

EVALUATION OF MORTALITY RATE TRENDS AND AVERAGE HOSPITALIZATION COSTS FOR PATIENTS WITH MALIGNANT ESOPHAGEAL NEOPLASMS ACROSS BRAZILIAN REGIONS, 2020–2024

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Introduction: Esophageal cancer is an aggressive neoplasm associated with high mortality and often late diagnosis. It represents the seventh most common type of cancer worldwide and the sixth leading cause of cancer-related death, with approximately 604,000 new cases and 544,000 deaths globally in 2020. In Brazil, both incidence and mortality rates remain significant, particularly among populations exposed to risk factors such as smoking, alcohol consumption, and the ingestion of very hot foods. Early clinical manifestations are subtle, but rapid progression to severe dysphagia makes this tumor a major cause of emergency hospitalizations. Given its high lethality, the need for emergency surgical or palliative management, and the associated costs, epidemiological analysis of esophageal cancer hospitalizations in the public healthcare system is essential to support intervention strategies and optimize healthcare resources. **Objectives:** To evaluate the trends in mortality rates and the average hospitalization costs for patients with malignant esophageal neoplasms across Brazilian regions between 2020 and 2024. **Methods:** This is a descriptive, quantitative study using data from the Hospital Information System (SIH/SUS) available on DATASUS. The variables analyzed included year of processing, state unit, type of admission, average AIH cost, and mortality rate. **Results:** Between 2020 and 2024, the mortality rate for esophageal neoplasms in Brazil was 16.08%, with annual variations ranging from 15.10% to 16.65%. A progressive increase was observed from 2020 (15.10%) to 2022 (16.65%), followed by a slight decrease in 2023 (16.53%) and 2024 (15.86%). The Northern region had the highest mortality rate at 18.03%, whereas the Southern region showed the lowest rate at 13.08%. Additionally, the nature of the hospitalization significantly influenced outcomes: emergency admissions had a mortality rate of 18.76%, nearly double that of elective admissions (9.11%). The average AIH cost for esophageal malignant neoplasm hospitalizations in Brazil was R\$1,723.57. Regionally, the North had the lowest average

cost per hospitalization at R\$1,558.57, while the South recorded the highest cost at R\$1,841.41. **Conclusion:** It can be inferred that malignant esophageal neoplasms remain a costly condition for the public healthcare system. Regionally, it was noted that the North, despite having the highest mortality rate, had the lowest hospitalization cost. Conversely, the South, with the lowest mortality rate, had the highest average hospitalization cost. These findings suggest significant economic disparities in the management of patients with malignant esophageal neoplasms, resulting in differing clinical outcomes across regions and highlighting the need to develop strategies aimed at reducing mortality rates in areas with fewer healthcare resources.

Keywords: Esophageal neoplasm; mortality rates; hospitalization costs.