

Conference Abstracts

Rising Incidence of Appendiceal Mucinous Adenocarcinoma in the United States: A SEER Analysis (2000–2022)

Madho Mal, MD^{1a}, Nayanika Tummala, MD², Ira Gupta, MBBS³, FNU Laiba, MBBS⁴, Rakshit Singh Saini, MBBS³, Faiqa Amin, MD⁵

¹ Marshall University school of medicine , Huntington, WV, huntington, wv, US, ² New York Medical College, ³ Government Medical College, Amritsar, Amritsar, Punjab, India, ⁴ Akhtar Saeed Medical and Dental College , Bahria Town , Lahore, Punjab, Pakistan, ⁵ Bayhealth medical center

Corresponding author

^a Madho Mal, MD, Marshall University school of medicine , Huntington, WV, huntington, wv, US, Email: madhomal1995@gmail.com

Keywords: Over all Survival, Appendiceal mucinous adenocarc, SEER

<https://doi.org/10.53876/001aa.129657>

International Journal of Cancer Care and Delivery

Vol. 6, Issue Supplement 1, 2026

Background

Appendiceal mucinous adenocarcinoma is an uncommon gastrointestinal malignancy with increasing recognition in recent years. We aimed to describe temporal and sex-based trends in incidence using national registry data.

Methods

This is a retrospective cohort analysis utilizing the Surveillance, Epidemiology, and End Results (SEER) 8 registries (2000–2022). Frequency analysis was performed to determine annual case counts stratified by sex. Cases were identified using ICD-O-3 histology code 8480/3 (mucinous adenocarcinoma) and site code C18.1 (appendix). Only malignant cases with known age were analyzed.

Results

A total of 1568 cases were identified {Males = 706 (45%), Females = 862 (55%)}. The annual number of cases markedly increased from 24 cases in 2000 to 199 cases in 2022, representing

more than an eightfold rise over two decades. Female incidence was consistently slightly higher than male incidence throughout the study period. The majority of cases occurred in White patients aged 50 years and above. Stage remains the strongest predictor of survival. Localized tumors demonstrated excellent long-term survival (5-year OS = 84.9%), whereas distant disease retained a 5-year OS of only 55.1%. Regional involvement resulted in intermediate survival (68.0% at 5 years). No cases were identified in the in situ category, suggesting detection typically occurs after invasion. Most patients underwent surgical management, while chemotherapy utilization varied by stage.

Conclusion

The incidence of appendiceal mucinous adenocarcinoma has steadily increased over the last two decades, likely reflecting improved detection and registry reporting. Further studies are needed to explore demographic and stage-specific survival trends.

1. OS: Overall Survival.