

UPPER GI CANCER - Oesophageal Cancer¹⁸

If the patient presents **with one or more** of the following red flags, then the referral should be triaged as 'High Suspicion of Cancer'.

Red flags	YES or NO
Dysphagia (new onset and/or progressive)	
Unexplained weight loss in patients > 55 years with one or more of the following: <ul style="list-style-type: none"> • upper abdominal pain • new onset heartburn • dyspepsia • nausea/vomiting • upper abdominal pain 	
Haematemesis/malaena	
Māori or Pacific of any age with family history of oesophageal cancer with one or more of the following: <ul style="list-style-type: none"> • upper abdominal pain • new onset heartburn • dysphagia (new onset or progressive) • dyspepsia 	

¹⁸ Risk factors for oesophageal cancer which when present increases the suspicion

- Age over 55 years
- Smoking
- Male
- High animal fat diet
- Longstanding Gastro-Oesophageal Reflux Disease (GORD)
- Barrett's metaplasia of the oesophagus
- Previous gastric surgery
- Socio-economic deprivation
- Obesity/BMI >35
- Excess alcohol intake

Investigations that would be consistent with an increased risk of oesophageal cancer

- Endoscopy findings of long segment Barrett's (>3cm)
- Iron-deficient anaemia/low ferritin
- Elevated platelet count