New Risk Factors for ESCC?

Christian Abnet, PhD, MPH Metabolic Epidemiology Branch

- **3**
- Microbiome
- Animal contact
- Other

- Tooth loss Microbiome
 - Multiple studies with tooth loss or similar variables
 - Modest odds ratios, but we are using weak variables
 - Direct assessment of microbiome may be better
 - Case-control studies probably not valuable
 - Cross-sectional studies across histologic spectrum
 - Methods need more development

Oral and Esophageal Microbiome

- Groups
 - 1. Endoscopically Normal
 - 2. Low Grade Dysplasia
 - 3. High Grade Dysplasia
 - 4. Early Stage/Asymptomatic cancers
 - Recruit up to 200 subjects from each group
 - Selected from ongoing screening
 - Also compare to cardia and noncardia gastric

Animal Contact

Two studies with intriguing results

Contact with ruminants is associated with esophageal squamous cell carcinoma risk

Dariush Nasrollahzadeh^{1,2}, Weimin Ye¹, Ramin Shakeri², Masoud Sotoudeh², Shahin Merat², Farin Kamangar³, Christian C. Abnet⁴, Farhad Islami^{2,5}, Paolo Boffetta⁵, Sanford M. Dawsey⁴, Paul Brennan⁶ and Reza Malekzadeh²

Table 2. Animal contact among esophageal squamous cell carcinoma cases and matched controls

	Controls (%)	Cases (%)	Crude OR (95%CI)	Adjusted ¹ OR (95%CI)
Equines				
Never	234 (44.1)	121 (43.1)	Referent	Referent
Ever	297 (55.9)	160 (56.9)	1.04 (0.77-1.41)	0.96 (0.67-1.38)
Ruminants				
Never	166 (31.3)	15 (5.3)	Referent	Referent
Ever	365 (68.7)	266 (94.7)	9.06 (4.94-16.61)	7.63 (3.92–14.86)

- Animal Contact
 - Two studies with intriguing results
 - We don't really know how to interpret the results
 - Really an animal effect or something indirect?
 - How can this be explored?
 - Direct measurement of zoonotic disease serology
 - Genome sequences
 - Chips

• 333

New New Ideas?

- Comparative studies with gastric cardia?
 - Relatively easy in China and Iran
- Clues from GWAS?
 - PLCE1
 - Geography specific hits
 - ADH2/ALDH2 example
 - HLA
- Mutation spectra-defined outcomes?
 - Tumors without P53 mutations

Summary

- Several understudied hypotheses
 - Replication
 - Explanation
- Search for new hypotheses
 - Informed by GWAS
 - Search for etiologic heterogeneity

Questions

Why the co-occurrence with gastric cardia cancer?

Can we develop new hypotheses by expanding GWAS?

 Should we start defining tumors by genomic changes for our risk factor analyses?



