

## NEUTROPHIL TO LYMPHOCYTE RATIO AS PROGNOSTIC FACTOR IN PANCREATIC CANCER

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### Abstract

Pancreatic adenocarcinoma remains one of the solid tumors with worst prognosis. Recent studies show an association between prognosis and pretreatment inflammation. NLR or neutrophil to lymphocyte ratio from peripheral blood is a marker of systemic inflammatory response. NLR values > 5 were reported as a predictive marker for poorer survival in several solid tumors, including pancreatic cancer. The objective of this study is to evaluate if the value of NLR > 5 is associated with reduced survival in patients diagnosed with pancreas adenocarcinoma. The secondary objective is to relate the NLR with clinical risk variables.

**Material and Methods:** A retrospective, descriptive and analytical study. We evaluated 96 medical records with diagnosis of pancreatic adenocarcinoma stage III and IV.. The threshold to dichotomize NLR was determined to be 5.0; Ca 19.9 (high and normal) and clinical variables (age, sex, PS ECOG, treatment) were analyzed. Kaplan -Meier method was used for survival analysis and chi square test ( $p < 0.05$ ) in the univariate analysis.

**Results:** Overall survival was 7.1 months on average; 3.8 months for patients with NLR value > 5 11.3 months for the group with NLR value < 5 ( $p = 0.0003$ ). Association between NLR > 5 and icteric ( $p = 0.048$ , OR: 2.08- IC 95%: 0.87-4.9) was statistically significant in univariate analysis; It was also significant for the group who received chemotherapy ( $p = 0.006$ , OR: 2.48- 95% CI 1.32-3.7).

**Conclusion:** In our study, the NLR value > 5 was associated with poor prognosis for overall survival, which is consistent with other publications. Therefore, a high value of NLR at diagnosis can be used as a prognostic marker of survival.