SUMMARY

INTRODUCTION: The recurrence of lip cancer and lymph node metastization are related to bad prognosis, therefore, it is important to identify the clinical and pathological factors related to this unfavourable evolution as well as determine a lower disease free-survival. The lymph node metastization is associated to hot spot of new lymphatic vessels in hypofaring tumors, this biological process is named lymphangiogenesis. The angiogenesis is related to lower disease free-survival in head and neck tumors. What occurs in lip tumors?

METHODOLOGY AND RESULTS: A retrospective study of 108 patients with squamous cell carcinoma of the lip, was developed from January/2003 to April/2006, where they were admitted and treated consecutively with curative intention.

Vessels from 8 cases were marked with the antibodies CD34 and D2-40 in order to evaluate the existence of angiogenesis and linfangiogenesis focus.

The majority of the patients were men (69,4%). The average age was 73 years old (22 - 94 years old). Most tumors were in Stage I and were located on the lower lip. The average consultation period was 13,4 months (1-39,6 months).

The recurrence (local or lymphatic) occurred in 13% of all patients and was significantly related to the primary location of the tumor (commissure) and its stage (III). The overall survival rate at 3 years and the disease-free survival rate were respectively, 87,1% and 78,1%.

The primary location, the stage and the peri-neural invasion were all significantly related to lower disease-free survival rate. The recurrence was the main determinant factor of lower overall survival rate. Stage III, was the only prognosis factor that was independently related with surviving free of illness.

The existence of angiogenesis focus as well as peri and intra-tumoral linfangiogenesis focus was verified in lip squamous cell carcinoma.

CONCLUSION: Our results suggest that in the case of lip commissure tumors or lip tumors with peri-neural invasion, the treatment should be more aggressive including larger margins of surgical resections and /or chemotherapy as an auxiliary treatment.

The existence of phenomenon's of angiogenesis and linfangiogenesis in the carcinoma of the lip is verified.

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