

TRANS-ATLANTIC DISPARITY IN THE INCIDENCE, PREVALENCE, AND MORTALITY OF ESOPHAGEAL CANCER IN UNITED STATES VS WESTERN, CENTRAL, AND EASTERN EUROPE, 1990-2023: A GLOBAL BURDEN OF DISEASE STUDY 2023 WITH BAYESIAN FORECASTING UP TO 2050

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BACKGROUND

Esophageal cancer remains among the deadliest cancers. Neoadjuvant chemoradiotherapy, minimally invasive surgery and immunotherapy have advanced care, but whether these gains reached every population is unclear.

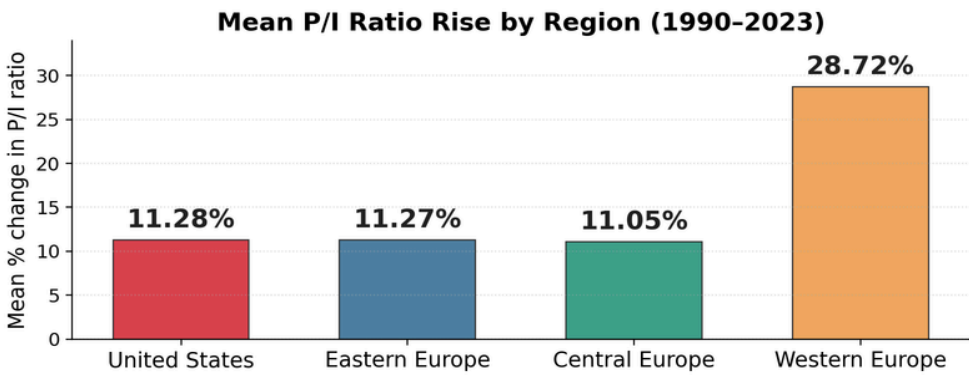
AIM AND METHODS

Aim: to test whether survival gains (MIR, P/I) reached every region, sex and age group. **Methods:** GBD 2023 data, 1990–2023, 24 region-sex-age strata. Joinpoint regression for incidence, linear regression for MIR and P/I, Bayesian forecasting to 2050.

RESULTS

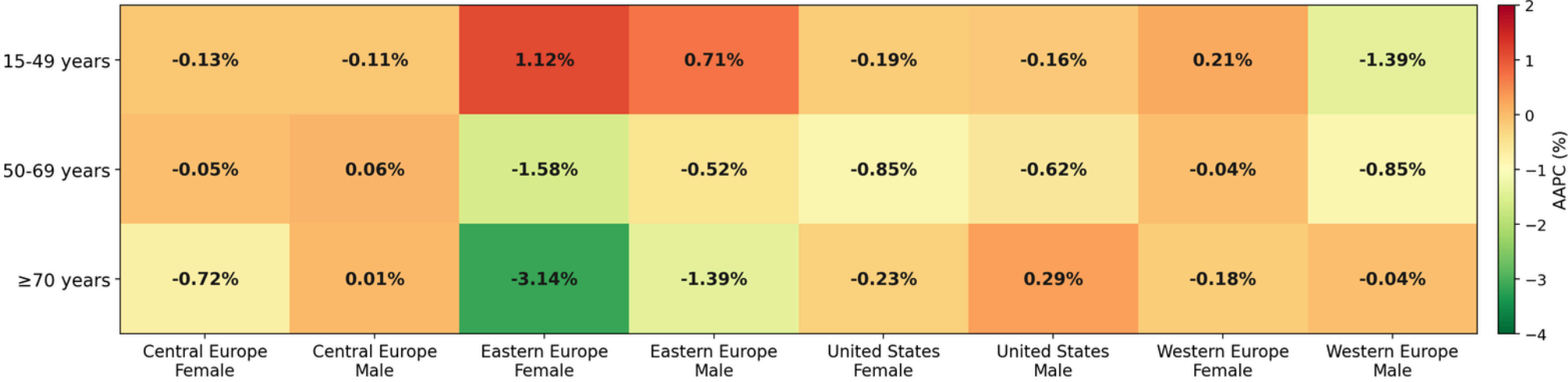


Mean MIR decline by region, 1990–2023



Mean P/I ratio rise by region, 1990–2023

Average Annual Percent Change (AAPC) in Esophageal Cancer Incidence (1990–2023) by Region, Sex, and Age Group



Average annual % change in incidence (AAPC), by region, sex, and age group (1990–2023)

CONCLUSION

Esophageal cancer survival improved in all 24 strata over 34 years, led by Western Europe. Rising incidence among young adults in Eastern and Central Europe is set to widen the transatlantic gap through 2050; centralized multimodal care may help close it.

MIR, mortality-to-incidence ratio; P/I, prevalence-to-incidence ratio; AAPC, average annual percent change.

Reference: Global Burden of Disease Study 2023, IHME. Scan for the full abstract, tables and figures.

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