Information on CRC patients prognosis: useful for communication of CRC screening benefits?

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Introduction

- CRC patients prognosis is being communicated with professionals and lay public for various reasons:
- 1. It documents the improvements in CRC therapy
- 2. It documents the improvements in CRC diagnostics
- 3. It documents the severity of CRC
- 4. It documents the shifts in CRC epidemiology



Introduction

- CRC patients prognosis is being communicated with professionals and lay public for various reasons:
- 1. It documents the improvements in CRC therapy
- 2. It documents the improvements in CRC diagnostics
- 3. It documents the severity of CRC
- 4. It documents the shifts in CRC epidemiology
- Can it also document a successful CRC screening?
- Can we use it for communication of CRC screening benefits?



Outcome measures in CRC patients

- observed survival
 - total mortality
- cause-specific survival
 - mortality directly due to specific cancer
 - accurate information on cause of death is necessary
- relative survival
 - mortality due to specific cancer both direct and indirect mortality

observed survival proportion

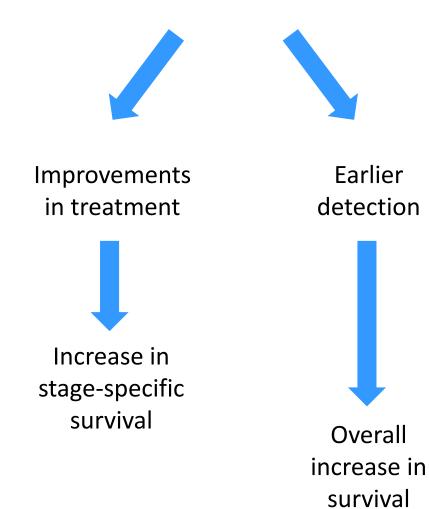
Relative survival =

expected survival proportion

expected survival estimated from population life tables

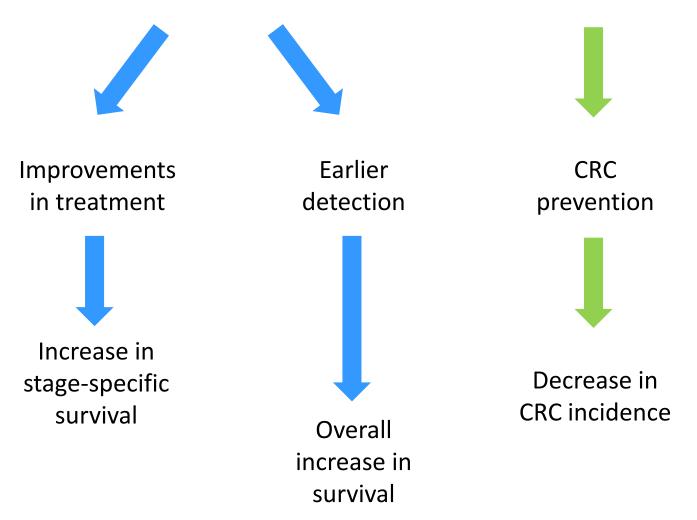


Progress in CRC survival



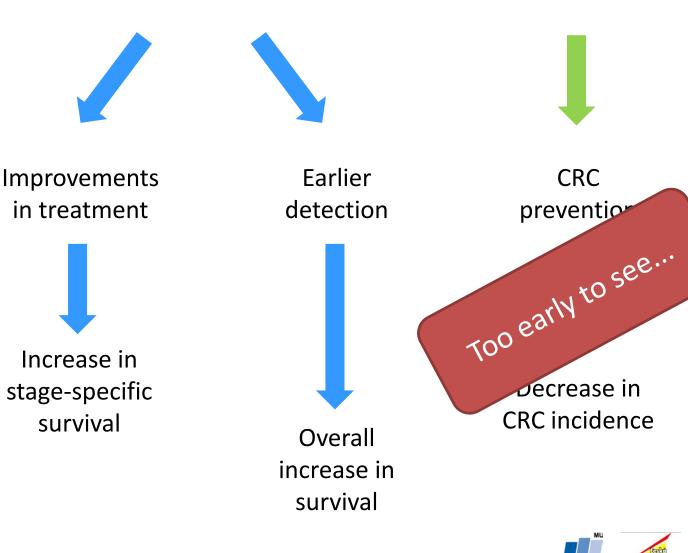


Progress in CRC survival





Progress in CRC survival



5-year relative survival rates

	5-year <u>relative</u> survival (95% confidence intervals)			
Colorectal cancer (C18-C20)	Comparison of earlier periods ³		Comparison of recent periods ⁴	
	1990-1994	1995-1999	2000-2004	2005-2009
All patients ¹	35.3 (33.9-36.8)	42.9 (41.4-44.4)	47.0 (45.7-48.4)	53.0 (51.7-54.3)
Treated patients ²	48.9 (46.9-50.9)	53.3 (51.5-55.0)	55.3 (53.8-56.9)	60.8 (59.4-62.3)
Treated patients – stage 1	*	77.4 (73.9-80.8)	82.8 (79.6-85.8)	89.4 (86.6-92.0)
Treated patients – stage 2	*	63.9 (60.8-66.9)	67.9 (65.1-70.5)	75.5 (72.9-77.9)
Treated patients – stage 3	41.5 (37.1-46.0)	42.0 (38.3-45.7)	46.9 (43.6-50.2)	55.9 (53.0-58.7)
Treated patients – stage 4	11.7 (9.0-14.9)	10.9 (8.7-13.5)	11.9 (9.8-14.1)	14.6 (12.6-16.8)

* Different TNM classification systems, values not comparable.

¹Evaluation of Czech National Cancer Registry: all CRC patients.

² Evaluation of Czech National Cancer Registry: all CRC patients with recorded cancer treatment

³Cohort analysis.

⁴ Period analysis



5-year observed survival rates

	5-year <u>observed</u> survival (95% confidence intervals)			
Colorectal cancer (C18-C20)	Comparison of earlier periods ³		Comparison of recent periods ⁴	
	1990-1994	1995-1999	2000-2004	2005-2009
All patients ¹	27.5 (26.4-28.7)	33.8 (32.7-34.9)	37.6 (36.6-38.7)	43.3 (42.3-44.4)
Treated patients ²	38.2 (36.6-39.7)	42.3 (41.0-43.7)	44.7 (43.4-45.9)	50.1 (48.9-51.3)
Treated patients – stage 1	*	61.6 (59.0-64.1)	66.8 (64.3-69.1)	73.3 (71.1-75.4)
Treated patients – stage 2	*	50.1 (47.8-52.3)	54.0 (51.9-56.0)	61.2 (59.2-63.1)
Treated patients – stage 3	32.8 (29.4-36.2)	33.7 (30.9-36.6)	38.2 (35.6-40.9)	46.8 (44.4-49.1)
Treated patients – stage 4	9.3 (7.2-11.8)	8.8 (7.0-10.8)	9.9 (8.2-11.7)	12.6 (10.8-14.4)

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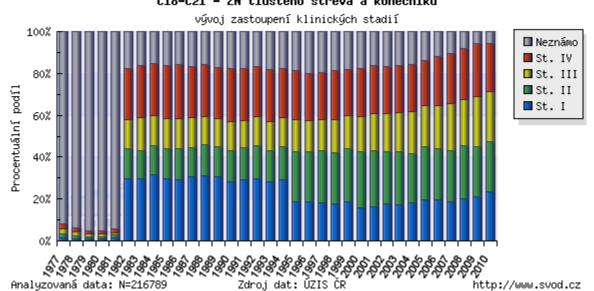
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Early CRC detection?



C18-C21 - ZN tlustého střeva a konečníku

No massive shift in favour of less advanced stages!



Summary

- We can use CRC survival rates for communication of CRC screening benefits, BUT
- It is very hard to distinguish the role of CRC screening from other factors.



So...

What sort of information on CRC prognosis can be easily used for the propagation of CRC screening?



Stage IV prognosis!

	5-year <u>observed</u> survival (95% confidence intervals)				
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Look at the tragic 5-year observed survival for stage IV CRC!



Thank you for your attention!

