PROPORTIONS AND CHARACTERISTICS OF COLORECTAL CANCER WITH DIFFERENT DETECTION HISTORY INCLUDING INTERVAL CANCER: RESULTS FROM A MULTICENTER PROSPECTIVE STUDY, C-DETECT STUDY

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UEG Week Copenhagen 2023 | Poster

Colorectal

October 15, 2023

A multicenter Japanese prospective study of 1,241 colorectal cancer patients found that 61.7% had non-screen-detected cancers with more advanced characteristics, and identified distinct patterns in FIT-interval cancers and post-colonoscopy cancers under annual fecal immunochemical test screening.

KEY POINTS

- Of 1,241 colorectal cancer patients, 38.3% had screen-detected and 61.7% had non-screen-detected cancers; non-screen-detected cancers showed significantly higher rates of T2 or deeper invasion (82.1% vs 52.8%), metastasis (52.0% vs 26.7%), and worse histology (18.7% vs 11.4%).
- FIT-interval cancer (detected within 1 year after negative FIT) accounted for 4.5% of all cancers, three-year post-colonoscopy colorectal cancer accounted for 7.0%, and cancers detected within 1 year after positive FIT with noncompliance to colonoscopy accounted for 3.9%.
- Cancers detected after positive FIT with noncompliance to colonoscopy had the highest rates of T2 or deeper invasion (87.5%) and metastasis (54.2%) among the groups.
- FIT-interval cancers and three-year post-colonoscopy cancers showed higher proportions of right-sided location (42.9% and 40.2% respectively) and female patients (53.6% and 49.4% respectively) compared to other cancer types.
- This study is relevant to clinicians and researchers interested in colorectal cancer screening effectiveness, interval cancer characteristics, and factors associated with missed or rapidly progressing cancers.

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