

Prof.Søreide, del II/1

Epidemiologi

Epidemiologi

FOLKESYKDOMMEN

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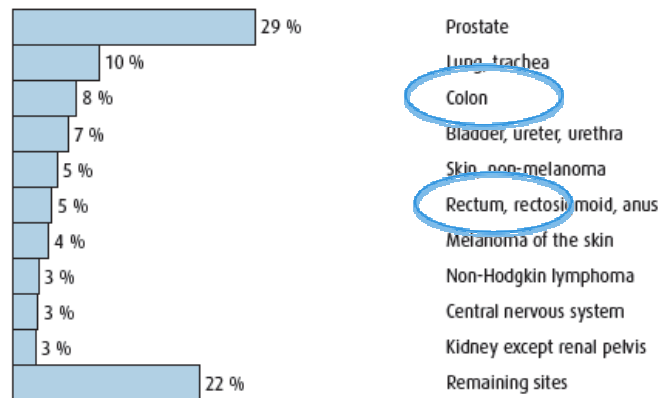
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Cancer in Norway 2009

Cancer incidence, mortality,
survival and prevalence in Norway

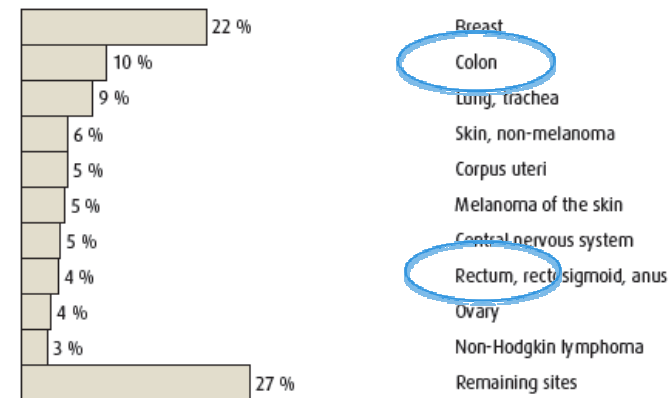
De hyppigste kreftformene i Norge

MALES all ages (70 979 cases)



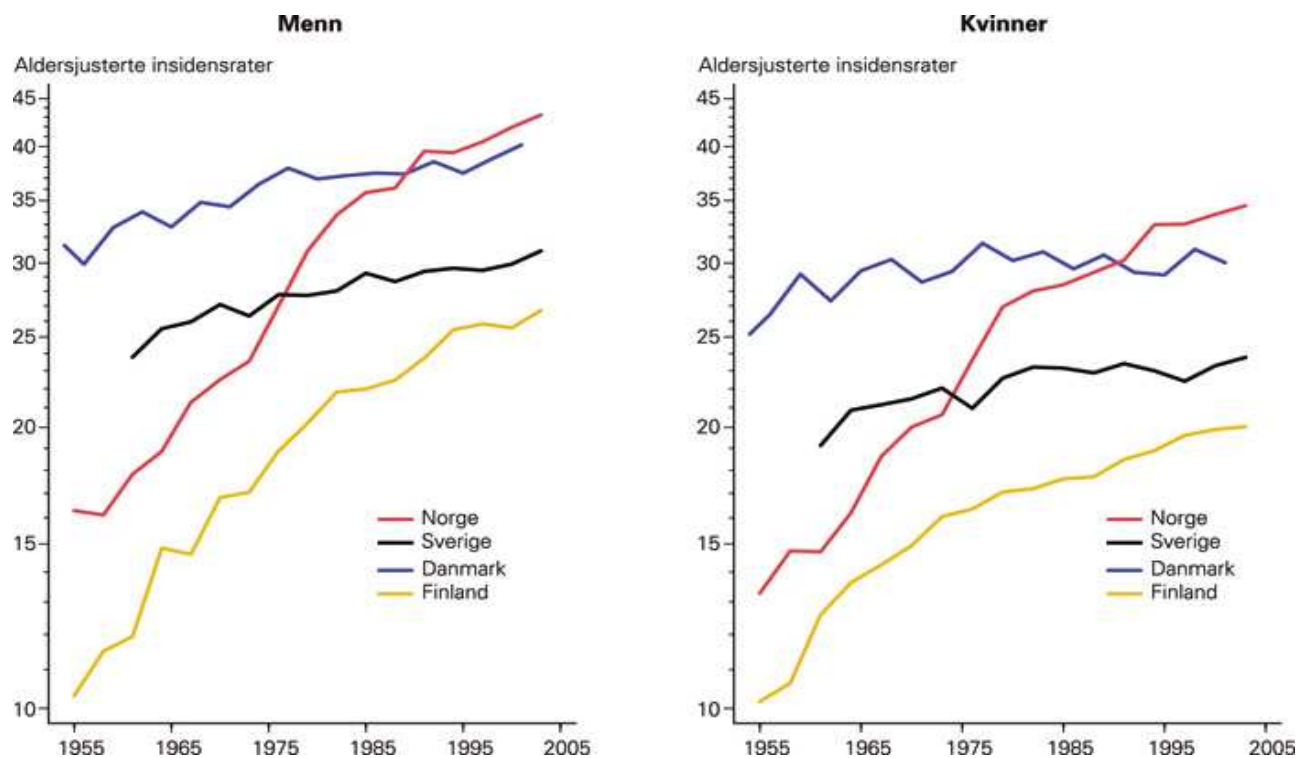
Til sammen ca 13%

FEMALE all ages (62 311 cases)



Til sammen ca 14%

Aldersstandardiserte rater av CRC



Trend over tid for fire av de nordiske land etter kjønn. Data fra NORDCAN

Figure 10-E: Colon (ICD-10 C18)

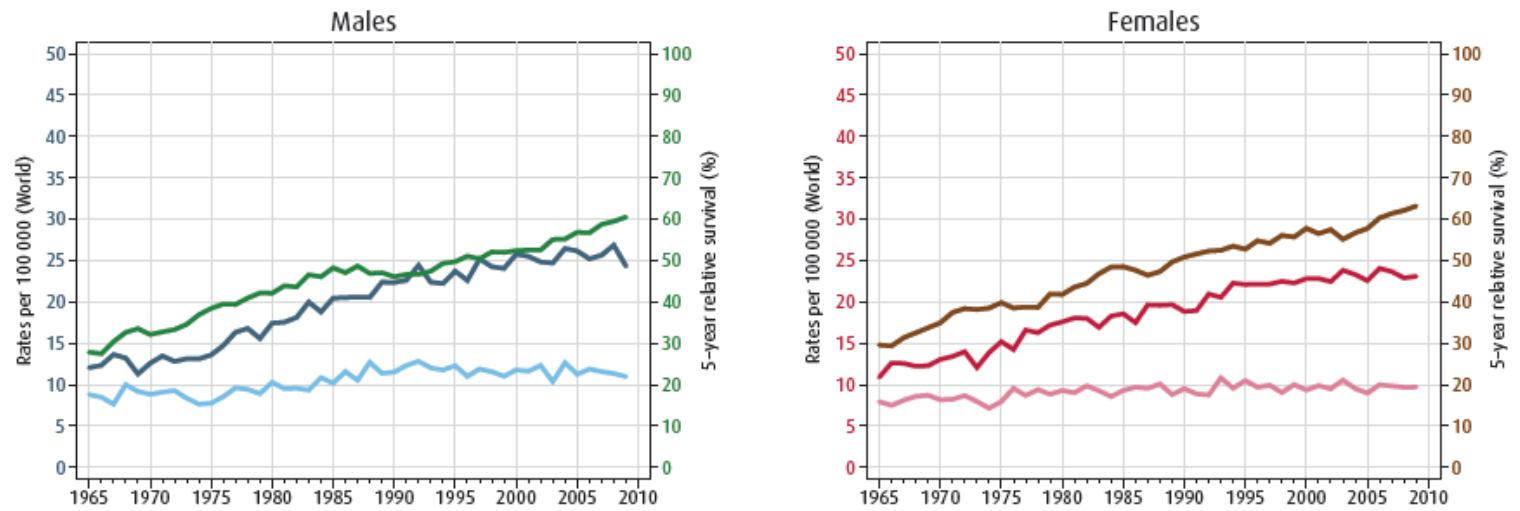
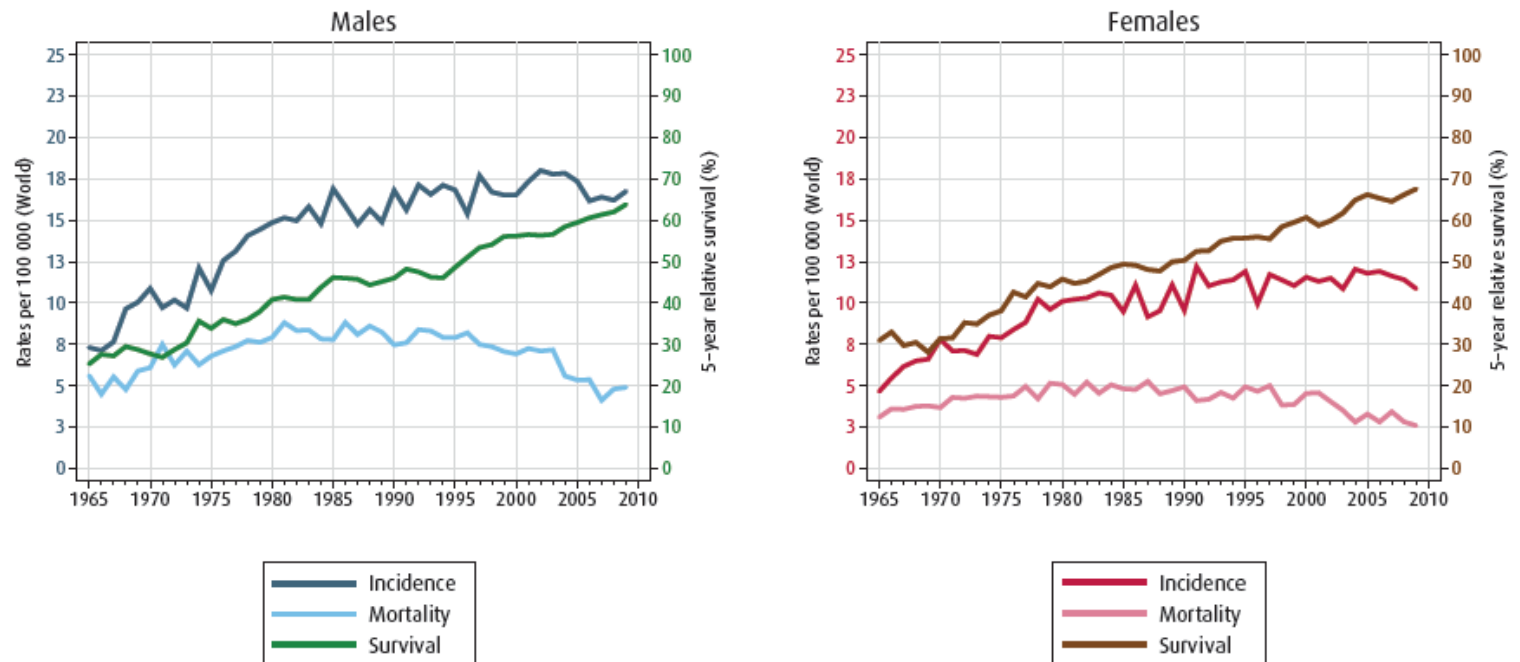


Figure 10-F: Rectum, rectosigmoid, anus (ICD-10 C19-21)



*What's my risk for
colorectal cancer?*



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Risikofaktorer

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Krefttrisiko – hvem får CRC?



the main difference between
Europe and USA

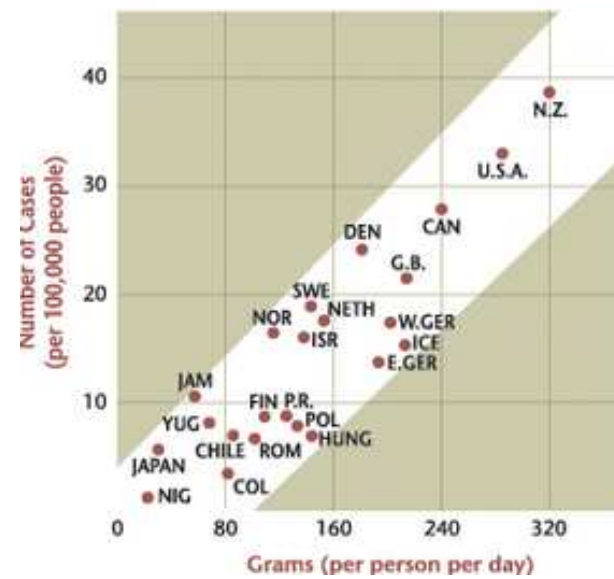


prikk:)





Correlation Between Meat Consumption
and Colon Cancer Rates in Different Countries







BAYER
PHARMACEUTICAL
PRODUCTS.

Send for
samples and
Literature

ASPIRIN
The substitute for
the salicylates

PROTARGOL
The antiseptic

EUROPHEN
The antirheumatic

HEROIN
The sedative for
coughs

LYCETOL
The uric acid solvent

SALOPHEN
The antirheumatic and
antineuralgic

SYLPHONAL
The antiseptic

SYLOSE
The antiseptic

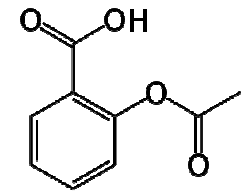
TRONAL
The antiseptic

FERRO-SALOPHEN
The antirheumatic and
antineuralgic

BEHICRANIN
The antiseptic

**FARBENFABRIKEN OF
ELBERFELD CO.**

**40 STONE ST
NEW YORK.**



O=C(O)c1ccccc1O
 $\xrightarrow{\text{CH}_3\text{COCl}}$
CC(=O)Oc1ccccc1C(=O)O

SALICYLIC ACID ACETYL SALICYLIC ACID

ACID.ACETYL.SALICYL.

Acid.
Acetyl-salic.

Acid.
acetylo-salic

Aspirin.

Acetanilidum

PREVENTION

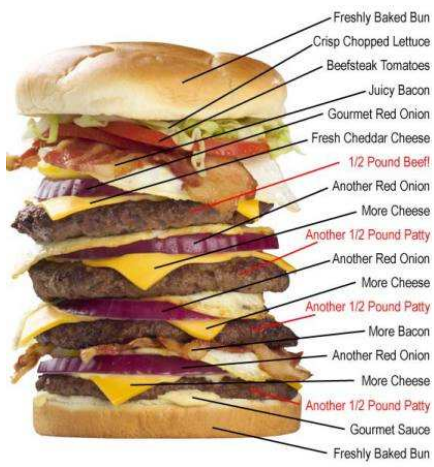
Will an aspirin a day keep the colorectal cancer away?



Marianne Berg and Kjetil Søreide

A long-term follow-up study that assessed the effect of daily aspirin on colorectal cancer incidence concluded that it significantly reduced the risk of colon cancer, but not rectal cancer. Detailed analysis of the findings indicate that it is too soon to recommend daily aspirin for cancer prevention in healthy individuals.

Berg, M. & Søreide, K. *Nat. Rev. Clin. Oncol.* 8, 130–131 (2011); published online 4 January 2011;
[doi:10.1038/nrclinonc.2010.225](https://doi.org/10.1038/nrclinonc.2010.225)



Risikofaktorer

Økt risiko

- Rødt kjøtt
- Fett
- Overvekt/fedme
- Alkohol
- Røyk
- IBD (UC >> Crohn)

Redusert risiko

- Fiberrik mat
- Folsyre (?)
- Calcium/vit-D (?)
- Aktivitet (>30 min)