

S26. Prevention of Barrett's esophagus + esophageal cancer in the ASPECT- and BOSS-trials

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Oesophageal cancer is one of the fastest rising cancers in the western world. The prognosis is poor despite modern multimodality therapy. The precursor lesion Barrett's oesophagus (BE) is one of the commonest pre-malignant lesions in the western world found in 1.5% of the adult population. In the UK we have set up several large randomised controlled clinical trials to assess how prevention of BE can be achieved. The ASPECT (Aspirin Esomeprazole chemoprevention trial) trial is randomising up to 3000 patients to either low or high dose proton pump acid inhibitor therapy with or without Aspirin therapy in an attempt to chemoprevent the BE. To date 1600 patients have been recruited. The BOSS trial (Barrett's Oesophagus Surveillance Study) aims to

assess whether endoscopic surveillance every two years is better at preventing oesophageal adenocarcinoma than standard therapy with no endoscopic surveillance. This trial will recruit 2,500 patients and will start at the end of 2008. In addition patients who fail to have cancer prevented will be entered into the COG trial (cancer on Gefitinib) and treated with EGFR inhibitory therapy (500 patients). Linking these studies will be the ChoPIN (cancer prevention of intestinal pre-malignant neoplasia) translational programme which is collecting blood from all cases as well as tissue from many cases every two years. We hope to be able to address both the epigenetic and genetic interactions in the prevention of oesophageal adenocarcinoma.