

**STAGE AT DIAGNOSIS AND SURVIVAL RATE OF
STOMACH CANCER AMONG PATIENTS DIAGNOSED IN
KIGALI CITY BETWEEN 2014 AND 2018**



THESIS

To fulfill the requirements to achieve a Master's Degree in Epidemiology

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RATIFICATION PAGE
THESIS

STAGE AT DIAGNOSIS AND SURVIVAL RATE OF STOMACH CANCER
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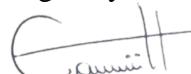
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- b. This paper originated from my original ideas in addition to the suggestions from the Advisory Team and the Resource Persons.
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ABSTRAK

Kanker lambung merupakan masalah kesehatan masyarakat yang signifikan di Kota Kigali, dan kelangkaan informasi yang akurat mengenai stadium saat diagnosis dan tingkat kelangsungan hidupnya menjadi hambatan utama dalam meningkatkan hasil klinis pasien. Penelitian ini bertujuan untuk menganalisis hubungan antara stadium saat diagnosis dengan status vital, dan hubungan antara stadium saat diagnosis dan kelangsungan hidup di tahun ke-1, tahun ke-2, dan tahun ke-3 pasca diagnosis pada pasien kanker lambung di kota Kigali. Data sekunder mengenai tahap diagnosis, status vital, dan informasi demografi pasien diperoleh dari Pendaftaran Kanker Nasional Rwanda. Uji Chi-square digunakan untuk menentukan hubungan antara stadium saat diagnosis dan status vital pasien, sedangkan metode Kaplan Meier digunakan untuk menghitung tingkat kelangsungan hidup. Hasil penelitian menunjukkan bahwa 68,80% pasien didiagnosis dengan tahap lanjut dan 31,20% didiagnosis pada tahap awal. Hasil penelitian juga mengungkapkan bahwa 135 subjek masih hidup dan 115 pasien meninggal. Hubungan antara stadium saat diagnosis dan status vital signifikan pada satu tahun ($p=0,035$), tiga tahun ($p=0,026$) dan lima tahun ($p=0,025$) setelah diagnosis. Tingkat kelangsungan hidup kanker lambung pada 1, 3, dan 5 tahun setelah diagnosis pada pasien yang didiagnosis di Kota Kigali antara tahun 2014 dan 2018 adalah 77%, 51%, dan 15%, secara berturut-turut. Tahap diagnosis secara signifikan berkontribusi terhadap tingkat kelangsungan hidup kanker lambung pada 1 tahun setelah diagnosis ($p=0,038$), 3 tahun setelah diagnosis ($p=0,011$), dan 5 tahun setelah diagnosis ($p=0,042$). Dapat disimpulkan bahwa tahap diagnosis berkontribusi secara signifikan terhadap status vital pasien dan kelangsungan hidup pasien

Kata kunci: Kanker lambung, Status vital, Stadium saat diagnosis, Kelangsungan hidup

ABSTRACT

Stomach cancer is a health concern in Kigali city and the scarcity of accurate information on its stages at diagnosis and survival is a major hindrance to improving patients' clinical outcomes. This research aimed to determine the relationships between stage at diagnosis and vital statuses, and between stage at diagnosis and survival in first year, second year, and third year post- diagnosis in gastric cancer patients in Kigali city. The secondary data about stage at diagnosis, vital statuses and other patients' demographic information were obtained from Rwanda National Cancer Registry. Chi-square test was employed to assess the relationship between stages at diagnosis and patients' vital statuses and Kaplan Meier method was used to calculate the survival. The results showed that 68.80 % of the patients were diagnosed with advanced stages and 31.20% were diagnosed at early stages. The results revealed that 135 subjects were alive and 115 patients died. The relationships between stages at diagnosis and vital statuses are significant at one year ($p=0.035$), three years ($p=0.026$) and five years ($p=0.025$) after diagnosis. The survival rate of stomach cancer at 1, 3 and 5-years post diagnosis among patients diagnosed in Kigali city between 2014 and 2018 were 77%, 51 % and 15%, respectively. The stages at diagnosis have significantly contributed to the survival rate of stomach cancer at 1year post-diagnosis($p=0.038$), 3 years after diagnosis($p=0.011$) and 5 years' post- diagnosis ($p=0.042$). It is factual to conclude that stages at diagnosis contribute to the stomach patients' vital statuses and their survival.

Keywords: Stomach cancer, Stage at diagnosis, Vital statuses, Survival

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LIST OF ABBREVIATIONS

CRVS:	Civil Registration and Vital Statistics
GC:	Gastric Cancer
HICs:	High Income Countries
LMICs:	Lower- and Middle-Income Countries
NCDs:	Non-Communicable Diseases
PSA:	Prostate Specific Antigen
RBC:	Rwanda Biomedical Centre
RNCR:	Rwanda National Cancer Registry
SSA:	Sub-Saharan Africa
TNM:	Tumor Node Metastasis
WHO:	World Health Organization