COLORECTAL CANCER: WHAT HAS CHANGED IN DIAGNOSIS AND TREATMENT OVER THE LAST 50 YEARS?

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Aims and background: This overview focuses on what has changed in the diagnosis and treatment of colorectal cancer over the last 50 years.

Methods: The most important international registers (SEER, European and Italian) as well as the literature have been consulted. Furthermore, many prognostic factors are analyzed with the aim to understand the reasons why 5-year survival has improved over the last two decades.

Results: Since the biologic characteristics of the tumor cannot be changed, improved survival must be supported by concomitant multiple factors, such as earlier diagnosis (as given

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by a more informed educational behavior and the advent of screening) as well as the wide use of colonoscopy and the technical improvement of surgical and medical treatment. However, it seems that the greatest improvement in survival is limited to 5-year controls, whereas long-term survival does not appear to show any significant improvement. *Conclusions:* We can hypothesize that our efforts have just delayed the inevitable end: death. Nevertheless, further research cheud he dene to confirm this hypothesize hypothesis performance in the field.

Conclusions: We can hypothesize that our efforts have just delayed the inevitable end: death. Nevertheless, further research should be done to confirm this hypothesis, perhaps in the field of molecular biology, which may also be the right approach to understanding the biologic aggressiveness of each tumor.

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