

Early detection and screening of Colorectal Cancer (CRC) in Georgia

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Background

According to GLOBOCAN 2020, CRC is the second cause of female cancer deaths (after breast cancer) and the fourth for men (after lung, prostate and stomach cancer) in Georgia, while both incidence and mortality have increased over the past decade. The aim of this study was to demonstrate the early detection and screening practice in patients with CRC among Georgian population.

Methods

Data was obtained from the national population-based cancer registry (PBCR) of Georgia. 795 incidence cases were

Fig. 1. Stage distribution among CRC patients who meet the age criteria for cancer screening programmes in Georgia, 2021: 50–70 years, by Settlement type and Gender



analyzed for all sites of the colon, rectum and anus combined (C18–C21) during 2021.

Results

Age of the study participants ranged from 26 to 93 years old, median age was 67 years (IQR: 59 – 74) for men and 66 years (IQR: 59 – 73) for women, 51.70% of cases were between the age group 50-70. One-fifth of all new CRC cases are diagnosed at a distant stage and 19.24% of patients with newly diagnosed disease die in the first year after diagnosing in country of Georgia. While screening for CRC is included in the national programme of cancer prevention (target population aged 50-70 years), only 5.40% of CRC cases were identified by screening and 22.89% of cases were diagnosed at the localized stage (I and II stage).

		International	Age, Years				Gender		
	Cancer site and	Classification of	≤49	50-69	≥70	Median	Male	Female	Overall
	subsite	Diseases (ICD)-	n (%)	n (%)	n (%)	(IQR)	n (%)	n (%)	n (%)
		10							
	Colorectum (Group		66	411	318	66	402	393	795
	Colon, Rectum,	C18-21	(8.30)	(51.70)	(40.00)	(59-73)	(50.57)	(49.43)	(100.0)
	Anus)								
Cases	Proximal Colon	C18.0 and	14	76	54	65	64	80	144
		C18.2-18.5	(21.21)	(18.49)	(16.98)	(59-72.5)	(15.92)	(20.36)	(18.1)
	Distal Colon	C18.6-18.7	20	103	74	66	105	92	197
			(30.30)	(25.06)	(23.27)	(59-73)	(26.12)	(23.41)	(24.8)
	Rectum	C19-20	26	175	157	67	186	172	358
			(39.39)	(42.58)	(49.37)	(60-74)	(46.27)	(43.77)	(45.0)
	Appendix	C18.1	1	2	1	63.5	2	2	4
			(1.52)	(0.49)	(0.31)	(46.5-72)	(0.50)	(0.51)	(0.5)
	Anus and Anal	C21	1	10	4	65	3	12	15
	Canal		(1.52)	(2.4)	(1.7)	(60-72)	(0.75)	(3.05)	(1.8)
	"NOS" (not	C18.8-18.9	4	45	28	66	42	35	77
	otherwise		(6.06)	(10.95)	(8.81)	(59-74)	(10.45)	(8.91)	(9.7)
	specified)								

Table. 1. New Colorectal Cancer Cases by Age and Sex, Georgia, 2021.

Fig. 2. Stage distribution of CRC subsites in males and females, Georgia, 2021



Fig. 3. Stage distribution of CRC subsites in males and females, Georgia, 2021



Conclusions

Despite Georgian CRC screening program is an integrated part of the national healthcare system, secondary prevention and early detection practice in Georgia is very low. Acceleration of screening policy in the country is necessary. Educational and policy initiatives should be implemented to increase CRC screening, specifically focused on rural citizens who have lack access to healthcare infrastructure.

Ethical Consideration

The NCDC&PH Institutional Review Board revised and approved the study protocol (IRB# 2022-009/ IRB0000215 21.02.2022). The data used for the research were fully anonymized and meet the criterion for privacy protection under the General Data Protection Regulation (GDPR).

References

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