

N. Ireland Cancer Registry Implications of Research for Services

NICR Lead Author <i>(Office use only)</i>
Paper ID <i>(Office use only)</i>
Date Submitted to NICR Steering Group Click here to enter a date. <i>(Office use only)</i>

Paper Title	International trends in oesophageal cancer survival by histological subtype between 1995 and 2014
Authors	Eileen Morgan, Isabelle Soerjomataram, Anna Gavin, Mark J Rutherford, Piers Gatenby, Aude Bardot, Jacques Ferlay, Oliver Bucher, Prithwish De, Gerda Engholm, Christopher Jackson, Serena Kozié, Alana Little, Bjørn Moller, Lorraine Shack, Hanna Tervonen, Vicky Thursfield, Sally Vernon, Paul M Walsh, Ryan R Woods, Christian Finley, Neil Merrett, Dianne L O'Connell, John Reynolds, Freddie Bray, Melina Arnold
Journal	GUT
DOI	10.1136/gutjnl-2020-321089
Funders	Canadian Partnership Against Cancer; Cancer Council Victoria; Cancer Institute New South Wales; Cancer Research UK; Danish Cancer Society; National Cancer Registry Ireland; The Cancer Society of New Zealand; NHS England; Norwegian Cancer Society; Public Health Agency Northern Ireland, on behalf of the Northern Ireland Cancer Registry; The Scottish Government; Western Australia Department of Health; Wales Cancer Network.
Full paper available online	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> NOT YET <input type="checkbox"/>
Conclusion	<p>111,894 cases of Adenocarcinoma (AC) of the oesophagus and 73,408 cases of Squamous Cell Cancer (SCC) were included in the analysis. Marked improvements in survival were observed over the 20-year period in each country, particularly for AC, younger age groups and 1-year after diagnosis. Survival was consistently higher for both subtypes in Australia and Ireland followed by Norway, Denmark, New Zealand, the UK and Canada. During 2010-2014, survival was higher for AC compared to SCC, with 1-year survival ranging from 46.9% (Canada) to 54.4% (Ireland) for AC and 39.6% (Denmark) to 53.1% (Australia) for SCC.</p> <p>Marked improvements in both oesophageal AC and SCC survival suggest advances in treatment. Less marked improvements 3 years after diagnosis, among older age groups and patients with SCC, highlight the need for further</p>

	<p>advances in early detection and treatment of oesophageal cancer alongside primary prevention to reduce the overall burden from the disease.</p> <ul style="list-style-type: none"> • Using data from high-quality population-based cancer registries from countries with similar healthcare access (Australia, Canada, Denmark, Ireland, New Zealand, Norway, and the United Kingdom (UK), this study investigates trends in survival of oesophageal cancer by histological subtype. • Overall, improvements in survival in both subtypes were observed during the 20-year study period, with some countries showing greater improvements than others. Marked survival increases more noted for adenocarcinoma, younger age groups and at 1-year post-diagnosis. • Certain geographical variations in survival were observed, with consistently higher survival for both subtypes in Australia and Ireland followed by Norway, Denmark, New Zealand, the UK and Canada.
<p>What this means for the service</p>	<p>These study findings highlight the impact of treatment advances on oesophageal cancer survival, and the importance of continued advances in treatment options, particularly among older patients, as well as continued surveillance to benchmark survival across countries.</p> <ul style="list-style-type: none"> • While oesophageal cancer survival has been increasing across countries in recent years, it remains low for both disease subtypes. As such, future research into early detection and treatment, alongside primary prevention is warranted to improve survival and reduce the disease burden.