

**ueg**public affairs

# The burden of gastric cancer – clinician perspective

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Scientific umbrella organisation

# **Aiming to improve digestive health**

Uniting 50,000 specialists from every field  
In digestive health

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## United for digestive health

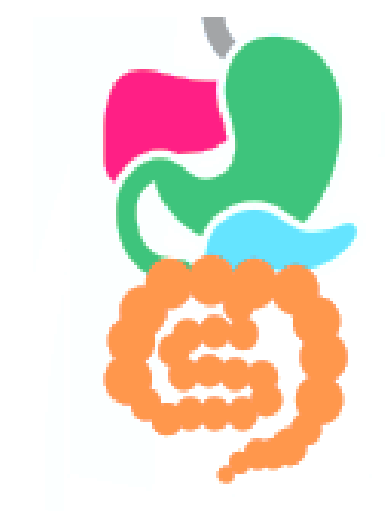
17 Specialist Societies and 49 National Gastroenterology Societies



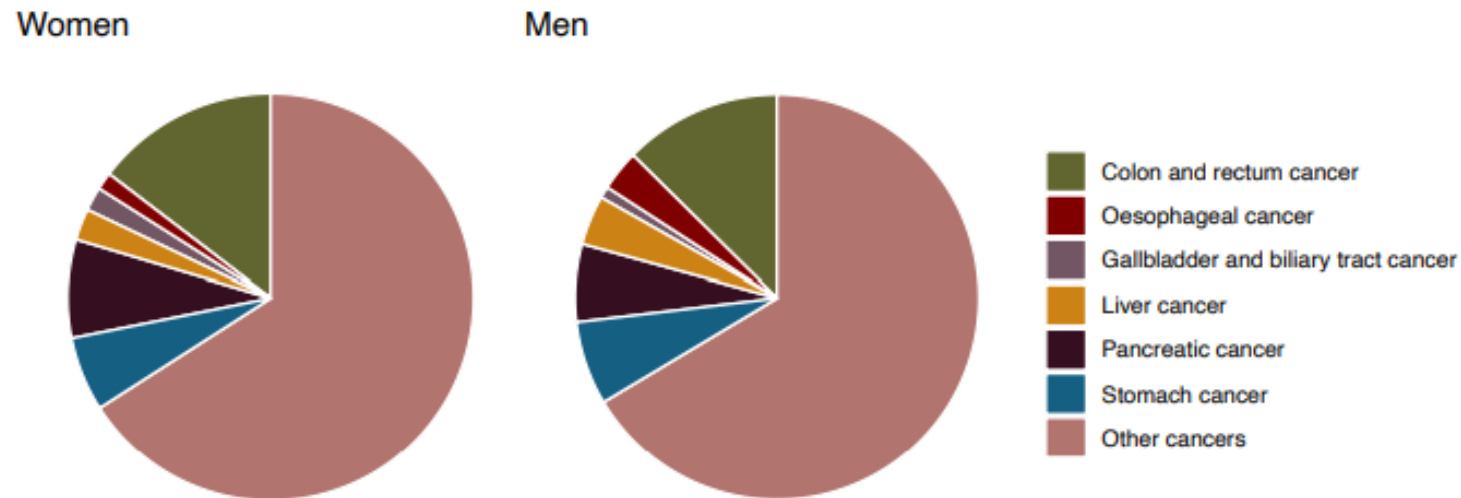
## The burden of digestive cancers

**Digestive cancers** include oesophageal, stomach, colorectal, liver, gallbladder and biliary tract, and pancreatic cancers

Digestive cancers exert a substantial burden across UEG member countries, and together are **responsible for over a third of the total number of cancer related deaths**



## The burden of digestive cancers

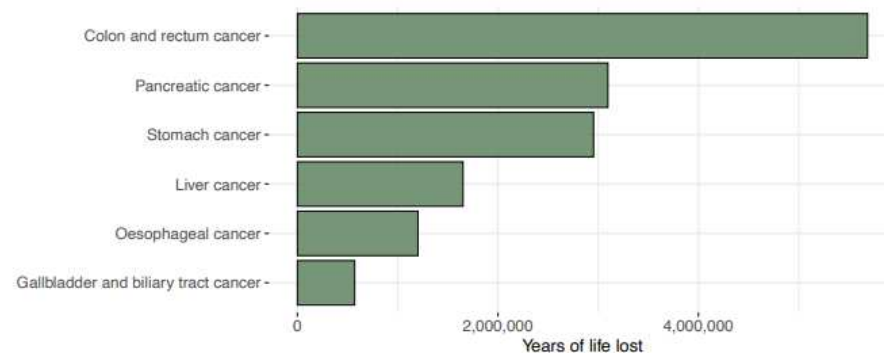


|              | <i>Colon and rectum cancer</i> | <i>Oesophageal cancer</i> | <i>Gallbladder and biliary tract cancer</i> | <i>Liver cancer</i> | <i>Pancreatic cancer</i> | <i>Stomach cancer</i> |
|--------------|--------------------------------|---------------------------|---|---------------------|--------------------------|-----------------------|
| <i>Women</i> | 15%                            | 1%                        | 2%  | 2%                  | 8%                       | 6%                    |
| <i>Men</i>   | 13%                            | 3%                        | 1%  | 4%                  | 6%                       | 7%                    |

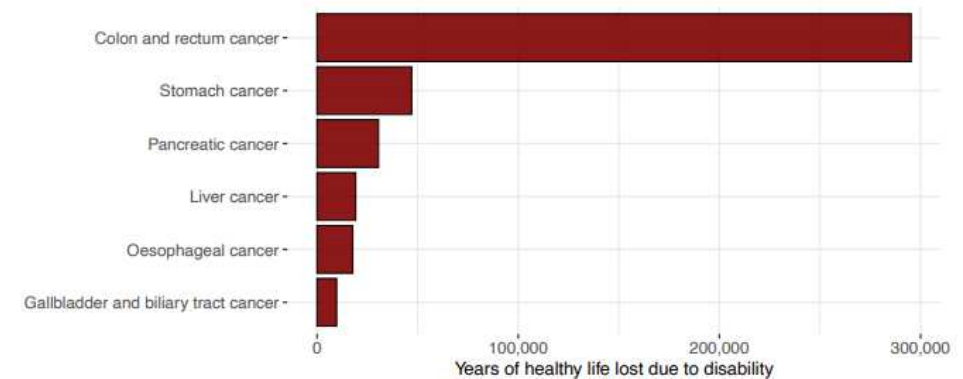
## The burden of digestive cancers

For the UEG member countries combined, **digestive cancers are responsible for approximately 32% and 20% of all years of life lost and years lived with disability** due to cancers in 2019

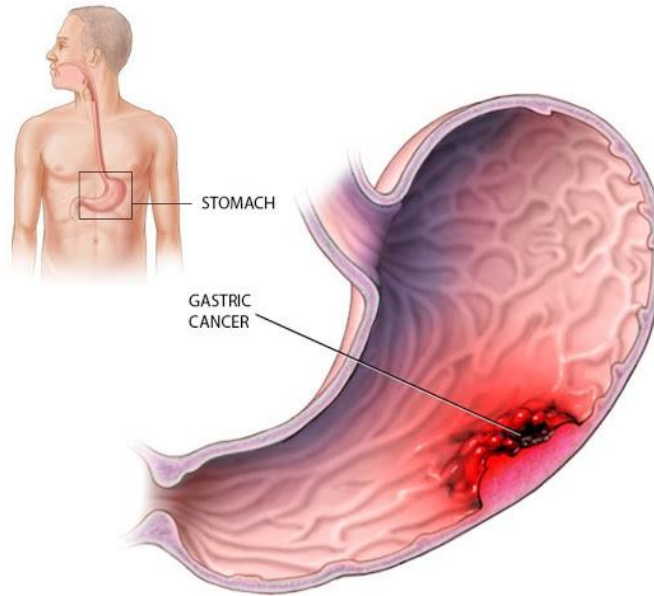
Number of years of life lost by digestive cancer, for 44 UEG member countries combined, 2019



Number of years of healthy life lost due to disability by digestive cancer, for 44 UEG member countries combined, 2019



## Gastric cancer



ECG (Early Gastric Cancer) tipo I.

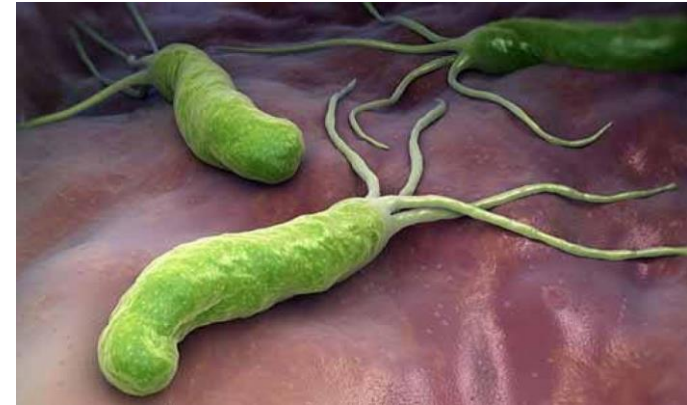


## Gastric cancer: the facts

Gastric (stomach) cancer is strongly linked to infection with the **bacteria *Helicobacter pylori*** (*H. pylori*) – a common infection affecting around **50% of the global population**

In Europe, rates of the disease are **highest in Eastern Europe** (Baltic and the neighbouring States), Slovenia and Portugal

Around **136,000 Europeans are diagnosed** with gastric cancer and **97,000 die from this cancer every year**





## What to treat?

### **Helicobacter pylori gastritis**

should be defined as an **infectious disease**

even when patients have no symptoms and irrespective of complications such as peptic ulcers and gastric cancer

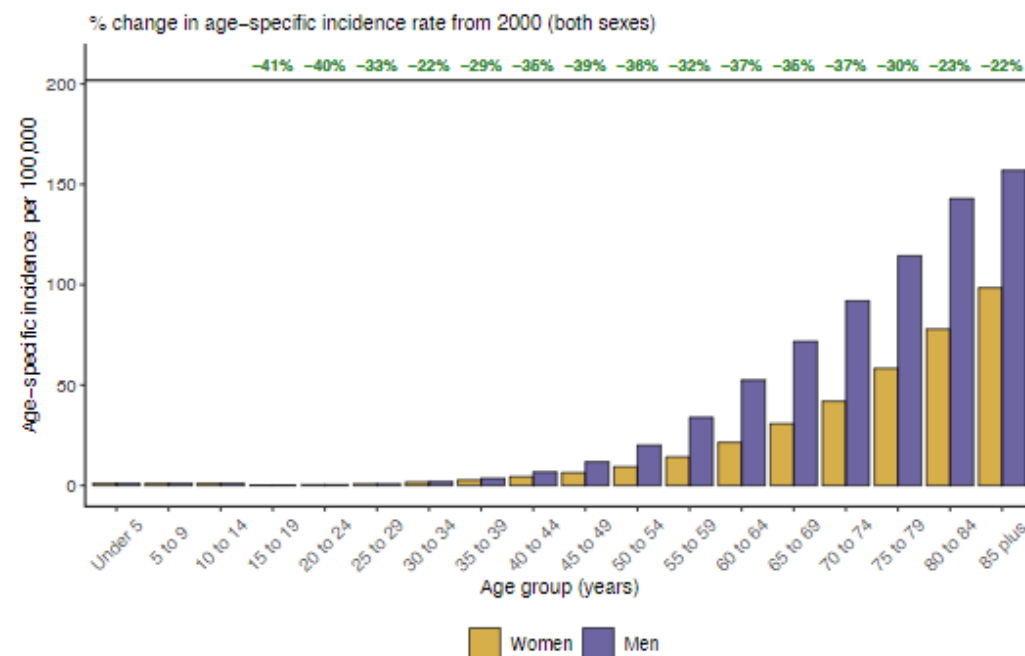
Zagari RM, et al. Dig Liver Dis. 2015;47(11):903-12  
Sugano K, et al. Gut. 2015;64(9):1353-67  
Malfertheiner P, et al. Gut. 2012;61(5):646-64  
Fallone CA, Gastroenterology. 2016;151(1):51-69.e14

## The burden of gastric cancer according to age & sex

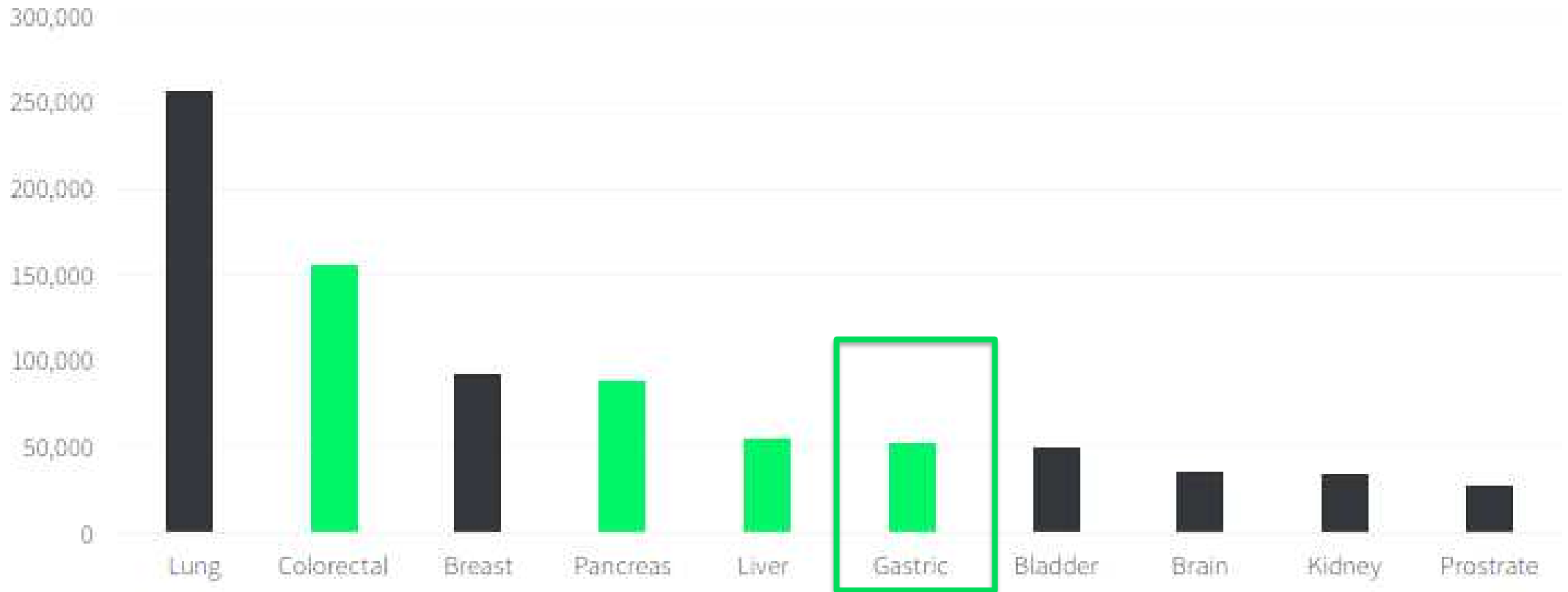
For the member countries combined, **incidence rates increase steadily with age, peaking at ages 85+ years for women and men**

For both sexes combined, **age-specific incidence rates have decreased from 2000-2019 for all age groups**

Age-specific incidence rates for stomach cancer in 2019, and percentage change in age-specific rates from 2000–2019, for 44 UEG member countries



## Estimated numbers of deaths from cancer in EU-27 for 2020 (both sexes)<sup>2</sup>



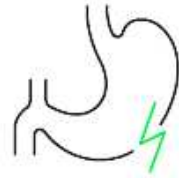
# Position Paper: Digestive Cancer Screening Across Europe

## Digestive Cancers Across Europe: The Facts

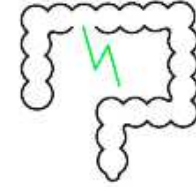
Europe accounts for a quarter of all cancer cases worldwide, with rates set to increase by more than 24% by 2035.<sup>1</sup> Digestive cancers are the leading cause of cancer-related mortality in Europe, with over 350,000 deaths each year from gastric, colorectal, liver and pancreatic cancer.<sup>2</sup>

This position paper presents the available evidence and main issues that need to be addressed to ensure the successful implementation of screening for these four types of cancer. It aims to provide recommendations to aid informed decision-making on reducing the burden of digestive cancers across Europe.<sup>3</sup>

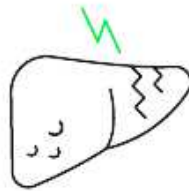
The number of deaths due to **gastric cancer** is expected to rise over the next 20 years<sup>4</sup>, but estimates suggest up to 40% of these deaths are preventable<sup>5</sup>



In Europe, **colorectal cancer** is the second most common type of cancer in women and the third most common type in men, with more than 150,000 deaths every year<sup>6</sup>



**Liver cancer** is the third most frequent cause of cancer-related mortality globally, with 78,000 deaths per year in Europe<sup>7</sup>



The 5-year overall survival rate for **pancreatic cancer** is below 10%<sup>8</sup> and, at the time of diagnosis, tumours are incurable in more than 80% of patients



## UEG Recommendations and Calls to Policymakers

### Gastric cancer

- Population-based screening for *H. pylori* in countries with a high incidence of gastric cancer (Eastern European countries, Portugal, Slovenia) and in individuals in all other countries who are considered at a high risk for gastric cancer
- A well-designed *H. pylori* screening and treatment implementation strategy on a regional and/or national basis, with thorough monitoring and outcome data collection
- Research into non-invasive markers to help identify individuals at increased risk and who may benefit from systematic screening
- The possibility and modalities of gastric cancer screening combined with CRC screening should be considered



## EU Cancer Screening Recommendations

### UEG's Recommendations

#### Gastric cancer

- Population-based screening for *H. pylori* in countries with a high incidence of gastric cancer (Eastern European countries, Portugal, Slovenia) and in individuals in all other countries who are considered at a high risk for gastric cancer



### European Commission's proposal



In places with high **GASTRIC CANCER** incidence and death rates, screening for *Helicobacter pylori* and surveillance of precancerous stomach lesions

## Contributing Member Societies



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