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INTRODUCTION

Esophageal cancer is the eighth most incident and the seventh most lethal cancer in Brazil, usually detected in advanced stages. Squamous cell carcinoma (ESCC) is the most common esophageal cancer, but over the past decades an increasing incidence of adenocarcinoma (ADE) has been observed in North America and Europe.

Even though both histological types presents high mortality rates, patients presenting ADE are more suitable for surgical procedures than ESCC, and therefore have better outcomes. There is no data issuing this epidemiological transition in Brazil.

Dismal prognosis is associated with the occurrence of relapses, metastases and second primary tumors, in addition to a low rate of therapeutic response. However, to date, few studies have evaluated the factors associated with the response to conventional treatment in patients with this tumor.

Factors affecting therapeutic response are valuable to define the best treatment choice for the patient.

OBJECTIVE

The objective of this study is to compare the epidemiological, clinical characteristics and treatment outcomes of esophageal ESCC and ADE considering ethnic group, age, stage at diagnosis, and pattern of response to first treatment in a sub-optimally screened population.

METHODOLOGY

A retrospective cohort study was performed, using information from Brazilian hospital-based cancer registries (HCR), obtained through the National Cancer Institute (NCI) Integrator System and Oncocentro Foundation of São Paulo records.

Information from 239 hospital units in 25 states of Brazil and the Federal District compound these databases. Data of 24.204 cases with esophageal cancer diagnosis (International Classification of Diseases ICD-O C15), from 2000 through 2010, were assessed and included for analysis patients with SCC and ACA whose planning, treatment and follow-up were performed in a hospital unit.

Patients under 18 years old or lacking information regarding therapeutic response were excluded from further analysis.

The patients were followed until the end of the first course of treatment to define therapeutic response.

PROJECT STATUS

The data collected are being worked on in order to identify inconsistencies. After this step, they will be analyzed to meet the proposed goal.

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