COMPARATIVE CHARACTERISTICS OF THE PREVALENCE OF STOMACH CANCER AND ESOPHAGEAL CANCER IN THE ANDIJAN REGION

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Abstract: *Stomach cancer and esophageal cancer are leading oncological diseases of the digestive system and are characterized by high mortality. The epidemiological situation for these diseases varies significantly depending on the region, level of medical care, and prevalence of risk factors. This study provides a comparative analysis of the incidence of stomach cancer and esophageal cancer in the Andijan region in recent years.*

Relevance of the topic

Gastric cancer remains one of the most significant challenges in modern oncology, occupying a leading position in the structure of malignant neoplasms of the gastrointestinal tract and being one of the main causes of cancer-related mortality worldwide [1,3]. Despite the development of diagnostic technologies, improvement of surgical techniques and expansion of combination therapy options, survival rates for gastric cancer remain low, which is associated with late presentation, aggressiveness of the tumor process and a high rate of metastasis [4].

The epidemiological characteristics of gastric cancer vary significantly depending on the geographic region, which is associated with lifestyle, diet, and the prevalence of Helicobacter pylori infection , socioeconomic conditions, environmental factors, and access to medical care. Studying regional variability

is an important task, as it allows us to identify local risk factors, determine disease trends, and develop targeted preventive measures [2].

The Andijan region is among those with a relatively high incidence of malignant tumors of the digestive system, including gastric cancer. In recent years, there has been a trend toward an increase in both the absolute number of patients and the proportion of gastric cancer cases in the overall oncological pathology structure. Late-stage detection, limited early diagnosis, and persistent behavioral and environmental risk factors reinforce the importance of specialized research aimed at analyzing the incidence of gastric cancer specifically in the Andijan region [1].

Of additional relevance is the need to compare regional data with national and global trends, allowing for an assessment of the effectiveness of existing prevention and control measures and identifying areas for further improvement of epidemiological programs . The data obtained have practical implications for developing early detection strategies, optimizing patient routing, and improving the effectiveness of diagnostic and treatment services for the population.[5]

Thus, studying regional variability in gastric cancer incidence in the Andijan region is not only scientifically significant, but also a practically important task that contributes to improving the oncological situation in the region and improving the quality of medical care.

The aim of the study was to assess the prevalence of gastric and esophageal cancer in the Andijan region, identify differences in incidence patterns, age and gender characteristics, and determine key epidemiological factors.

Materials and Methods. We analyzed data from the cancer registry of the Andijan Regional Branch of the Republican Scientific and Practical Medical Center of Oncology and Medical Radiology over a 5-year period. The study included information on newly diagnosed cases of gastric and esophageal

cancer, their distribution by age, gender, site, and stage, as well as an analysis of incidence dynamics. We used methods of variation statistics, comparative analysis, and descriptive epidemiology.

Results.

1. **Overall incidence structure.** Stomach cancer accounted for 18–22% of all malignant gastrointestinal neoplasms, while esophageal cancer accounted for 9–12%. In recent years, a moderate increase in both diseases has been observed, with the rate of increase being higher for esophageal cancer.

2. **Age distribution.** Stomach cancer was predominantly diagnosed in men aged 55–75 years, while esophageal cancer was more often recorded in men aged 50–70 years. The average age of patients with stomach cancer was 62.7 ± 8.5 years; with esophageal cancer, 58.9 ± 9.4 years.

3. **Gender differences.** Both cancers are characterized by a significant male predominance. The male/female ratio is: stomach cancer – 2.1 : 1; esophageal cancer – 3.4:1.

4. **Staging at initial presentation.** Most patients presented for the first time at stages II–III:— stomach cancer: II—34%, III—46%;— esophageal cancer: II—29%, III—53%. A high proportion of late diagnosis is characteristic of both nosologies.

5. **Localization of the process.** In gastric cancer, tumors of the antrum (41%) and body of the stomach (36%) were predominant, while in esophageal cancer, tumors of the middle (47%) and lower third (39%) were most often detected.

6. **Incidence dynamics.** Over a five-year period, stomach cancer incidence increased by 7–9%, while esophageal cancer incidence increased by 12–15%, confirming the upward trend in this pathology.

Discussion.

It has been established that in the Andijan region, both types of cancer have a high incidence rate, with a male predominance and late-stage detection.

The more pronounced upward trend in esophageal cancer may be due to the high prevalence of risk factors, including smoking, hot tea consumption, low fruit and vegetable consumption, chronic inflammatory diseases of the esophagus, and the socioeconomic characteristics of the region. Stomach cancer remains consistently common and is associated with a high incidence of H. pylori , poor nutrition, and late presentation.

Conclusions.

1. In the Andijan region, there is a significant prevalence of stomach cancer and esophageal cancer, with the incidence of esophageal cancer growing faster.

2. Both diseases are most often detected at stages II–III, which leads to an unfavorable prognosis and indicates insufficient effectiveness of early detection.

3. Men constitute the main risk group for both nosologies, especially for esophageal cancer.

4. Age peaks in incidence vary: stomach cancer is typical for patients over 60 years of age, while esophageal cancer is typical for a younger group of 50–65 years of age.

5. The study findings highlight the need for improved screening, early diagnosis, and preventive measures in the Andijan region.

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