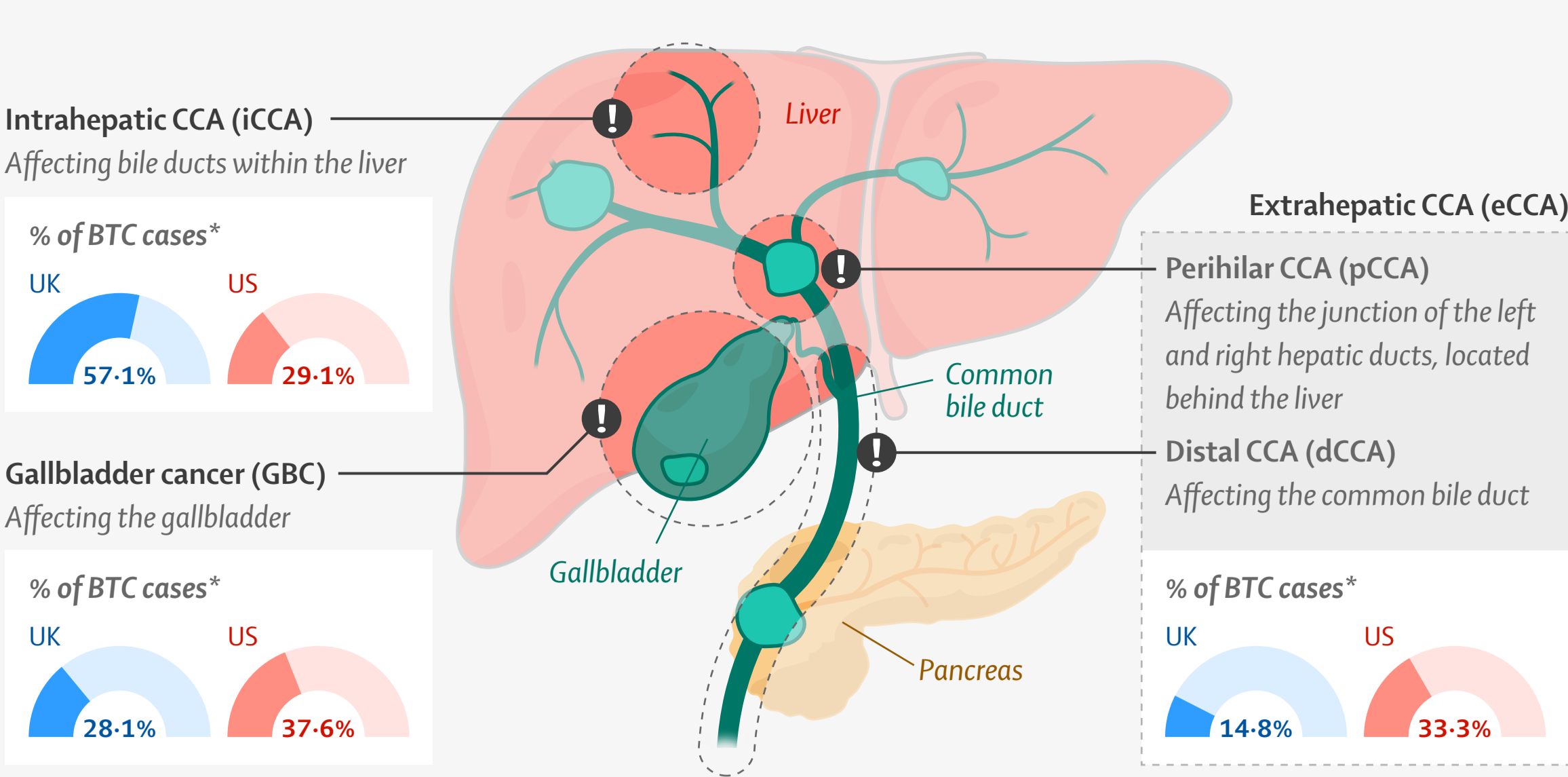


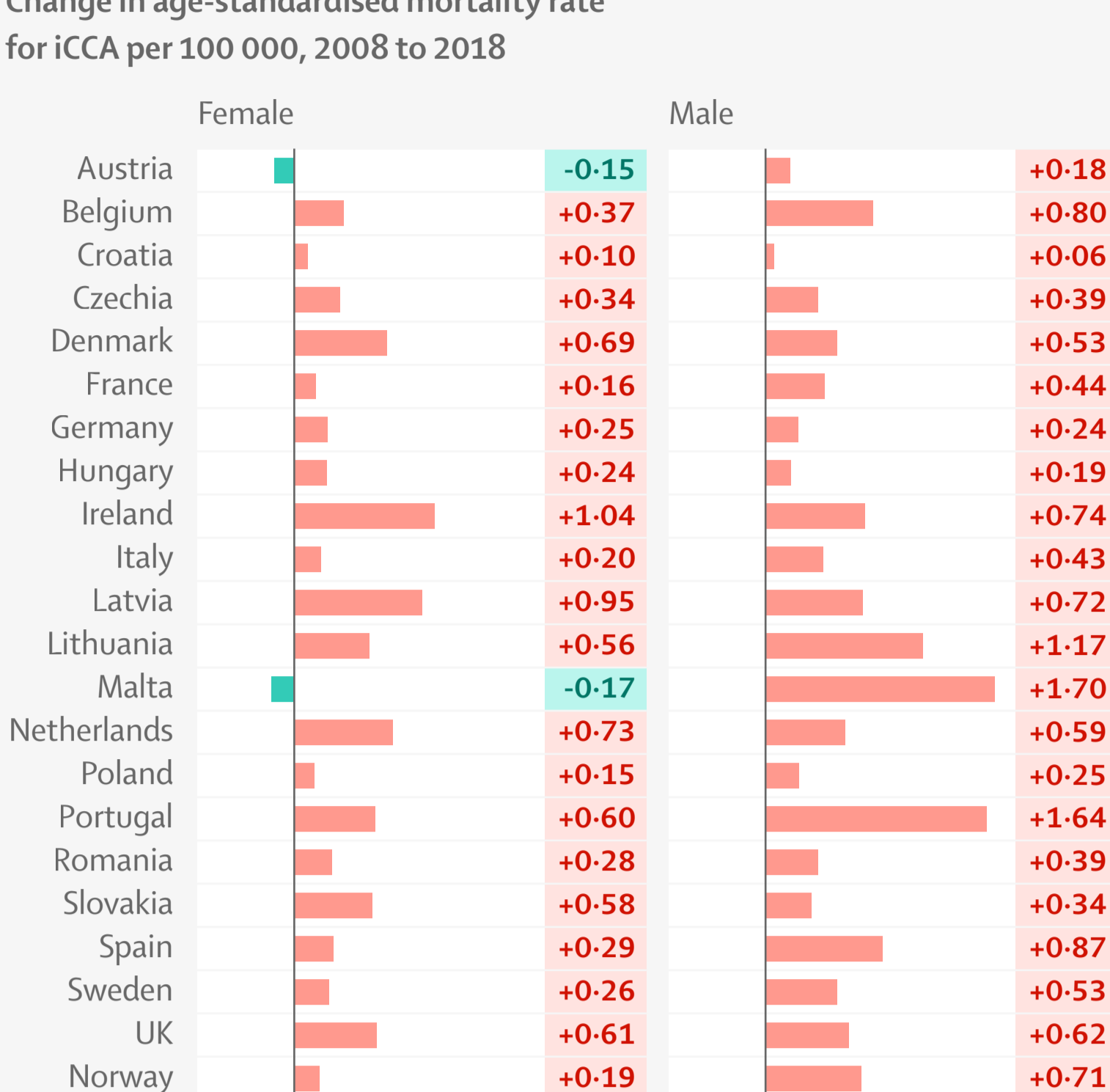
Biliary tract cancers: a growing concern for Europe

Biliary tract cancers (BTCs) are rare malignancies arising from the bile ducts, including:

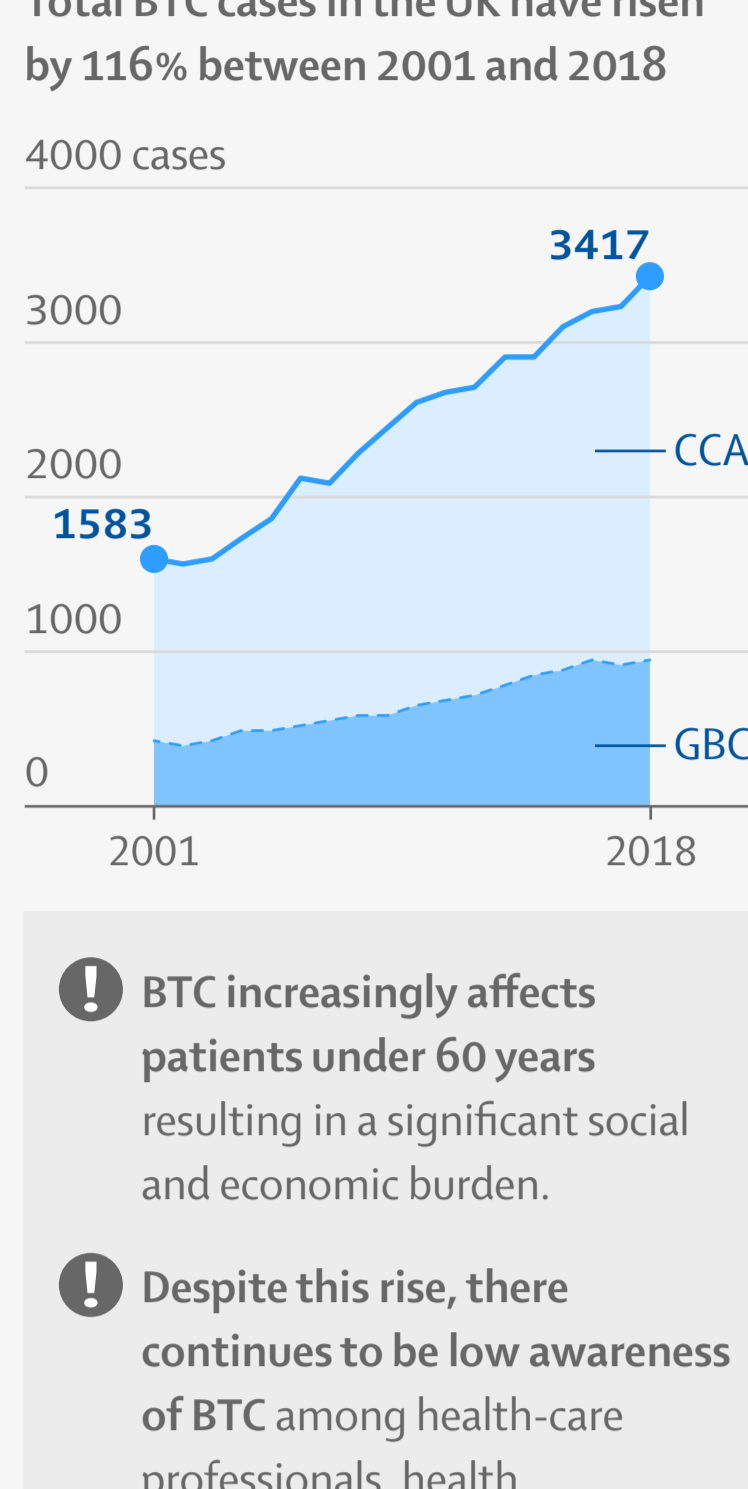


The incidence of BTCs and the associated mortality, particularly of iCCA, is rising:

Change in age-standardised mortality rate for iCCA per 100 000, 2008 to 2018



Total BTC cases in the UK have risen by 116% between 2001 and 2018



Risk factors and diagnosis

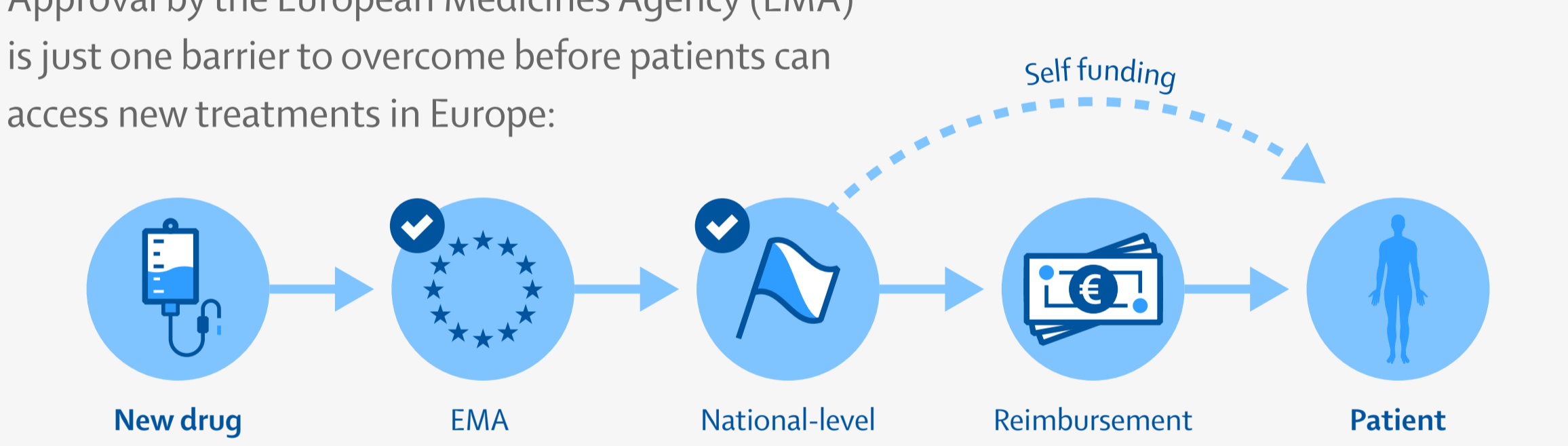
- Risk factors are largely unknown**
In Europe*, although most patients with BTC have no known risk factors, the disease can be associated with:
 - Primary sclerosing cholangitis
 - Lithiasis (gallstones)
 - Liver cirrhosis
- Early diagnosis is challenging**
 - Half of all patients with BTC at early stages present with only vague symptoms.
 - Most patients are asymptomatic during early stages.
 - In pCCA and dCCA, jaundice can appear due to biliary tract obstruction.
 - No specific diagnostic biomarkers for BTC have so far been identified.
- Advanced stage diagnosis**
Symptoms of advanced disease in iCCA and GBC are unspecific and include:
 - Asthenia
 - Abdominal pain
 - Malaise
 - Nausea
 - Anorexia
 - Weight loss

**Risk factors differ by geographic region*

Treatment options for advanced BTC have improved substantially in recent years:



Approval by the European Medicines Agency (EMA) is just one barrier to overcome before patients can access new treatments in Europe:

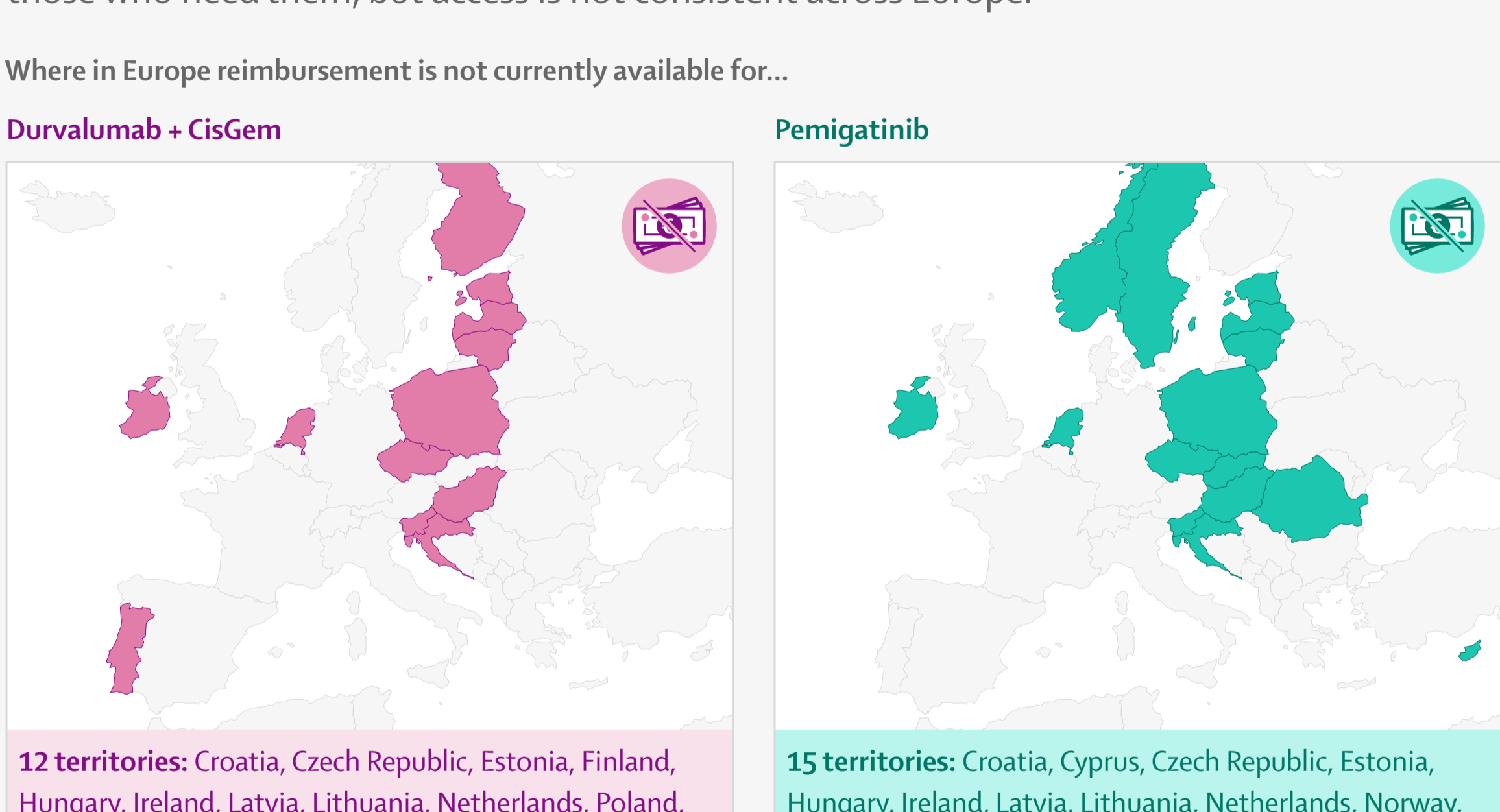


The pace of national-level approval can vary widely. For example:



Reimbursement is crucial for ensuring widespread access to treatments for those who need them, but access is not consistent across Europe.

Where in Europe reimbursement is not currently available for...



The *Lancet Regional Health – Europe* series on Biliary Tract Cancer in Europe identifies several priority areas for actionable change aimed at improving outcomes for patients with BTC, including:

Diagnostic pathways and awareness
A diagnostic pathway for patients with symptoms suggestive of BTC should be established and shared across secondary care physicians. Increasing awareness in emergency departments and secondary care facilities can reduce diagnosis delays.

Identifying biomarkers
Further research is needed for the development of diagnostic biomarkers to improve early diagnosis. Appropriate and dedicated funding streams are crucial to this aim.

Addressing inequalities
Harmonised guidelines, accelerated pathways to treatments, and improved awareness is required to reduce disparities in access to diagnostic tools and multidisciplinary care across Europe, particularly in economically disadvantaged areas. International collaboration is also needed to make treatment access and approval processes more consistent.

Improving data
Correct ICD-coding should be recorded for each patient with BTC in each institution to reflect epidemiological trends, and to facilitate better data analysis.

Multidisciplinary teams (MDTs)
BTC is complex. MDTs are crucial for effective diagnosis, and for improving patient outcomes. All patients with BTC should be discussed within an MDT, correctly classified, and offered a multidisciplinary management plan.

In partnership with:

Read the *Lancet Regional Health – Europe* series on Biliary Tract Cancer in Europe online at www.thelancet.com