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Summary

UPPER GASTROINTESTINAL TRACT CANCERS MISSED BY GASTROSCOPY IN THE CZECH REPUBLIC

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Analysis of Czech national registry data from 2013-2020 found that gastroscopy missed 12.9% of upper gastrointestinal tract cancers, with higher failure rates in women and early-stage disease.

KEY POINTS

- Among 14,701 upper GIT cancer cases analyzed, 1,890 cases (12.9%) had a negative gastroscopy performed 7-36 months before diagnosis, representing suspected diagnostic failures.
- Missed cancers were more common in women than men (15% vs. 12%, $p<0.001$) and decreased with advancing cancer stage (stage 1: 21%, stage 2: 13%, stage 3: 10%, stage 4: 9%).
- The proportion of missed cancers remained stable over the 8-year study period and did not differ by patient age.
- The study defined diagnostic gastroscopy as examination performed 0-6 months before cancer diagnosis, while gastroscopy 7-36 months prior was considered a diagnostic failure.
- This analysis is relevant for gastroenterologists and quality improvement initiatives focused on upper endoscopy performance in cancer detection.

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