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Title: Margin Status is not Associated with Recurrence and Survival Outcomes in Advanced Laryngeal and Hypopharyngeal Malignancies

Body: Introduction: The Royal College of Pathologists defines clear margins as greater than 5mm. For laryngeal and hypopharyngeal malignancies these resection margins can be difficult to achieve due to critical surrounding structures. The aim of the present study is to evaluate the impact that margins have to recurrence free and overall survival.
Methods: A single center cohort study was carried out over a 10-year period. Patients met inclusion criteria if they underwent a laryngectomy or pharyngolaryngectomy for a squamous cell carcinoma of the larynx. Data collected included pathological factors, surgical characteristics, margin status, recurrence and overall survival.
Results: A total of 173 patients met inclusion criteria. The mean age of the cohort was 63.7 years. Close or involved margins were more likely with advanced laryngeal cancers and salvage surgery cases ($p<0.001$). Univariate logistic regression analysis did not find a difference in rates of recurrence over a 10-year time period with clear, close or involved margins. The 10-year disease-free survival rate was 64%, and 10-year overall survival was 41%. Margin status did not influence disease-free or overall survival ($p=0.491$, 0.686 respectively).
Discussion: Data from the present study demonstrates good disease-control rates and overall survival, independent of margin status.

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