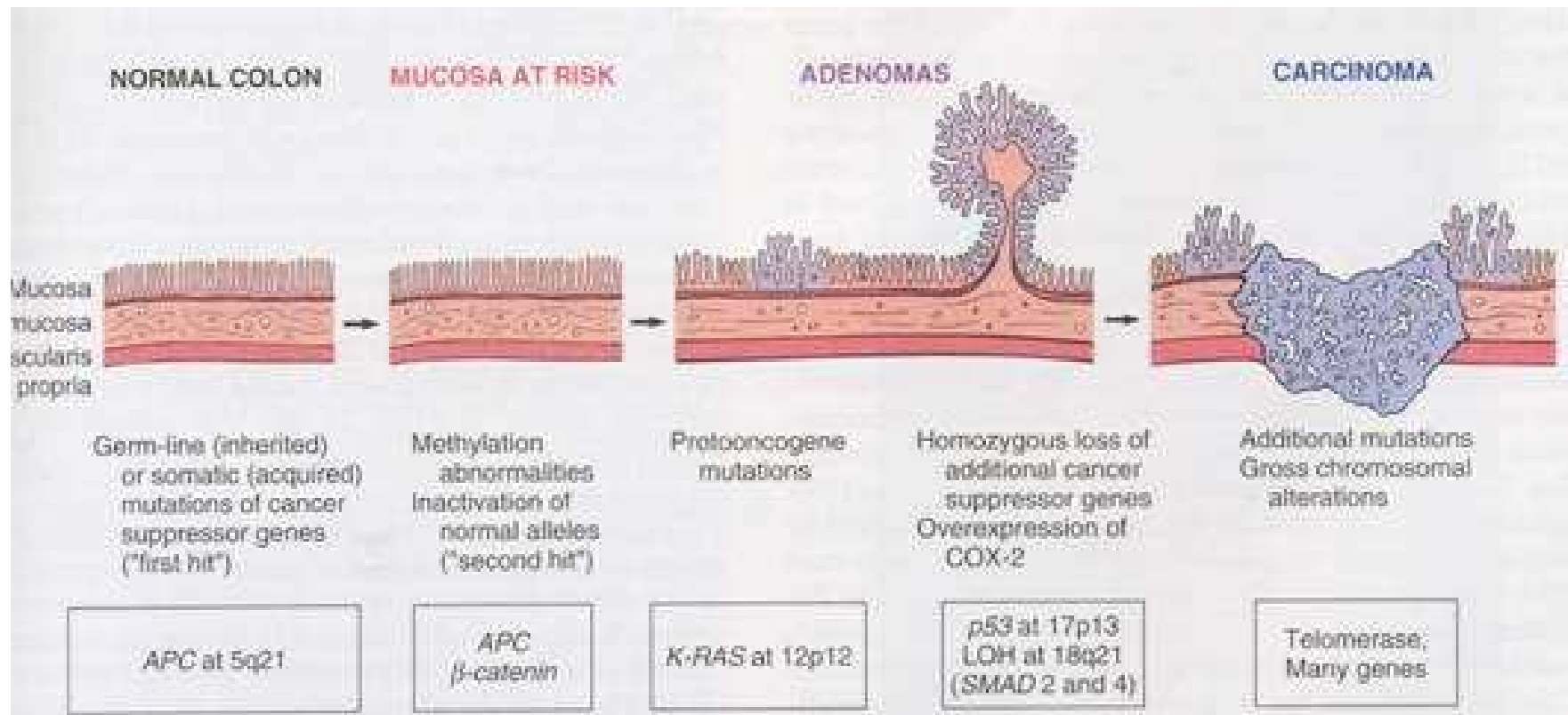
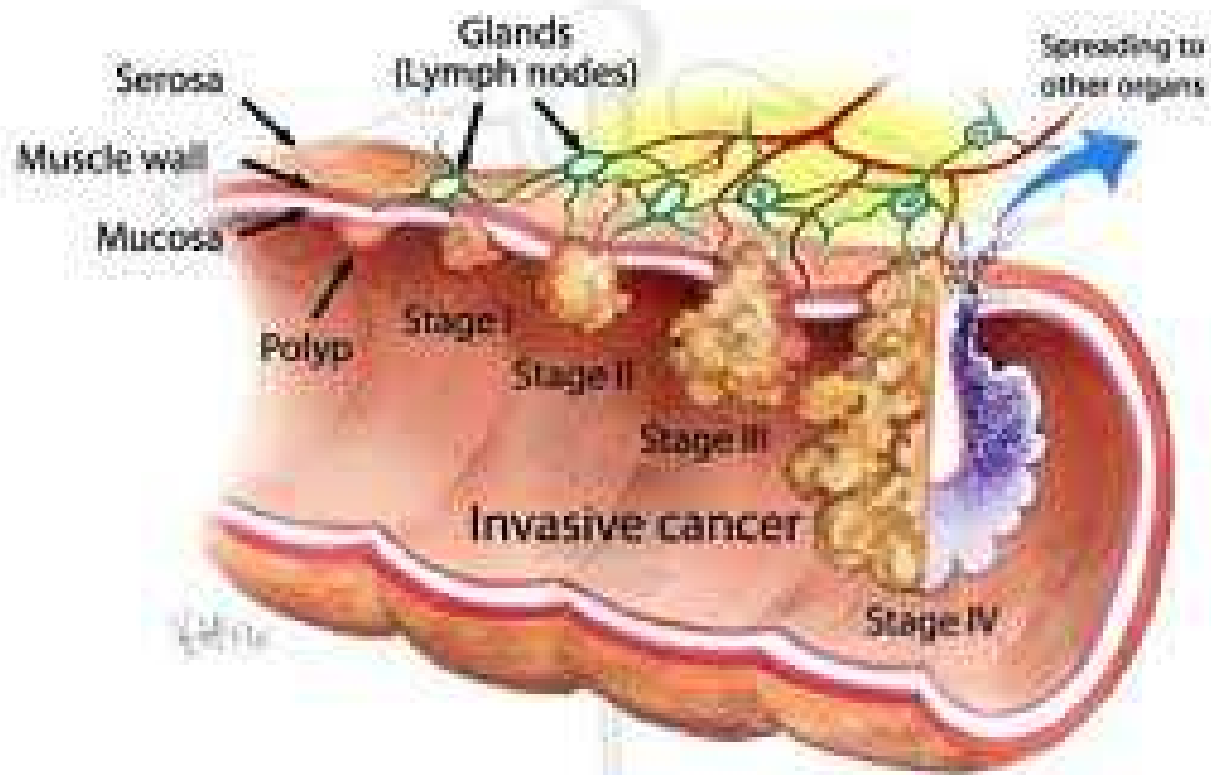
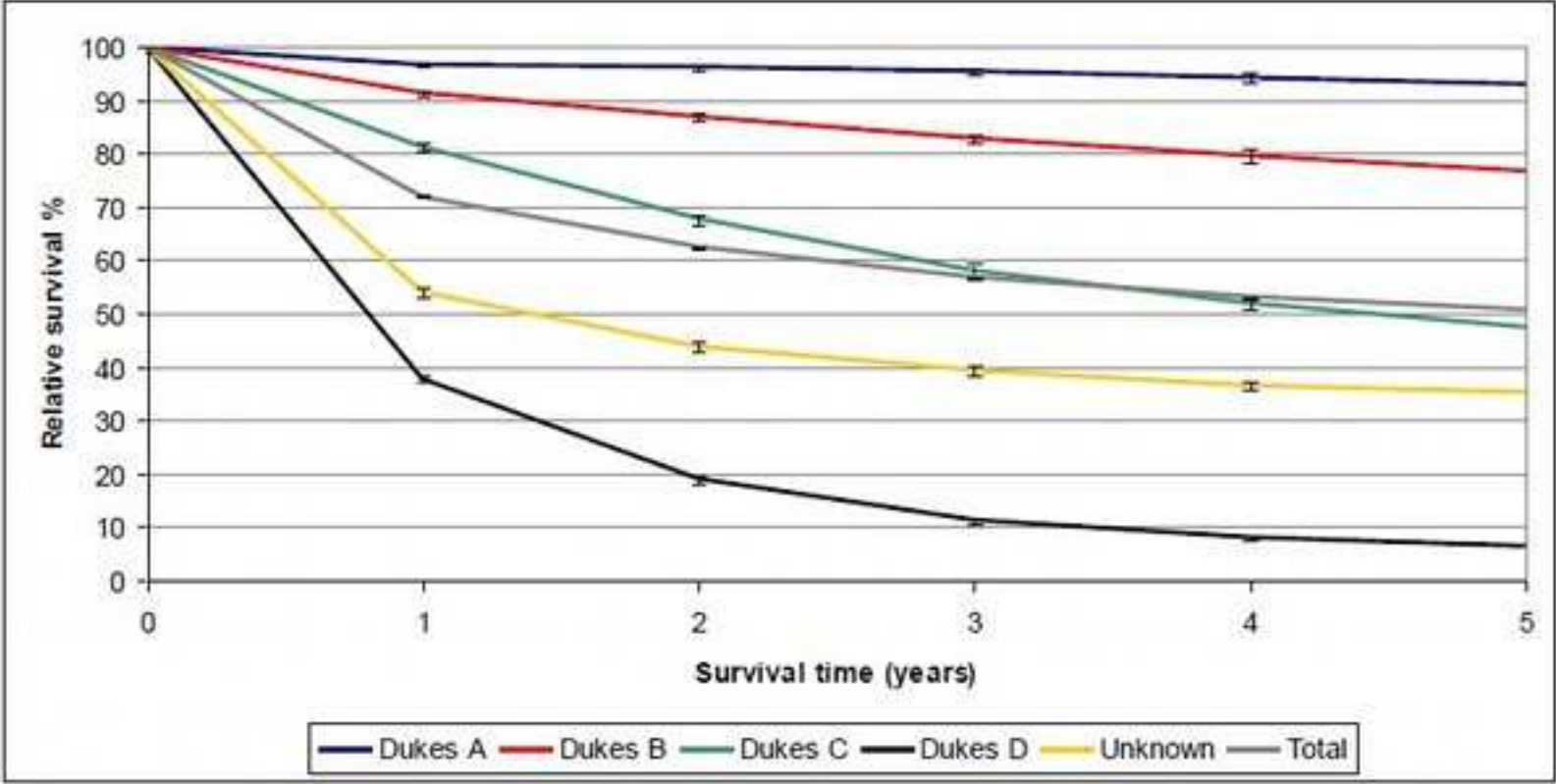


KAS EESTI VAJAB JÄMESOOLEVÄHI SKRIININGUT?

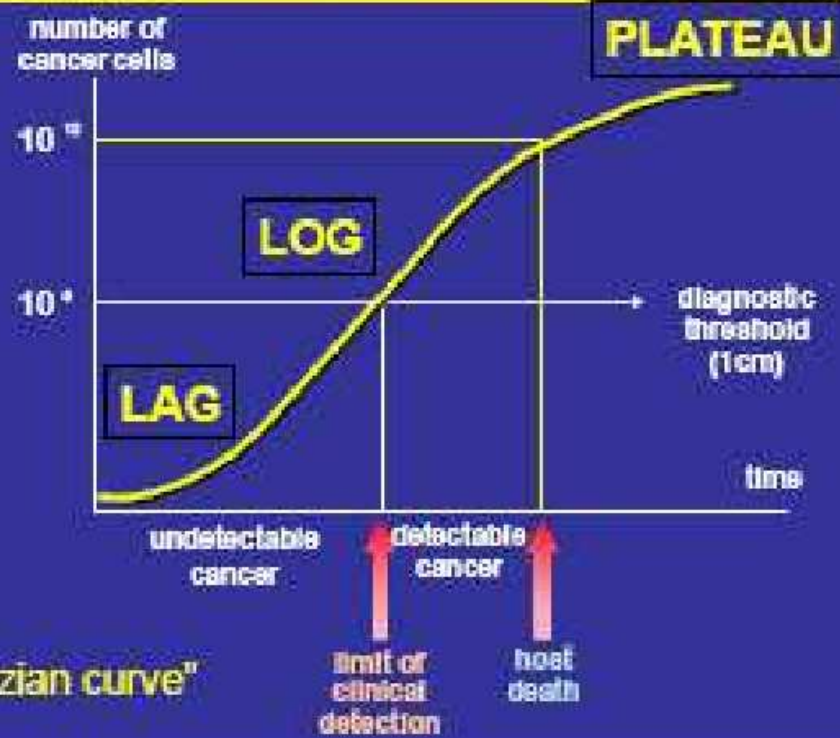
Tiit Suuroja
PERH





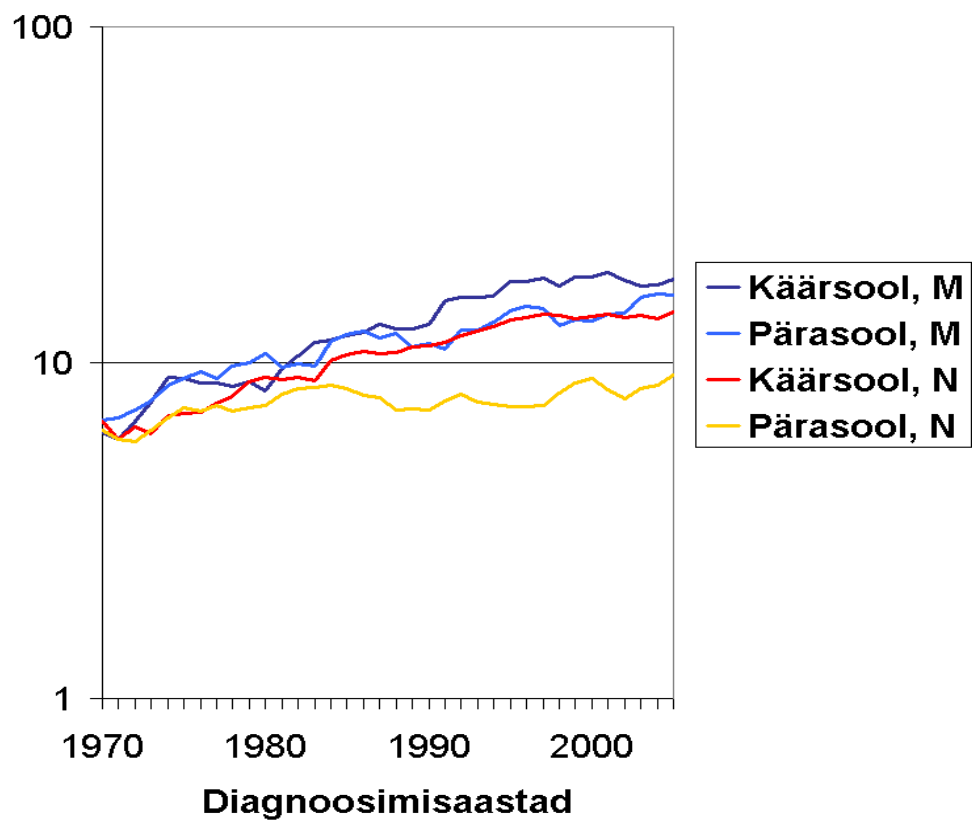


Tumor Growth



- eesnääre 925
- nahk 893
- kr 776
- kops 690
- rind 609

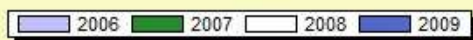
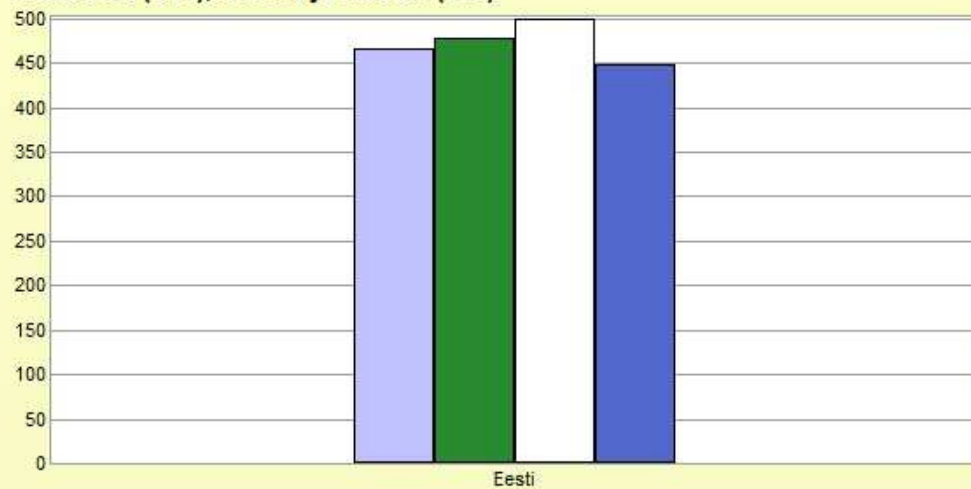
Haigestumuskoordaja* 100 000 in.k.



Pahaloomuliste kasvajate esmasjuhud

--- Aasta , Maakond.

..Käärsool (C18), Mehed ja naised. (Arv)

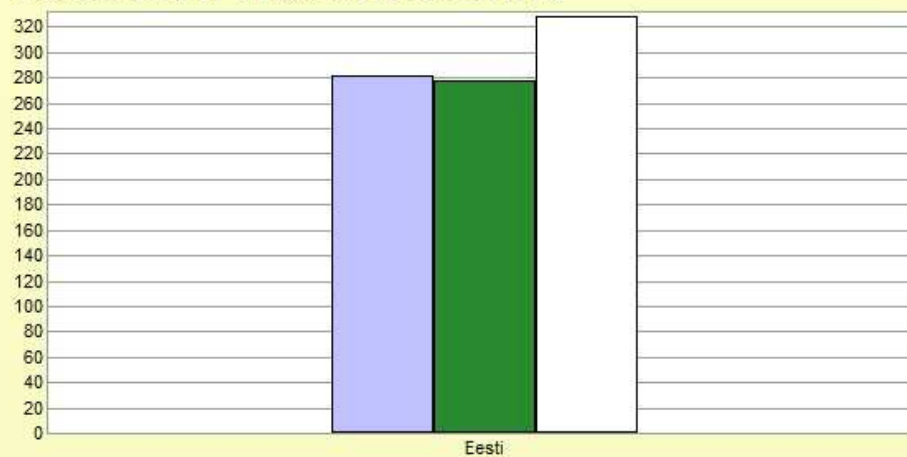


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Pahaloomuliste kasvajate esmasjuhud

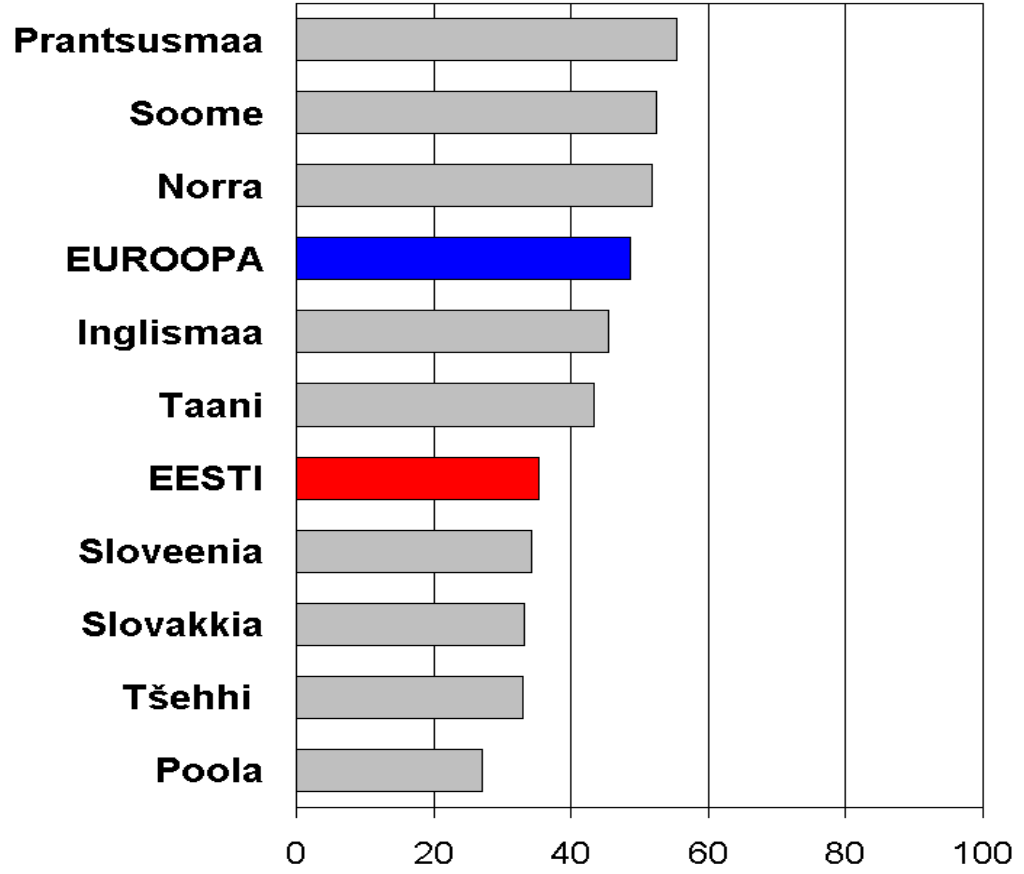
--- Aasta , Maakond.

..Pärasool jm. (C19-C21), Mehed ja naised. (Arv)

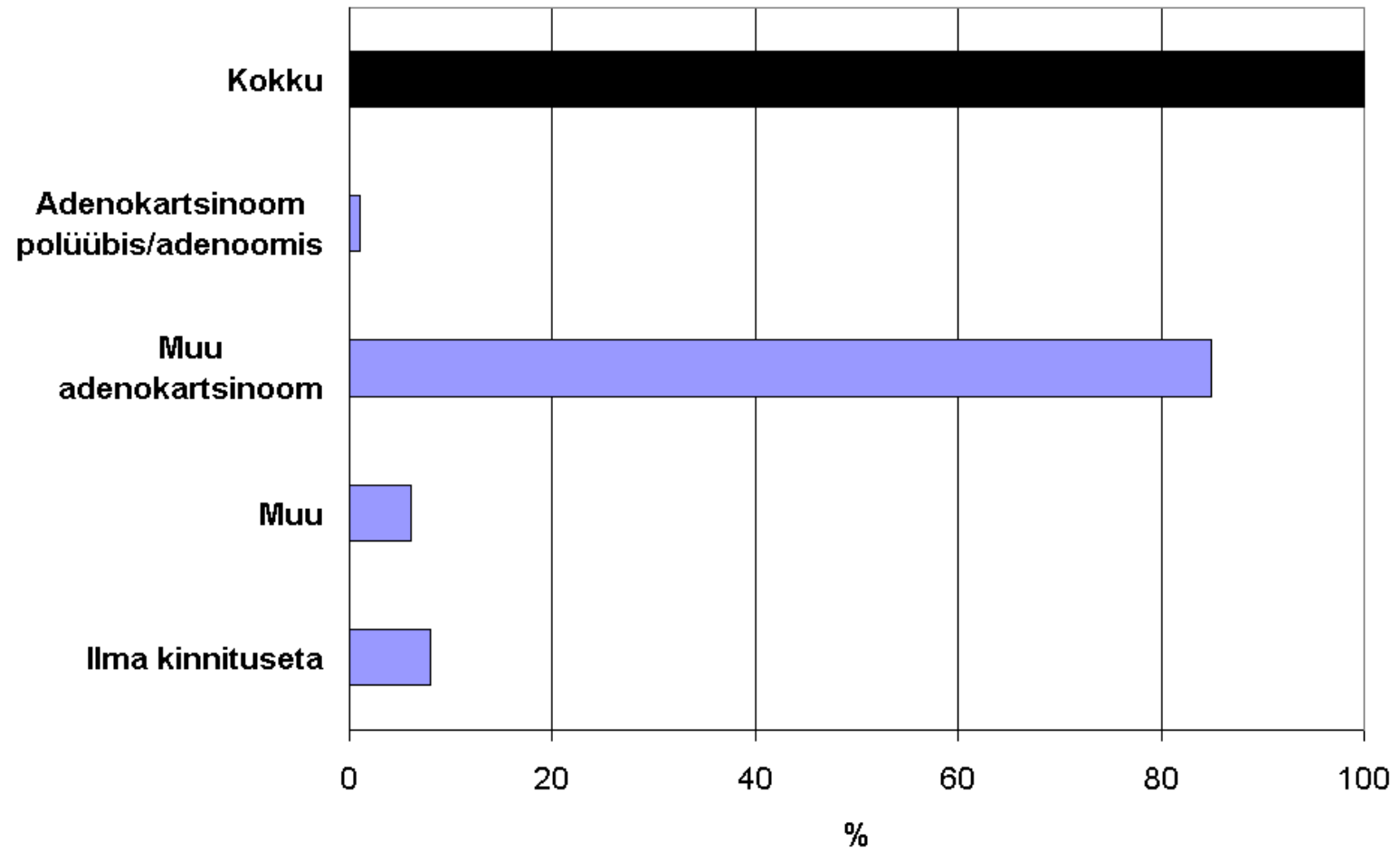


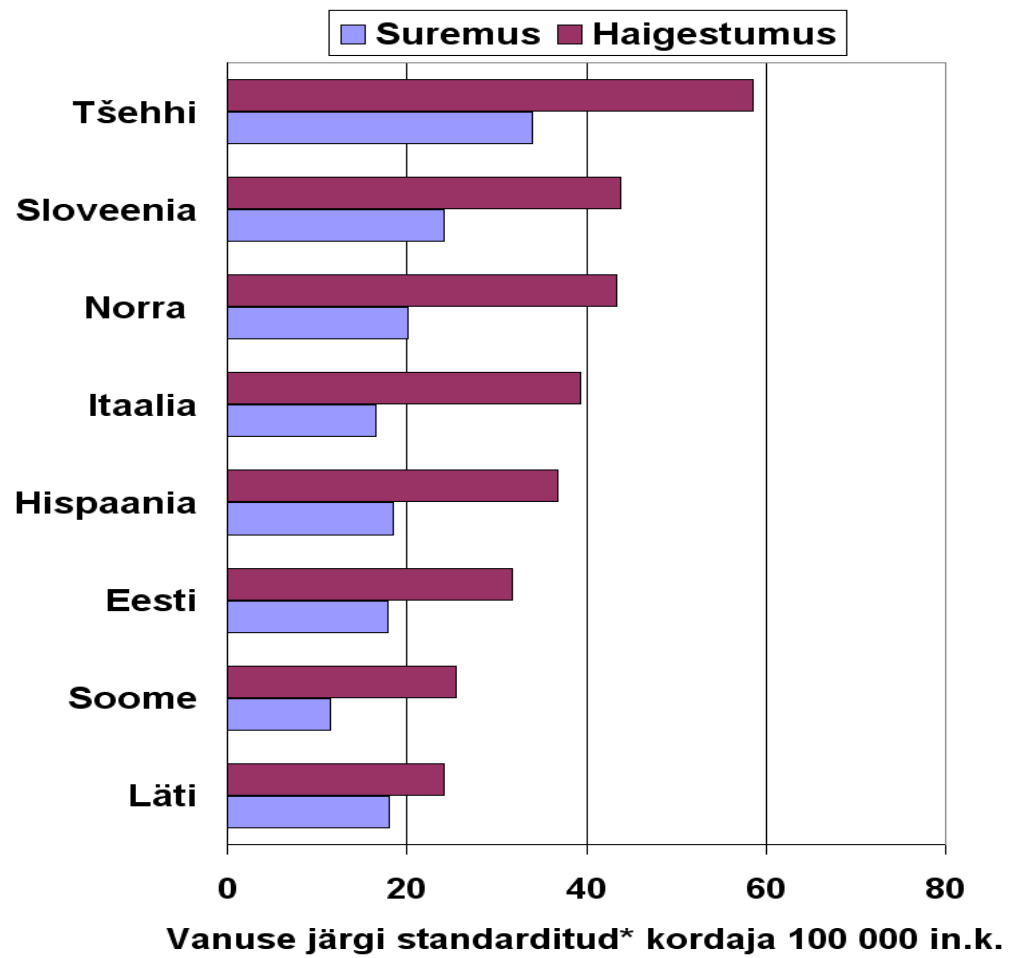
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Elulemus, %

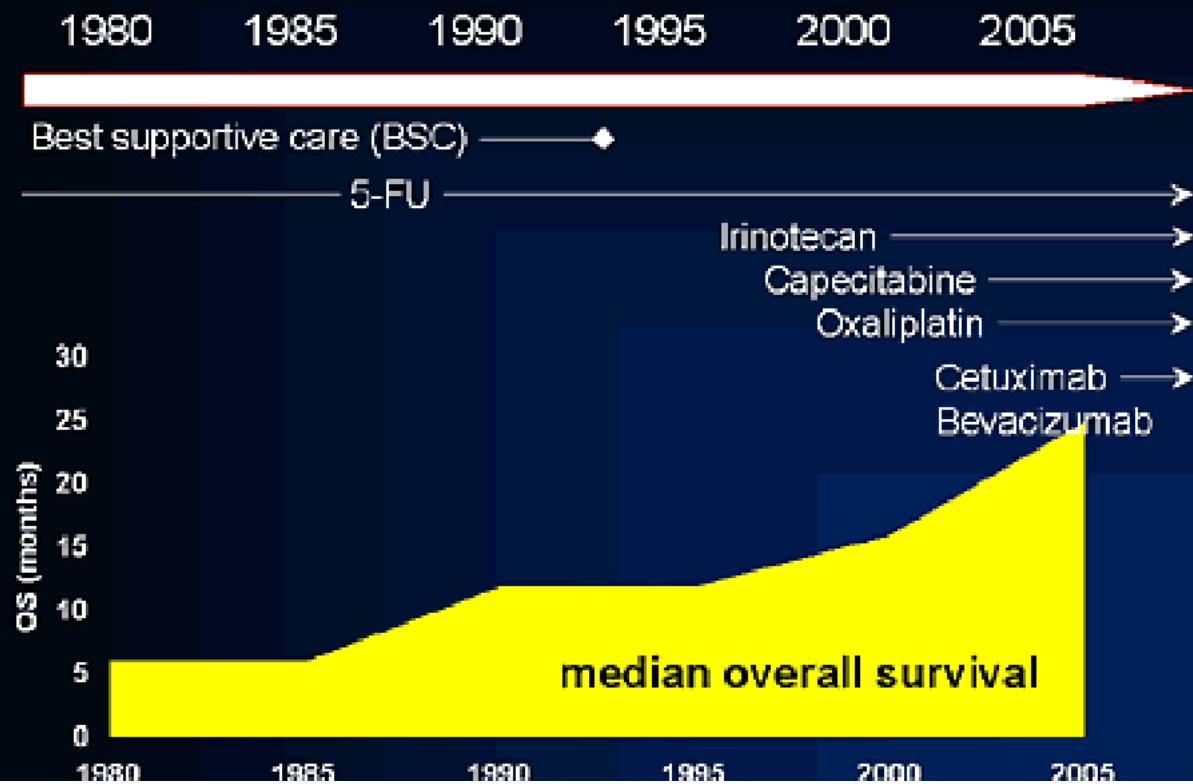


Levikugrupp	%
lokaalne	40
regionaalne	20
naaberorganid	8
kaugmetastaasid	28
kaugelearenenud, täpsustamata	1
teadmata	3

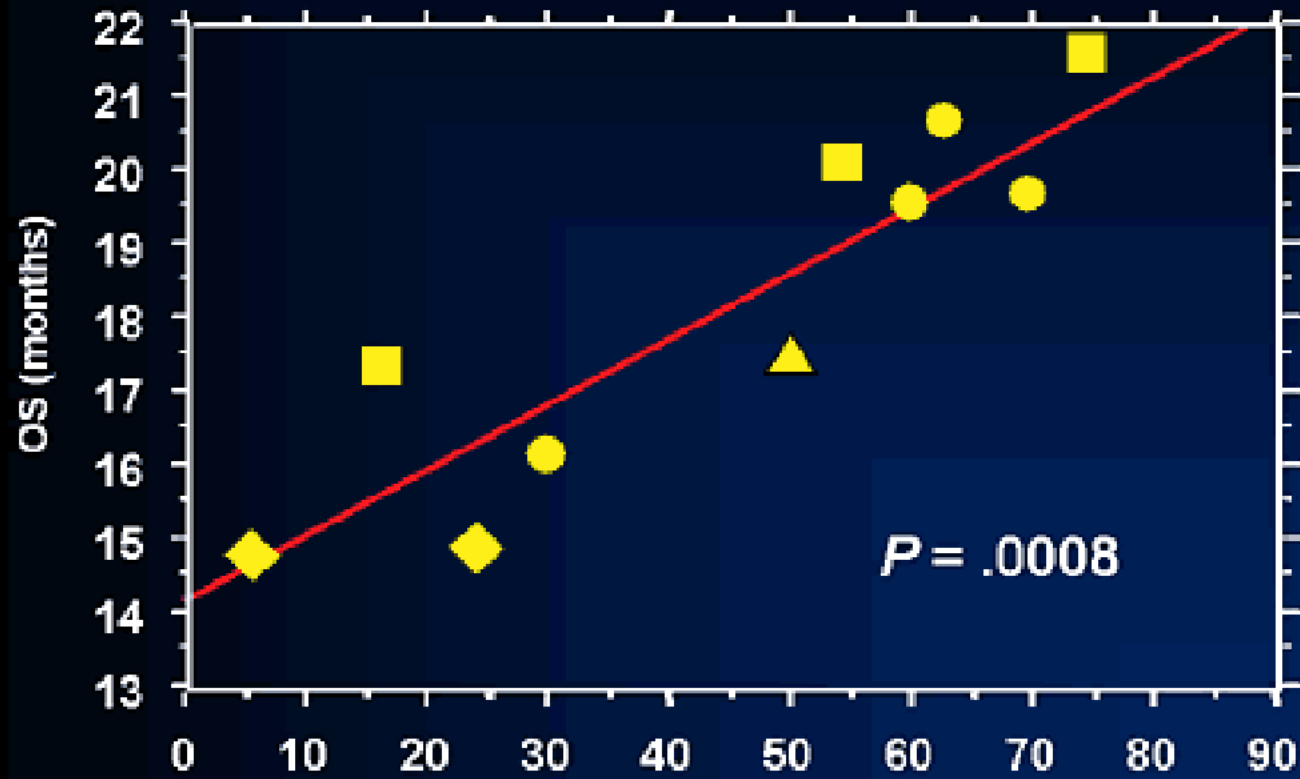




Advances in the Treatment of CRC



All 3 Drugs

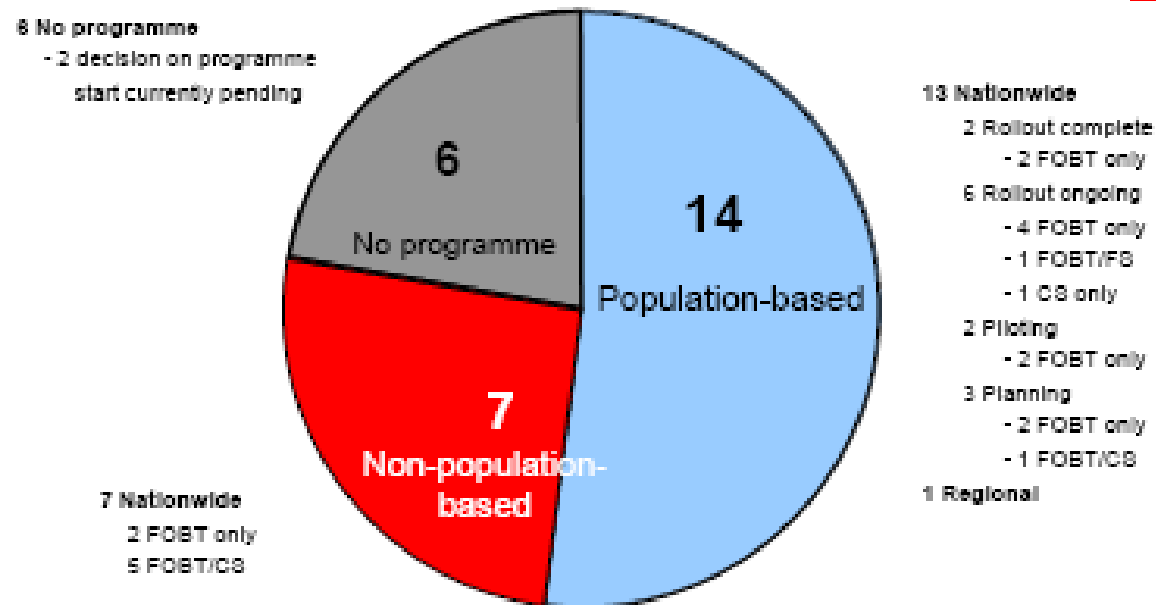


skriining

- asümptomaatilised, oluline tervishoiuprobleem, ravi olemasolu, elanikkonnale vastuvõetav, mõistlikult odav ja tundlik, ohutu, programmipõhine, tõenduspõhine, kvaliteedi kontroll, tasuta, võrdne kohtlemine jne.
- oportunistlik, populatsioonipõhine
- peitvere uuring, endoskoopiline meetoodika

COLORECTAL Cancer Screening Programme Implementation in the EU

Number of Member States by Programme Type and Implementation Status
in 2009

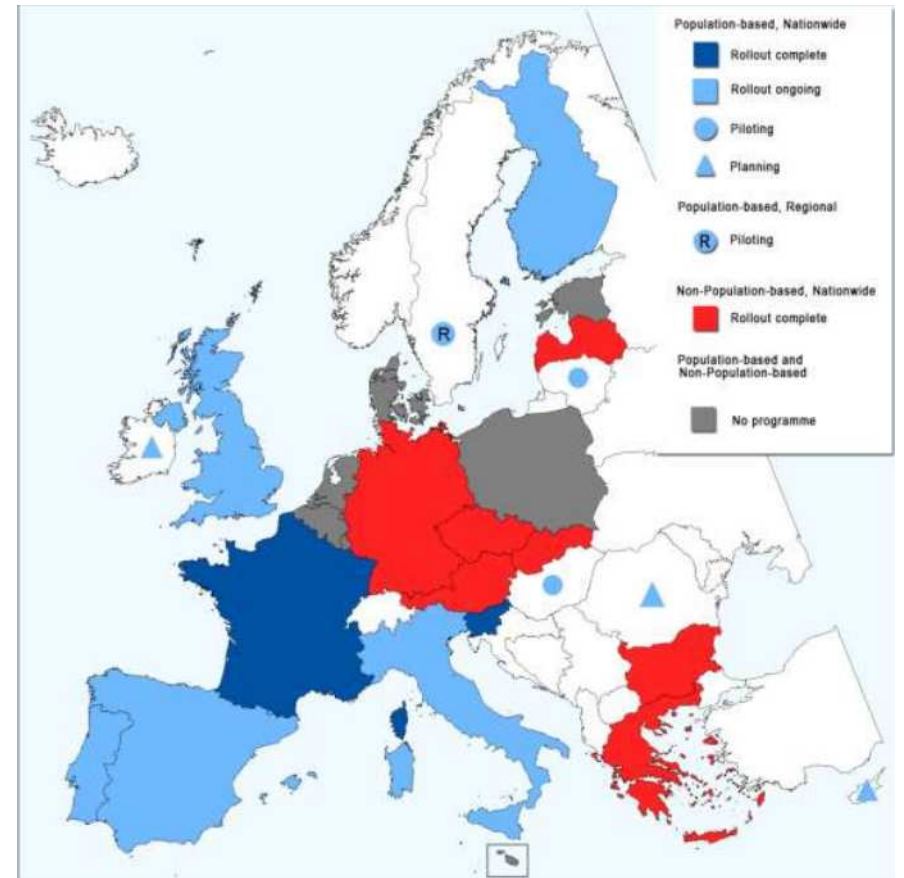
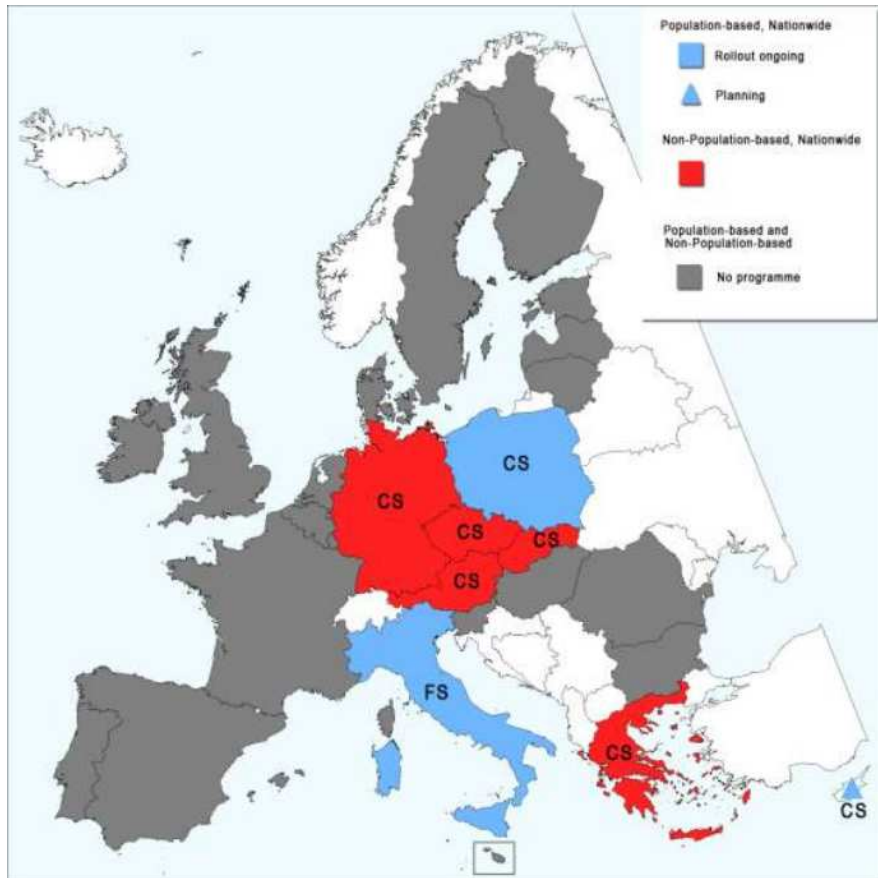


International Agency for Research on Cancer



Sources:
Karsa, Anttila, Ronco et al. 2008,
European Commission, IARC, ECN and EUNICE,
ICCAIARC/UEGF Survey 11/2009

Financial support
of EU Public Health Programme



- esinemus piisavalt kõrge
- populatsioon vananeb, sagedus tõuseb
- skriining säästab elusid
- ravi kallis, kulud tõusevad
- enamus Euroopa rikidest valinud skriiningu

JAH

- IMMUNOKEEMILINE PEITVERETEST
- POSITIIVSUSE KORRAL ENDOSKOOPIA