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A retrospective study was conducted to explore the survival of patients with oral cancer and its related factors. Subjects comprised 2,553 cancer cases histologically diagnosed in 13 hospitals and 1 institute, between 1st January 1992 and 31st December 1996. Information were collected from medical records and cases' final status was traced from the database of the Civil Registration Division, the Ministry of Interior.

The result from Cox's proportional hazard model showed that subsite of primary tumor, histologic type, primary tumor (T stage), lymph node metastasis (N stage) and therapy are associated with survival. Survival of oral tongue cancer was the poorest, and prognosis of lip cancer was better than the others. Risk of squamous cell carcinoma was 1.53 times compared to verrucous type. Patients with higher N stage tend to be at higher risk. In addition to tumor factors, therapy was found to be a prognostic factor when adjusted for gender, age, and stage. An overall 5-year survival was 40%. Five year survival of T1, T2, T3 and T4 was 56%, 42%, 27% and 28% while 5-year survival of N0, N1, N2 and N3 was 48%, 40%, 26% and 20% respectively.

The result of the study can be used in view of treatment decision making. Health personnel whose work concern oral health should be aware of the importance of surveillance and screening of patients with symptoms in early stage, so that treatment can be given early which will result in longer survival.