PROXIMAL SHIFT OF COLORECTAL CANCER OVER THE LAST 14 YEARS

A. Gatopoulou[1], Z. Antonopoulos[1], D. Tragianidis[1], K. Soufleris[1], D. Paikos[1], I. Pilpilidis[1], D. Tzilves[1], G. Lazaraki[1], A. Tarpagos[1], I. Katsos[1]

[1]*Gastroenterology, Theagenio Cancer Hospital, Thessaloniki, Greece*

INTRODUCTION: A change in subsite distribution of colorectal cancer has been demonstrated in other countries, with increasing proximal cancers. Confirmation of such a change in our population would have implications for screening and diagnosis of colorectal cancer.

AIMS & METHODS: A total of 2976 new cases of colorectal adenocarcinomas were diagnosed between 1993 and 2006 and studied retrospectively, in order to identify and evaluate trends in colorectal cancer regarding age,gender, malignant polyps and subsite distribution over the last 14 years. Patients were divided into two groups:group A(1993-1999,1072 patients), group B(2000-2006,1904 patients)

RESULTS: Of the 2976 patients (1655 male, 55.6%, 1321 female, 44.4%, mean age 64.2 years old), 327 (10.9%)were diagnosed under the age of 50 years old (mean age 43.1 years old)and were predominantly female (155/1655 male,9.3% vs 172/1321 female 13%, p=0.002). The location was left sided in 2335 case (rectal 40%,sigmoid 51.7%, descending 8.3%)and right sided in 641 (transverse:13.9%, ascending and caecum: 86.1%). In 14 (0.4%) patients synchronous cancer and in 381(12.8%) malignant polyps were detected and, in both cases, they were mostly left-sided (57.1% and 76.4%, respectively). In group B, the proportion of men (1090/1655, 65.8% vs 565/1655, 34.1%in A, p=0.017)as well as the malignant polyps detected(305/1904, 16% in B vs 76/1072, 7%in A, p<0.001)were significantly higher. Furthermore, a significant decrease in the proportion of left-sided cancer and increase in right-sided was seen over to observed period:in group A: left -887 (82.7%), right -185(17.3%); in group B: left -1448(76.1%), right -456,(23.9%),p<0.001

CONCLUSION: Changing trends in subsite distribution of colorectal cancer, with proximal shift of cancers, was confirmed over a 14 year period. This finding may indicate that screening examination should be expanded to include the entire colon. The high percentage of patients below 50 years old and the malignant polyps detected probably emphasize the need for colorectal screening program in our population.