

**World Organization for Digestive Endoscopy
(OMED) Colorectal Cancer Screening Committee
Meeting
Chicago, 2005**

Committee aims:

- Promote development of **non-invasive** CRC screening tests & evaluate their performance.
- Promote development of **endoscopic** CRC screening tests & evaluate their performance.
- Promote & evaluate the **international performance** of CRC screening programs.

OMED CRC Screening Committee Members

Internationally & Interdisciplinary Representative

- Ahlquist D, USA
- Atkin W, UK
- Bond JH, USA
- Crespi M, Italy
- Classen* MW, Germany
- Faivre J, France
- Gnauck* R, Germany
- Hoff G, Norway
- Lambert* R, France
- Lieberman D, USA
- Levin B, USA
- Machado* G, Brazil
- Montori* A, Italy
- Rainoldi J, Argentina
- Rex DK, USA
- Rozen P, Israel
(Chairman)
- Saito H, Japan
- Schmiegel W, Germany
- Schoengold* R, USA
- Smith* R, USA
- Spicak J, Czech Republic
- St. John* J, Australia
- Winawer S, USA
- Wong BCY, China
- Young GP, Australia
- Zavoral M, Czech Republic
- Zauber A, USA

*Associate Members

Participants at Today's Meeting

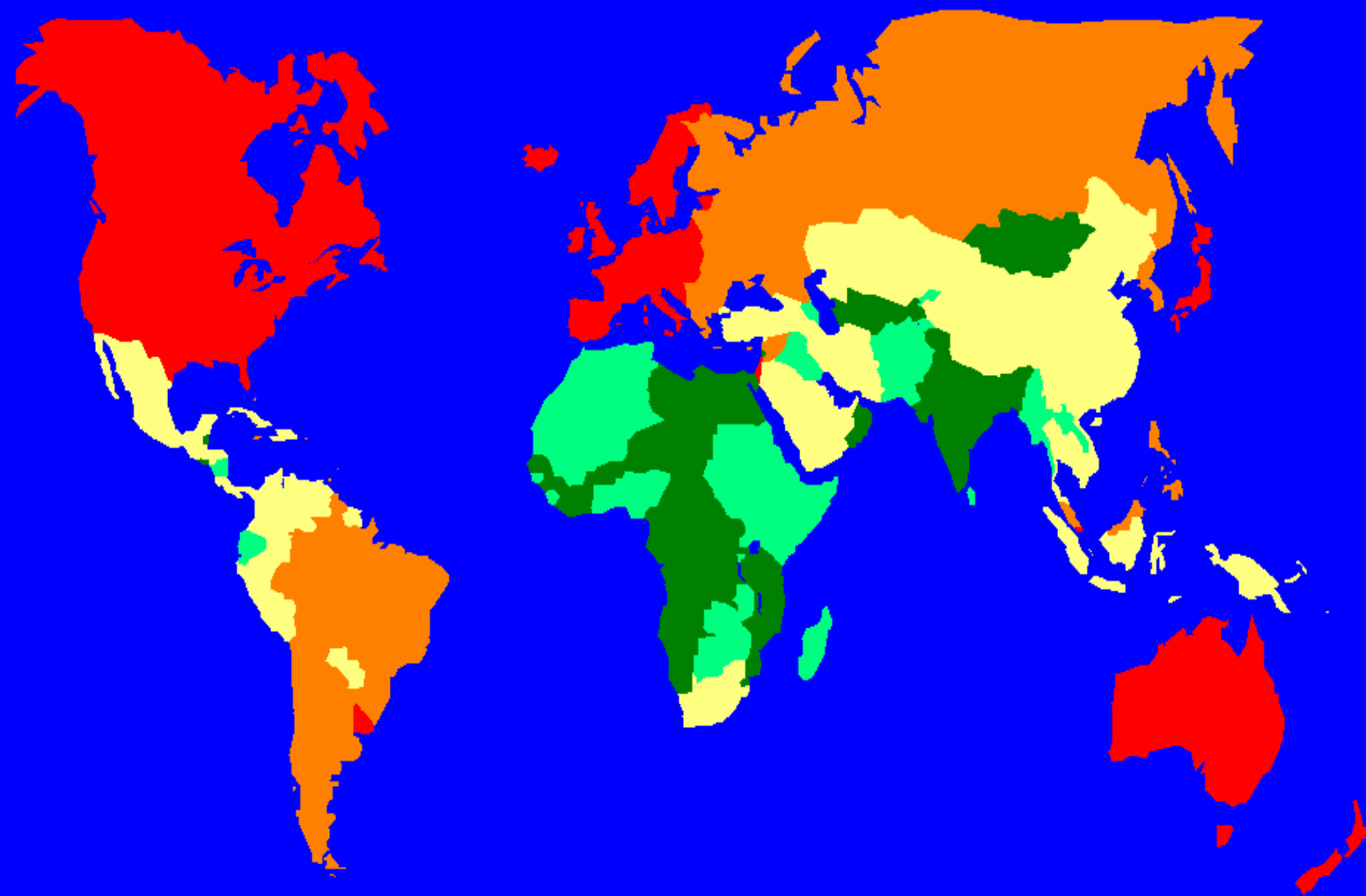
- **Physicians from 21 countries**
- **Governing Council Members of OMED & IDCA**
- **Representatives from Industry**
- **American Cancer Society**

CRC Worldwide

- **Worldwide, in the year 2000:**
 - 975,000 new cases**
 - 492,000 died**
 - **third most common cancer (lung, breast)**
 - **second most prevalent cancer (breast)**
(Parkin et al. Eur J Cancer 2001, 37:S4-S66)
- **Cost the US economy \$5,294 million in 2000**
(Current Gastroenterol Reports 2003;5:93-4).

Disease of the westernizing world

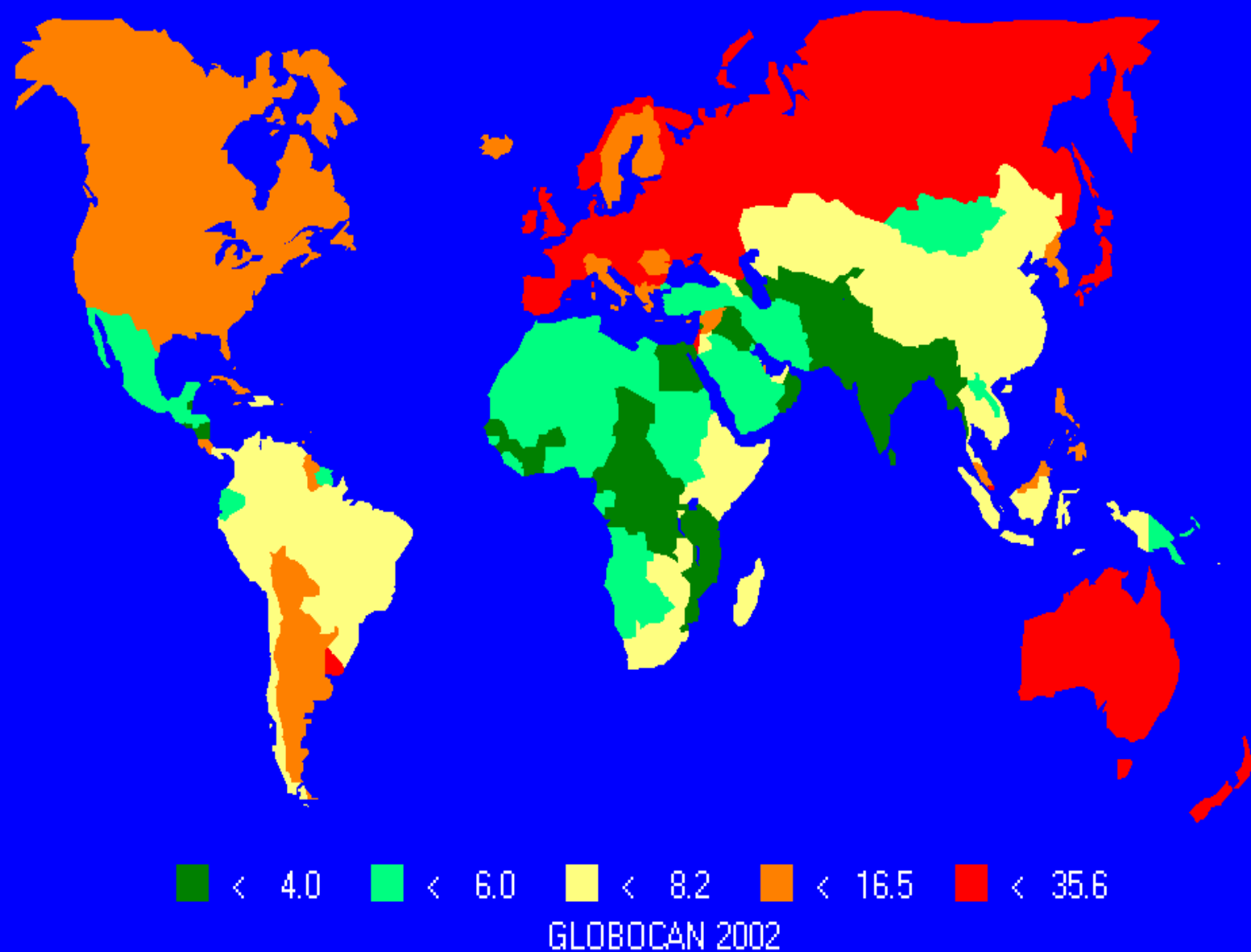
Incidence of Colon and rectum cancer: ASR (World)-Male (All ages)



 < 4.9  < 7.7  < 13.6  < 30.1  < 58.5

GLOBOCAN 2002

Mortality from Colon and rectum cancer: ASR (World)-Male (All ages)



CRC Mortality & Life Expectancy

- CRC Mortality represents late stage diagnosis &/or **inadequate** medical therapy.
- CRC Screening reduces mortality from CRC, but not **overall** mortality, especially from CV disease.
- Mortality Reduction & **Prolongation** of life is obtained by combining:
 - primary prevention**
 - diet/lifestyle
 - chemoprevention (?)
 - with **secondary prevention**
 - screening for CRC & other common diseases

Can We Reduce Colorectal Cancer Mortality by Screening, Early Diagnosis & Treatment?

We need to know in each country:

- **Who** are at risk?
- Are there **adequate** medical facilities available for screening & diagnosis?
- Can the at-risk population **afford** screening?
- Is the **expertise** available for early treatment?
- Can the at-risk population **afford** these treatments?

The Themes of Today's Meeting

Can we:

- Develop **more sensitive** & specific CRC screening tests that lead to high-yield colonoscopy?
- Improve **yield** of colonoscopy detected neoplasia?
- Improve colonoscopy **instruments**?
- Evaluate by how much does **polypectomy** prevent CRC?
Do we need to screen for **interval CRC**? How?
- How to **integrate** CRC screening into holistic Preventive Health Practice?

Acknowledgments

- To Committee **colleagues** for suggesting the program topics.
- To **Medconnect** for organizing today's meeting.
- For the support by **Industry** of today's meeting: