) of the tumours in stage T4 and 7 of 11 (63%) of cases with distant organ metastases, though only making up 12%

of the total tumors.

Conclusions: The observed distribution of histologic tumor diagnoses and staging are similar to the findings of other population-based studies. However, both the observed- and age standardized incidence rates of TETs in the cohort show an increase compared to the findings of previous studies. This could be an indication of an increased occurrence of the disease in the Danish population or could be due the cohort of this study being more complete than the ones examined previously.

Keywords: Incidence; histology; TNM-staging; Masaoka-Koga; population-based

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Footnote

Conflicts of Interest: All authors have completed the ICMJE uniform disclosure form (available at <https://med.amegroups.com/article/view/10.21037/med-23-ab021/coif>). R.H.P. reports speaker fee from Medtronic, AMBU, AstraZeneca, Medela and participation on the advisory board of AstraZeneca, BMS, Roche, MSD. The other authors have no conflicts of interest to declare.

Ethical Statement: The authors are accountable for all aspects of the work in ensuring that questions related to the accuracy or integrity of any part of the work are appropriately investigated and resolved. The study was conducted in accordance with the Declaration of Helsinki (as revised in 2013). The study demands no direct involvement of the patients. Therefore, no ethical approval nor informed consent was required.

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