

MORTALITY PROFILE OF ADULT AND ELDERLY PATIENTS WITH URINARY BLADDER NEOPLASMS IN FLORIANÓPOLIS

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Abstract: **INTRODUCTION:** Bladder neoplasms are one of the most frequent tumors in the world population (João Paz, 2022). Bladder cancers are related to genetic and exogenous factors, with smoking and age being the major risk factors for developing this disease. Urinary bladder cancer is more frequent in the white population and is more frequent in males. Clinically, according to Hatem Kaseb (2022) it can be classified into three types: Urothelial Carcinoma, Squamous Cell Carcinoma and Adenocarcinoma. In clinical practice, patients with bladder cancer have hematuria, in addition to complaints of low back pain. Therefore, what is the mortality profile of adult and elderly patients with urinary bladder neoplasms in Florianópolis?

GOAL: To analyze the epidemiological profile of adult and elderly patients who died from urinary bladder neoplasms in Florianópolis.

METHOD: Quantitative and qualitative cross-sectional study, with data collection on deaths from bladder cancer in Florianópolis of adults and elderly people from January 2017 to December 2021 through the Mortality Information System (SIM) contained in DATASUS.

RESULTS: Deaths maintained regularity in the analyzed period, totaling 195 deaths, which represented 18.6% of deaths from urinary bladder neoplasms when compared to the rest of the state of Santa Catarina. The age group with the highest incidence of deaths was 80 years or older, with 39.1%.

DISCUSSION: The most affected age group confirmed the character of bladder neoplasms as a disease largely influenced by age and time of exposure to cigarettes and other pollutants.

CONCLUSIONS: Given the above about the profile of patients who died from bladder cancer, age and exposure are taken into consideration, determining factors in the construction of public policies to prevent the disease.

Keywords: Neoplasm, Incidence, Urinary Bladder

THEME AREA: Uro-oncology

INTRODUCTION

“Bladder neoplasms are one of the most frequent tumors in the world population” (João Paz, 2022). It currently ranks fourth in men and eighth in women, being the second most treated by urologists, second only to prostate cancer.

Bladder cancers are related to genetic and exogenous factors. According to Sebestien Antoni (2017), smoking is the greatest risk factor for the development of this disease, being present in 50% of cases in men and 35% in women. Smoking increases the chance of developing this neoplasm by two to four times, however, when stopped, it can lead to a decrease in the chance of the disease appearing.

Furthermore, age is an important risk factor for the onset of this disease, as 90% of cases occur in patients over 55 years of age.

Urinary bladder cancer is more frequent in the white population, one of the main causes of death from malignant neoplasms in the United States (10,000 per year). It is more frequent in males, with a ratio of 3:1 for females.

Clinically, according to Hatem Kaseb (2022) it can be classified into three types: Urothelial Carcinoma, Squamous Cell Carcinoma and Adenocarcinoma. Urothelial Carcinoma accounts for 90% of cases of bladder tumors. It consists of a tumor of urothelial cells confined to the epithelium, which may cause symptoms of urinary frequency, dysuria and urinary urgency.

Squamous Cell Carcinoma, commonly known by the acronym “SCC”, varies according to the affected region, consistent with 3 to 7% of cases in the Americas and 80% in the Mediterranean according to Paulo Jaworski

(2022). Its high prevalence in Mediterranean countries can be explained by the chronic infection of the bladder by *S. haematobium*, endemic in these regions, which reach the bladder wall and cause an inflammatory process and ultimately SCC. Cases that are unrelated to this flatworm are often caused by bladder irritation.

Finally, adenocarcinoma represents 2% of cases of bladder tumors, and can be classified as primary and secondary or metastatic with etiology of: rectum, stomach, endometrium, breast, prostate and ovary. In general, adenocarcinomas occur in the bladder dome, are poorly differentiated tumors and are more frequent in patients with bladder exstrophy.

In clinical practice, patients with bladder cancer have hematuria (37 to 62% of cases), in addition to complaints of low back pain, the presence of a palpable mass in the hypogastrium or edema in the lower limbs.

The Brazilian population aging is a trend that must guide public policies aligned to alleviate the health situations characteristic of this phase, such as reducing smoking, which is the main risk factor for the appearance of bladder tumors combined with the senescence of the urinary system itself. Thus, studying the epidemiological context of bladder cancer helps to prevent and reverse this health-disease process, one of the foundations of primary care. In this regard, we question the mortality profile of adult and elderly patients with urinary bladder neoplasms in Florianópolis.

GOAL

To analyze the epidemiological profile of adult and elderly patients who died from urinary bladder neoplasms in Florianópolis, Santa Catarina, in order to assess whether risk factors and prophylactic measures adopted by the public authorities interfered with the mortality situation.

METHODOLOGY

A quantitative and qualitative study was carried out using a cross-sectional approach, with data collection from January 2017 to December 2021. The search for evidence was carried out using public domain information on the DATASUS digital platform, which gathers statistics from the Mortality Information (SIM). The inclusion criteria analyzed were adults aged 40 to 59 years, and elderly aged 60 to 80 years or older, with death determined by urinary bladder neoplasms or complications related to this disease in the region of Florianópolis, state of Santa Catarina. The dependent variable related to the outcome was the presence of urinary bladder neoplasms, while the previously determined independent variables were age group, gender, race and year of death. As it is the use of public domain material, it is not necessary to submit it to the Research Ethics Committee.

RESULTS

In the analyzed period, the state of Santa Catarina had 1,047 deaths from urinary bladder neoplasms, while Florianópolis region concentrates 195 records, that is, 18.6% of these deaths. Data from this period show an annual regularity, with 2020 being the year with the highest mortality rate, with 52 deaths (26.6%), and the year 2018 registered the lowest incidence, with 28 deaths (14.3%).

As for the age group of the patients, they were divided into groups with intervals of one decade. For the study, two major age divisions were considered, adults (40-49; 50-59) and seniors (60-69; 70-79; 80 years or older). Data collection revealed that the age group of 80 years or older represented 34.3% of cases (67), followed by 70-79 with 32.8% (64), and the range 60-69, 22% (43). The ages 40-49 and 50-59 together represented only 21 cases of death from bladder cancer (10.7%).

Regarding the gender variable, it showed a higher incidence in males, 76.9% (150), compared to females with 23.1% (45) of cases. Most deaths affected Caucasian patients, with 176 deaths (90.2%), while the rest totaled 15 deaths (7.7%) among black and brown races, so that 4 deaths (2%) were registered of ignored race.

DISCUSSION

The region of Florianópolis is made up of 10 municipalities, with a notable development in terms of health compared to the rest of the state of Santa Catarina. Introducing referral hospitals that receive referrals from across the state.

Urological disease reached a higher proportion of men (76.9%) and Caucasians (90.2%) in the analyzed period. The most affected age group confirmed the character of bladder neoplasms as a disease largely influenced by age and time of exposure to

cigarettes and other pollutants, since the elderly population in the range of 60-80 years or more reached a sum of 89, 1% of cases. This fact has a causal relationship with the widespread dissemination of smoking in distant decades, and with urological senescence, whose effects are manifested today in primary care.

CONCLUSIONS

Given the above, regarding the profile of patients who died from bladder cancer, age and exposure are taken into consideration, determining factors in the construction of public policies to prevent the disease. The need to prioritize elderly people in primary care (referral and counter-referral mechanisms) and strengthen the need to prevent this disease through medical consultations must be the focus of municipal departments, not just in Florianópolis. As a way to diagnose this disease early, promoting the best care and treatment possible.

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