Esophageal cancer occurs when tumors form in the tissues of the esophagus, which is a muscular tube that moves food and liquids from the throat to the stomach for digestion.

The two most common types of esophageal cancer are squamous cell carcinoma (ESCC) and adenocarcinoma (EAC).

ESCC tumors generally form in the flat squamous cells lining the upper and middle parts of the esophagus.

EAC begins in the cells of the mucus-secreting glands in the esophagus, typically near the stomach.

Men are more than twice as likely as women to be diagnosed with esophageal cancer.

Median age at diagnosis: 68 years
Median age at death: 69 years

Common risk factors for esophageal cancer may be related to certain behaviors, or pre-existing or genetic conditions. Common risk factors include:

- Obesity
- Alcohol use
- Tobacco use
- Diet
- Barrett’s esophagus
- Gastroesophageal reflux disease (GERD)
- Genetics

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- Tobacco use
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Global incidence:

- Asia accounts for about 80% of all esophageal cancer patients, with China alone accounting for over 50% of the global patient population.

- North America: 20,800
- Europe: 53,000
- Asia: 481,600
- Central America & the Caribbean: 3,500
- Africa: 27,500
- South America: 15,500
- Oceania: 2,200

Signs and symptoms:

Many esophageal cancers may not cause symptoms until they have reached an advanced stage. Symptoms may also be mistaken for conditions unrelated to cancer. These may include:

- Unintended weight loss
- Weakness due to anemia (from blood loss)
- Chest pain in the absence of heart disease
- Difficulty swallowing solid foods
- Heartburn or indigestion
- Coughing or hoarseness

Benefits of early intervention:

There are notable potential advantages of earlier diagnosis and treatment of esophageal cancer. These include:

- Improved survival outcomes
- Increased quality of life
- Lower cost of treatment

Staging and survival rates:

Five-year relative survival rates vary depending on the stage and type of esophageal cancer:

- Localized: 46%
- Regional: 26%
- Distant: 5%

Stage and survival rates:

- Localized: 90%
- Regional: 10%
- Distant: 0%

Treatments:

- Surgery
- Immunotherapy
- Radiation therapy
- Chemotherapy
- Targeted drug therapy
- Endoscopic treatments

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Improved survival outcomes
Increased quality of life
Lower cost of treatment

There are notable potential advantages of earlier diagnosis and treatment of esophageal cancer.

The recommended treatment for esophageal cancer will depend upon the stage that the cancer is diagnosed in, among other factors, and may include:

- Surgery
- Immunotherapy
- Radiation therapy
- Chemotherapy
- Targeted drug therapy
- Endoscopic treatments

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