

## Carcinoma-in-situ of the Larynx in Canada and Nigeria

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### Abstract

Internet search revealed two series of Canadian cases of carcinoma-in-situ. Therefore, this was compared with Nigerian cases with special reference to the Igbo Ethnic Group. In sum, whereas the Canadian median age was in the late 60s, the Nigerian was the late 50s. Incidentally, males preponderated in both series. Now, radiation therapy has been found to be effective and safe treatment modality in developed countries. It is yet to be common practice in this developing communities.

**Keywords:** *Canada, Nigeria; Larynx; Carcinoma-in-situ; Comparison*

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### Introduction

Internet search revealed 2 Canadian series concerning the carcinoma-in-situ of the larynx. One numbered 67 patients (52 men, 15 women; median age, 65 years). [1] The other consisted of 34 patients whose median age at diagnosis was 67 years while the male-female ratio was 6:1. [2] Therefore, comparison was made with a Nigerian series from the Igbo ethnic group, [3] especially as the result was expected to be noteworthy.

### Investigation

A Birmingham (UK) group concluded that the establishment of a histopathology data pool was beneficial in epidemiological analysis. [4] Therefore, since such a Regional Pathology Laboratory was established by the Government of the Eastern Region of Nigeria with the author as the pioneer pathologist, the collection of data on the domiciled Igbo patients was deemed to be worthwhile in tabular form.

### Results

The males and females in this cohort had the median age of 57 years and the male:female ratio of 4:1. Hoarseness was the major complaint. Most patients presented relatively early.

No.	Initials	Age	Sex	Duration (yr/mt)	Symptoms
1	EO	50	M	15 yr	Hoarseness
2	MS	55	M	3 mt	Hoarseness
3	NE	51	M	2 yr	Hoarseness
4	NR	57	F	1 yr	Hoarseness
5	AS	68	M	4 mt	Loss of voice
6	ES	50	M	2 yr	Loss of voice
7	EE	65	M	2 mt	Hoarseness
8	OV	51	M	8 mt	Hoarseness
9	EO	70	F	1 mt	Breathless
10	OA	52	M	3 mt	Hoarseness

**Table 1:** Epidemiological analysis of Nigerian patients.

## Discussion

In both countries, males preponderated. Clear also was the affection of younger elements in the Nigerian community. Thus, the median age was 65 in one Canadian group [1] and 67 years in the other group. [2] This contrasts with the local figure of 57 years.

Although not explored in Canada, it is of interest that the Nigerian patients tended to report for treatment within months rather than years. Interestingly, this is unlike the general pattern among African cancer patients. [5]

Incidentally, the Canadian cohorts were followed up for some years. [1,2] However, this does not apply to the Nigerian patients, in whom only the biopsy stage was reached.

Some authors concluded that "The first morphologically unequivocal recognizable step is represented by intraepithelial abnormalities, such as dysplasia and carcinoma in situ." [6] "However," as they went further, "adjacent apparently normal squamous epithelium may already harbor the initial genetic abnormalities leading to malignant transformation."

From Greece, the recommendation centered on "long-term follow-up study," [7] As for Norwegian associates, we learn from their 81 cases that "it thus appears that carcinoma in situ may comprise at least two different lesions with different biological behavior." [8] Be that as it may, the favorable story was that, in 29 patients with a histological diagnosis of carcinoma in situ of the larynx, radiation therapy was an effective and safe treatment modality. [9] Of course, that this is not yet readily available in this developing community.

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