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**EVOLIUCINĖ MEDICINA:
ŽMOGAUS RAIDOS PERSPEKTYVOS IR SVEIKATA
BESIKEIČIANČIOJE APLINKOJE**

**EVOLUTIONARY MEDICINE:
PERSPECTIVES ON HUMAN DEVELOPMENT AND HEALTH
CONSEQUENCES IN A CHANGING ENVIRONMENT**

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PROGNOSTIC DETERMINANTS OF STAGE I-II COLORECTAL CANCER: DOES THE INFLUENCE OF PREDICTORS SHIFT OVER TIME? 10-YEAR EXPERIENCE OF RETROSPECTIVE MULTICENTRE COHORT STUDY

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Background and Aim: Stage I-II colorectal cancer (CRC) patients present with high overall survival rates though some of these patients result with worse outcomes. This study aims to identify the most common factors affecting prognosis in early stage CRC and their influence in different postoperative survival period (1-, 3-, 5-, and 10-year postoperatively).

Materials and Methods: This is a multicentre retrospective observational study. Adult patients with stage I-II CRC who underwent elective surgery (2014-2018) were included. Patients were followed-up until 2026 January. Data on patients' demographic characteristics, comorbidities, postoperative period, tumors related factors and mortality were collected. 1-year, 3-year, 5-year, and 10-year survival analysis were performed. Results were compared using statistical methods.

Results: 876 patients were included (stage I - 335, stage II - 541). Overall survival rate for 1-, 3-, 5-, and 10-year survival were 96%, 91%, 85% and 57% respectively. 1-year multivariate survival analysis revealed that older age, larger tumor size, higher rate of postoperative anastomotic leak and Clavien-Dindo score had a prognostic impact on survival. Age, cancer related characteristics (size, differentiation grade, lymphovascular invasion), anastomotic leakage rate and Clavien Dindo score showed statistically significant ($p < 0.05$) influence on 3-year survivability. 5- and 10-year survival rates were similar: demographic characteristics (age, gender) and ASA score had a prognostic effect on survival rates ($p < 0.05$), as well as comorbidities (cardiovascular pathology, chronic kidney disease, diabetes and history of stroke), which were linked to increased mortality.

Conclusions: The impact of prognostic factors shifts over time in early stage CRC. Surgery related and oncological factors play the biggest role in survival rates during the first postoperative years while patient related characteristics and chronic comorbidities as time progresses become a burden for 5- and 10-year survival rates.

Keywords: early stage, colorectal cancer, stage I-II, survival rate