What is gastroesophageal junction (GEJ) cancer?

Gastroesophageal junction cancer is a disease in which cancer cells form in the tissues where the esophagus meets the stomach. The vast majority of tumors arising at the gastroesophageal junction are classified as adenocarcinomas, with the remainder predominantly categorized as squamous cell carcinomas or carcinomas not otherwise specified.

**Adenocarcinoma:** Tumors that form in glandular cells that line the gastroesophageal junction.

**Squamous cell carcinoma:** Tumors that form in squamous cells, which are flat cells found in the innermost lining of the gastroesophageal junction.

Incidence

After a 2.5 fold increase in diagnoses from 1973-1993, the incidence of gastroesophageal junction cancer has remained stable in the U.S. over the past two decades. Reliable data on the global incidence of GEJ tumors are not available, due to the historically complicated classification system and the likelihood of misclassification.

Key Risk Factors

- Smoking
- Obesity
- Gastroesophageal Reflux Disease (GERD)
- Diet high in processed/red meats, sweets and high-fat dairy

Diagnosis

Diagnostic tests for gastroesophageal junction cancer include:

- Endoscopy
- Ultrasound
- Laparoscopy
- CT scan
- PET-CT scan

Treatment

Current treatment options for gastroesophageal junction cancer may include:

- Surgery
- Chemotherapy
- Radiation therapy
- Targeted therapy
Need for Further Research

Despite advances in the field of gastroesophageal junction cancers, there is no cure for patients with cancer that has spread.\textsuperscript{11} The prognosis for gastroesophageal junction cancer is poor and worsens as it advances.\textsuperscript{2} There is a clear unmet medical need for new treatment options. To learn more about current clinical trials in gastroesophageal junction cancers, visit www.clinicaltrials.gov and search for 'gastroesophageal cancer.'

References


