

ANALYSIS OF COLORECTAL LESIONS FOLLOWING THE IMPLEMENTATION OF COLORECTAL CANCER SCREENING IN DENMARK

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Poster

Colorectal

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A Danish nationwide study of over 500,000 colorectal lesions resected between 2014–2021 found that lesion size was the strongest predictor of high-grade dysplasia and that advanced polyps declined from 22.7% to 10.2% following screening program introduction.

KEY POINTS

- Among 194,941 patients, tubular adenomas accounted for 66.8% of 504,386 resected lesions, with the proportion of advanced colorectal polyps declining from 22.7% in 2014 to 10.2% in 2021.
- High-grade dysplasia was strongly associated with lesion size ≥ 10 mm (OR 27.1 for 10–19 mm; OR 71.1 for 30–39 mm), with size outweighing histologic subtype once lesions exceeded 10 mm.
- Adenocarcinoma was identified in 0.65% of lesions and was predominantly left-sided (83.9%), with highest odds in sigmoid colon (OR 6.33) and rectum (OR 6.00) compared to caecum.
- At age 40, women had significantly higher odds of adenocarcinoma than men (adjusted OR 1.48), but this difference diminished with age and was not statistically significant from age 75 onward.
- The study provides comprehensive characterization of lesions removed in Denmark's national screening program and may inform endoscopic surveillance strategies and detection optimization.

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