

Study finds considerable differences in bowel cancer deaths across Europe

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Over the past 40 years, deaths from bowel (colorectal) cancer have been falling in an increasing number of European countries. Yet considerable disparities still exist between men and women and between specific regions in Europe, finds a study in *The BMJ* this week.

Colorectal cancer is a major public health issue in most [western countries](#). Over the past two decades, mortality has been steadily decreasing in many European countries, mainly due to a reduction in [risk factors](#) such as smoking and [alcohol intake](#), greater participation in screening, and advances in treatments.

But important disparities still exist, particularly between northwest Europe (where the earliest and largest declines were observed) and the rest of Europe.

So an international team of researchers set out to provide up to date, long term temporal trends of colorectal [cancer mortality](#) for all European countries. Using the World Health Organization mortality database, they examined changes in colorectal cancer mortality in 34 European countries by age and sex between 1970 and 2011.

They found that from 1989 to 2011, colorectal cancer mortality increased by an average of 6% for men and decreased by an average of 15% for women in the 34 European countries.

Reductions in colorectal cancer mortality of more than 25% in men and

30% in women occurred in Austria, Switzerland, Germany, the United Kingdom, Belgium, the Czech Republic, Luxembourg, and Ireland. By contrast, mortality rates fell by less than 17% in the Netherlands and Sweden for both sexes.

Over the same period, smaller or no declines occurred in most central European countries. However, substantial mortality increases occurred in Croatia, the former Yugoslav republic of Macedonia, and Romania for both sexes and in most eastern European countries for men.

Possible reasons for the difference between the sexes include the fact that men are less likely than women to participate in screening, are less well informed about health issues, and are less inclined to seek medical advice, say the authors. Men also have less varied dietary habits and higher levels of smoking and alcohol consumption than women.

The researchers stress that their results should be interpreted with caution because the reliability of death certification can vary between [countries](#). However, they say, "it is unlikely that errors in diagnostic or certification could have significantly affected our findings."

Countries with the largest reductions in colorectal cancer mortality seem to have the highest levels of screening, especially endoscopic screening, they write. These strategies "could be used as models to design and implement effective health policies to prevent death from colorectal cancer," they conclude.

More information: Trends in colorectal cancer mortality in Europe: retrospective analysis of the WHO mortality database, The *BMJ*, www.bmj.com/cgi/doi/10.1136/bmj.h4970

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