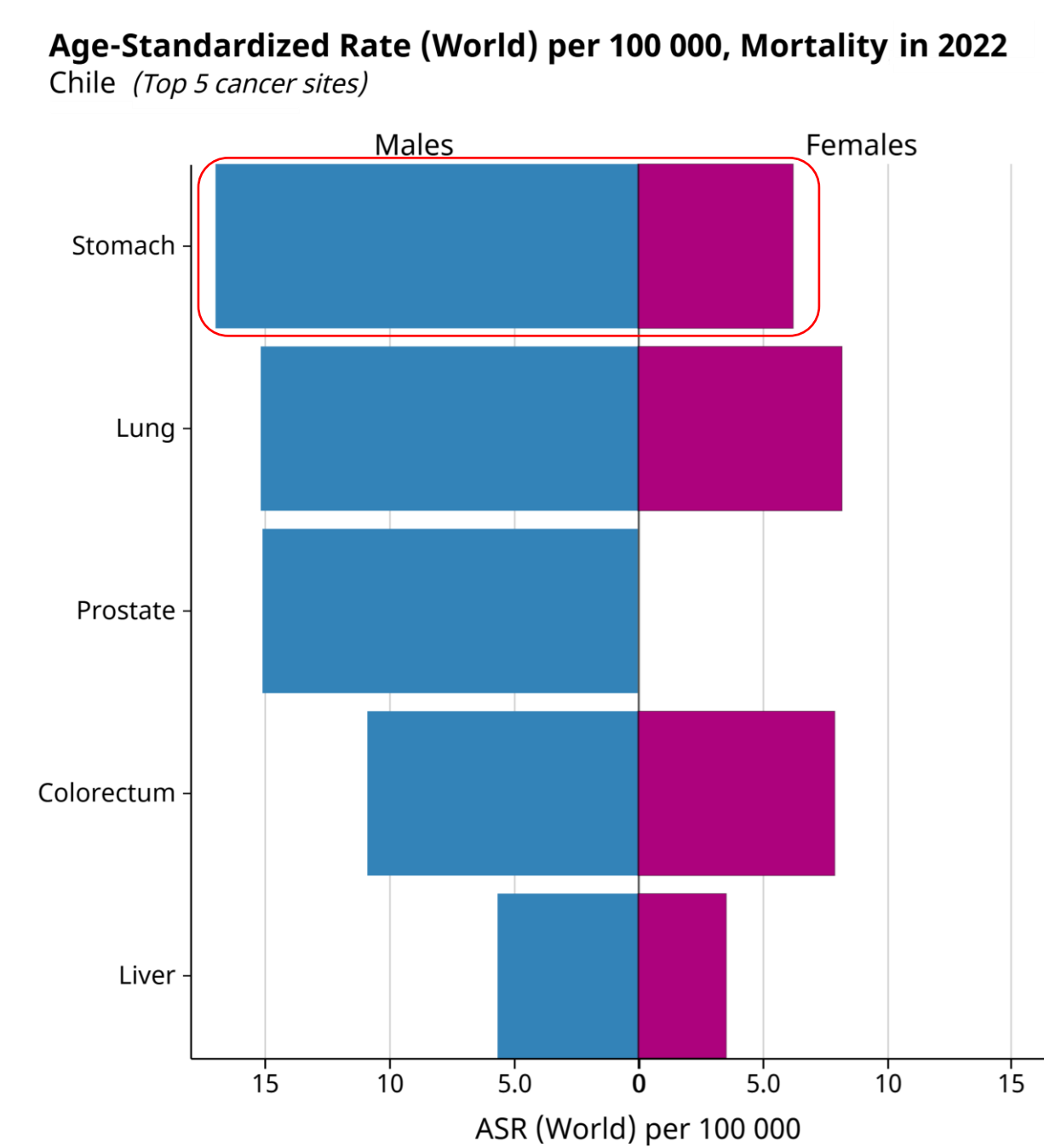


INTRODUCTION

Gastric Cancer (GC) is the leading cause of cancer-related death in Chile.

Despite having prioritized health coverage for GC prevention, survival rates remain low: 27% 5-year survival rate.



OBJECTIVE

Evaluate if lower mortality rates from stomach cancer are associated with current prevention strategies: treating *H. pylori* and endoscopic screening of symptomatic cases.

METHODS

Cross-sectional ecological study of all 29 Chilean **Health Services** from 2009 to 2024.

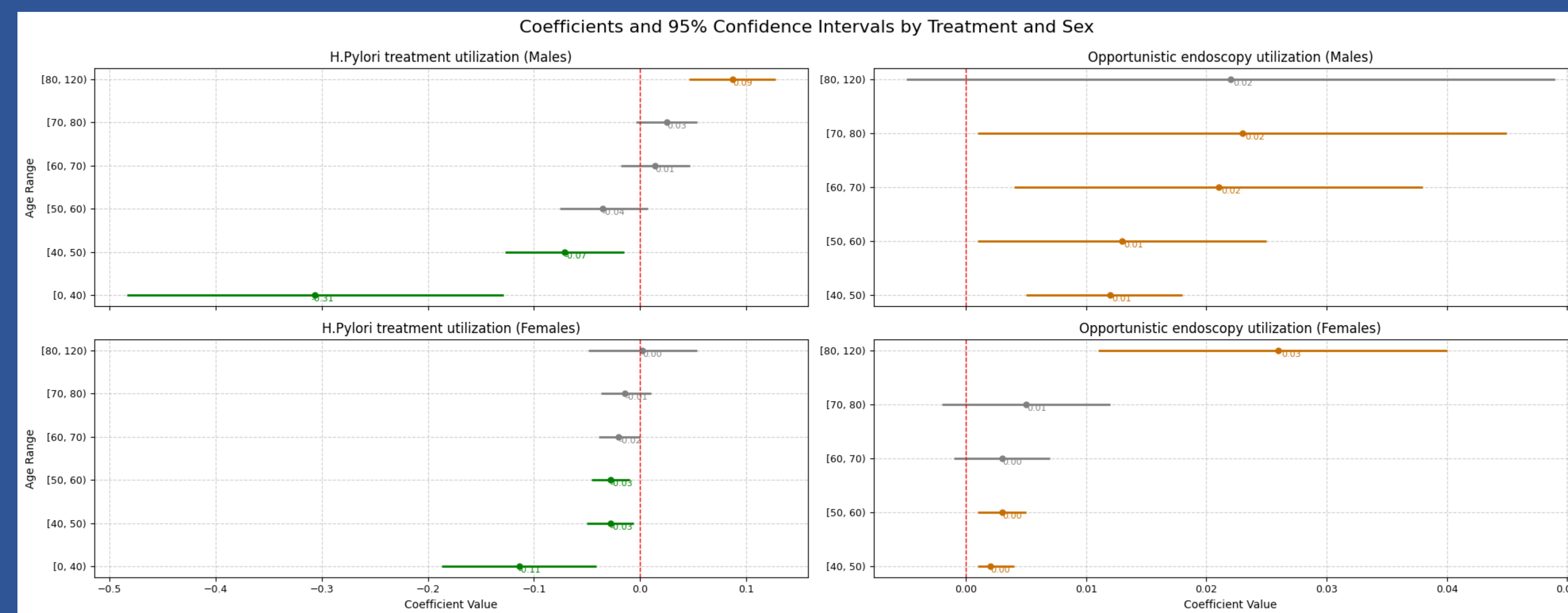
We analyzed specialty consultation and endoscopy availability, *H. pylori* treatment and endoscopic utilization, and GC mortality rates.

Using **mixed effects models**, we compared patient treatments/screenings rates against the availability of specialist consultations and endoscopies, and against mortality rates.

We adjusted for **rurality, private insurance coverage** and temporal trends across sex and age groups.

H. Pylori treatment is associated with reduced stomach cancer mortality, increased endoscopy capacity and screening of symptomatic cases is not.

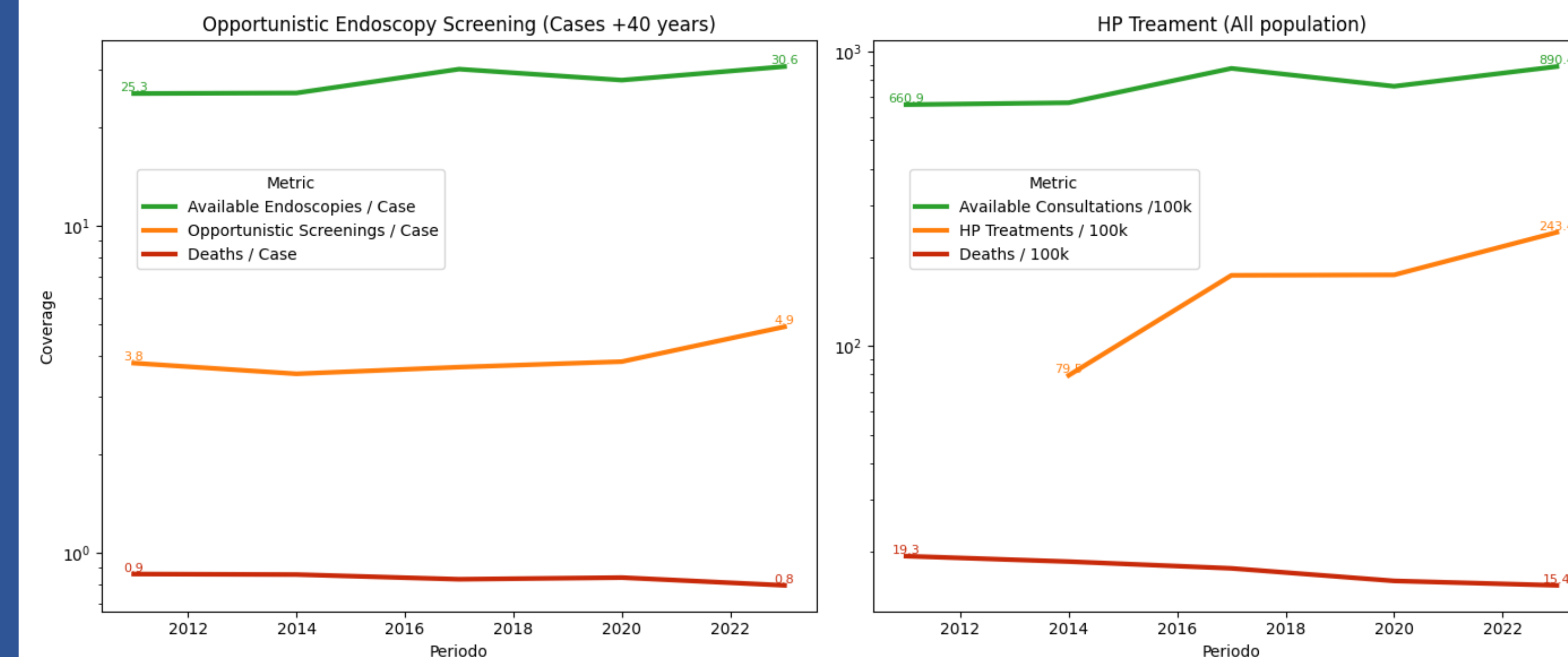
Treating *H. pylori* bacteria was significantly associated with mortality reduction among young and middle-aged adults.



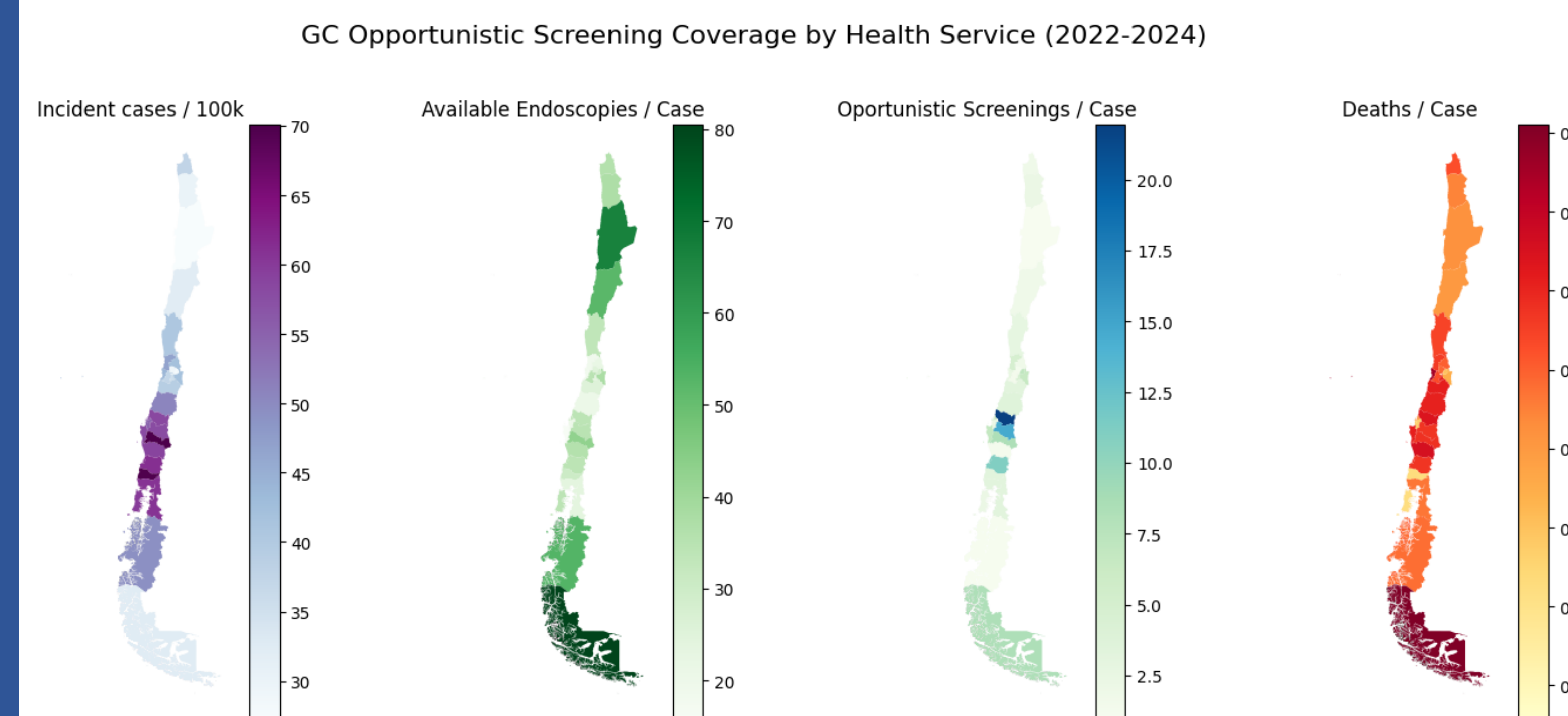
Higher endoscopic screening rates of symptomatic cases were associated to higher death rates.

RESULTS

H. pylori treatment rates have increased significantly since 2013. This rise matched the steady drop in stomach cancer deaths.



Increased endoscopy availability was associated with higher screening rates of symptomatic cases, but mortality remained high across the country.



Discussion

Higher utilization of endoscopies has found more cancer cases, but too late due to long waiting lists of symptomatic cases.

Endoscopies must target high-risk patients to catch cancer in its earliest stages.

Resources must be shifted to high-risk areas.

References:

Ferlay J, Ervik M, Lam F, Laversanne M, Colombet M, Mery L, Piñeros M, Znaor A, Soerjomataram I, Bray F (2024). Global Cancer Observatory: Cancer Today (version 1.1). Lyon, France: International Agency for Research on Cancer. Available from: <https://gco.iarc.who.int/today>.

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