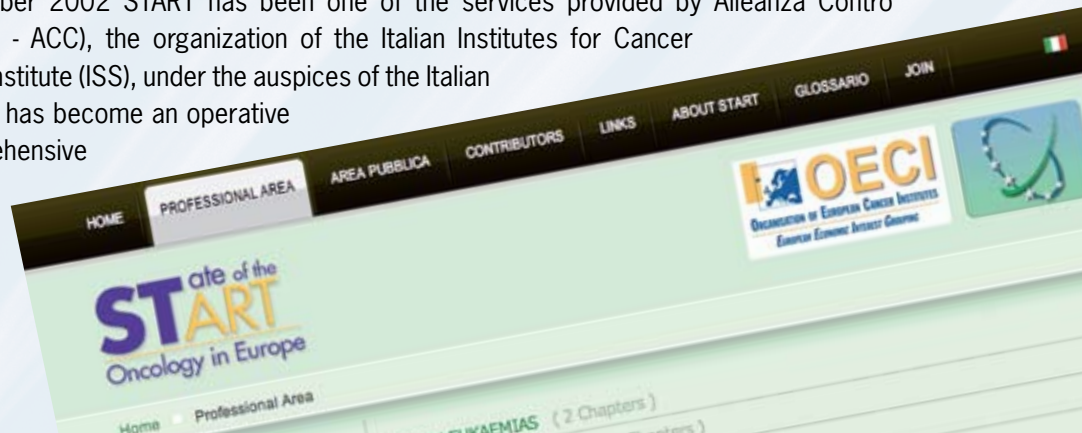


OBJECTIVE

To create, maintain and spread a European database on diagnosis and multidisciplinary treatment of human malignant neoplasms, according to an evidence-based methodology

Established in 1995, since September 2002 START has been one of the services provided by Alleanza Contro il Cancro ("Alliance Against Cancer" - ACC), the organization of the Italian Institutes for Cancer Research, through the Italian Health Institute (ISS), under the auspices of the Italian Health Ministry. In 2009 START-OECI has become an operative instrument of the European Comprehensive Cancer Centers members of the OECI for the accomplishment of recommendations on diagnosis and treatment on cancer.



THE START WEBSITE

Formally, START is a database, freely accessible on the Internet at www.startoncology.net and containing chapters on single human malignant neoplasms, as well as some chapters on cancer-related topics (antiemetic therapy, pain therapy and more). Original chapters are written in English, subsequently translated into Italian and eventually adapted (only in Italian) for patients and non professionals, in general. The website is visited every month by a mean of 35.000 Internet users. The Contributors are selected among the most important Experts throughout Europe: over 200 professionals have already joined START by serving as Editors, Authors, Reviewers and Consultants.

START CHAPTER CYCLE

Each START chapter is the final result of an internal collaborative effort. The first draft is assembled by the chapter Editor, based on the contributes of the selected Authors (according to the chapter, Authors include medical oncologists, radiotherapists, surgeons, pathologists, nuclear physicians, endocrinologists, etc..). If necessary, an Associated Editor may also be appointed, among European top experts. The first draft of the chapter should reflect an evidence-based approach. The chapter is subsequently submitted to the Reviewer/s (European top expert in the specific field). After the reviewing process (a linguistic revision is also required), the chapter is finally published on-line; all the Authors and Reviewers, besides the Editors, are mentioned on the Web Site, in a section named "Contributors" and each chapter on the Internet contains a section called "Contributors", where the name of the Authors and Reviewer(s) of the chapter are listed. Besides being inserted on-line, START chapters are also published in Critical Reviews in Oncology and hematology (Impact Factor 4.6). So far, 35 chapters have been published, accounting for a total Impact Factor of 161.

The START chapters are regularly updated on a yearly basis. Of course, any relevant data that should be published, modifying the state of the art on single neoplasms or related topics, are promptly integrated in the database and made explicit.

START-OECI THE EUROPEAN PERSPECTIVE

START chapters are aimed at reflecting the "state of the art" of diagnosis and treatment in Europe, with a particular overlooking the so-called "grey zone" besides standard and investigational options.

Although START is based in Italy, its European perspective allowed the Program establishing important links with other European Institutions and Projects. In 2009 START was acknowledged as operative instrument of OECI for the accomplishment of recommendations on diagnosis and treatment on cancer. The experts contributing START chapters (clinical oncologists, radiation therapists, surgeons, pathologists, and others) are based throughout Europe. More than 30% of them (Editors, Authors, Reviewers) are based in one of the European Cancer Centers belonging to the OECI, in 15 different European Countries.

Lisa Licitra, MD
START Scientific Responsible



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1. GENERAL INFORMATION

1.1 Epidemiological data

1.1.1 Incidence and mortality

Oesophageal cancer is the sixth most common cancer in the non industrialized countries and it ranks as the 18th most frequent cancer in non industrialized countries. Around 32,600 cases and 26,200 deaths occurred in 2006 in Europe (Ferlay 2007). Oesophageal cancer is a disease of low income countries (Figure 1). Around the world, in men, age adjusted annual incidence rates range from more than 20 per 100,000 in region of the Eastern and Southern Africa and Eastern and South-Eastern Asia to less than 2 per 100,000 in Northern, western, and middle Africa, Central America, and South-Eastern Asia.

Figure 1. Incidence of oesophagus cancer in the male population of the world

Incidence of Oesophagus cancer: A50 (World) Male (All ages)

Legend: 0-20, 21-30, 31-40, 41-50, 51-60, 61-70, 71-80, 81-90, 91-100

Oesophageal cancer is a disease of mid to late adulthood (50-70 years). Oesophageal cancer is one of the most common malignancies among black men under age 55 (Figure 2). Worldwide, rates are higher in men than women, by around five to two.

METHODOLOGY

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News

TNM CLASSIFICATION: Update between 2002 and 2009 (7th edition)

- ACUTE LEUKAEMIA (1 Chapter)
- AIDS-RELATED TUMOURS (2 Chapters)
- ANTIEMETIC THERAPY (1 Chapter)
- BRAIN CANCERS (7 Chapters)
- BREAST CANCER (2 Chapters)
- CANCER OF PANCREAS (1 Chapter)
- CANCER PAIN THERAPY (1 Chapter)
- CARCINOMA OF UNKNOWN PRIMARY (1 Chapter)
- CHRONIC LEUKAEMIAS (1 Chapter)
- CLINICAL DECISION MAKING (1 Chapter)
- ESOPHAGEAL CANCER (1 Chapter)
- GASTRO-INTESTINAL TRACT CANCERS (5 Chapters)
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- HEAD AND NECK CANCERS (5 Chapters)
- HISTIOCYTE DISORDERS (4 Chapters)
- LIVER CANCER (1 Chapter)
- LUNG CANCERS (2 Chapters)
- LYMPHOMAS (18 Chapters)
- MEDULLOBLASTOMA (1 Chapter)
- MELANOMA (1 Chapter)
- METABOLIC EMERGENCIES (10 Chapters)
- MULTIPLE MYELOMA (0 Chapters)
- NEUROBLASTOMA (1 Chapter)
- NON-MELANOMA SKIN CANCERS (0 Chapters)
- OTHER ONCOLOGIC EMERGENCIES (1 Chapter)
- SARCOMAS (4 Chapters)
- SOFT TISSUE TUMOURS (1 Chapter)

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For any further information contact:
START Secretariat
Phone: +39 02 23903352
Fax: +39 02 23903353
e-mail: start@istitutotumori.mi.it

**AN UPDATED
DATABASE ON
EVIDENCE-BASED
DIAGNOSIS AND
TREATMENT IN ONCOLOGY
WITH A EUROPEAN PERSPECTIVE**

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