**266例合并2型糖尿病的乳腺癌临床病理特征及预后分析**

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**摘要**

**研究目的：**探讨合并2型糖尿病的浸润性乳腺癌患者临床病理特征及预后特点。**方法：**汇总2015-2018在浙江大学附属第一医院乳腺外科的乳腺癌2747例手术队列，从中筛选出合并2型糖尿病乳腺癌266例和随机抽取的未合并糖尿病乳腺癌788例纳入最终统计。分析两组患者的临床病理特征及预后情况，并按年龄、肿瘤大小，淋巴结转移状况，分子分型，乳腺手术方式，腋窝手术方式作各亚组分析。Kaplan-Meier方法分析两组无病生存（disease-free survival，DFS）及乳腺癌特异性生存(breast cancer-specific survival，BCSS)是否存在差异，Cox回归分析用于获取两组及各亚组间的风险比（hazard ratio，HR）值及95%可信区间（95% Confidence Interval，95% CI）。**结果：**统计分析提示2型糖尿病患者的肿瘤体积相对较大，病理组织学分级较高， DFS及BCSS较短，且多因素COX回归分析提示，2型糖尿病是乳腺癌患者的独立预后因素，在各亚组中预后也相对较差，且部分亚组有统计学意义。**结论：**合并2型糖尿病的乳癌患者预后相对较差，建议同时制定个体化治疗方案，在肿瘤术后随访期间，予以更多的关注，适当增加复查项目，缩短复查时间。

**关键字：**2型糖尿病 乳腺癌 无病生存期 乳腺癌特异性生存期

**Abstract**

**Objective**: To investigate the clinicopathological and prognostic features of invasive breast cancer patients with type 2 diabetes. **Methods**: A total of 2747 cases of breast cancer in the breast surgery Department of the First Affiliated Hospital of Zhejiang University from 2015 to 2018 were collected. 266 cases of breast cancer complicated with type 2 diabetes and 788 cases without diabetes were randomly selected for final statistics. The clinicopathological features and prognosis of the two groups were analyzed, and subgroups were analyzed according to age, tumor size, lymph node status, molecular type, breast surgery and axillary surgery. Kaplan-Meier method was used to analyze whether disease-free survival (DFS) and breast cancer-specific survival (BCSS) were different between the two groups. Cox regression analysis was used to obtain the HR (hazard ratio) and 95% Confidence Interval (95% CI) between the two groups and each subgroup. **Results**: The statistical analysis indicated that the tumor volume of type 2 diabetes patients was relatively large, the histological grade was higher, the DFS and BCSS were shorter, and the multivariate COX regression analysis indicated that type 2 diabetes was an independent prognostic factor of breast cancer patients, and the prognosis of type 2 diabetes patients was relatively poor in subgroups, and some subgroups were statistically significant. **Conclusion**: The prognosis of breast cancer patients with type 2 diabetes mellitus is relatively poor. It is suggested that tailored therapeutic schedule is necessary. Furthermore，more attention should be paid to the patients during the postoperative follow-up, appropriately increasing the items of review and shortening the time of review.

**Key words**: Type 2 diabetes breast cancer disease-free survival breast cancer specific survival