

Turning Point in Stomach Cancer: Early-Stage Diagnoses Now More Common

Advancements in endoscopic imaging may be helping doctors find stomach cancer earlier, when it's easier to treat.

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Stomach cancers are increasingly being diagnosed at less advanced, more treatable stages — a shift that marks major progress in detecting one of the deadliest forms of cancer, according to a study [presented May 3] at [Digestive Disease Week \(DDW 2025\)](#).

“These trends suggest that advancements in endoscopic imaging, along with more widespread use of upper endoscopy, may be helping doctors find stomach cancer earlier,” said Mohamed Tausif Siddiqui, MD, the study’s lead author and a gastroenterology fellow at Cleveland Clinic. “These shifts are important because catching stomach cancer earlier can lead to less-invasive treatment and better patient outcomes.”

Stomach cancer remains one of the deadliest forms of cancer worldwide, with the American Cancer Society predicting about 26,500 new cases and more than 10,800 deaths in the U.S. in 2025.

Using data from the National Cancer Institute’s SEER-22 database, researchers found that diagnoses of early-stage stomach cancer rose steadily from 2004 to 2021, increasing by approximately 53%, while more advanced cases — where the cancer had already spread to nearby lymph nodes or distant organs — dropped significantly.

Overall, the incidence of stomach cancer in the U.S. has declined slightly over the past two decades, from 8.44 per 100,000 people in 2000 to 7.53 in 2021. The lowest rate, 6.42 per 100,000, was recorded in 2020, likely reflecting a temporary drop in medical procedures during the coronavirus pandemic.

According to the study, 2021 marked the first year in which localized, early-stage stomach cancer became the most common stage at diagnosis, overtaking advanced-stage cases.

From 2004 to 2021, diagnoses involving regional spread decreased by 38%, while distant-stage cases dropped by nearly 8%. While early-stage stomach cancer is generally more treatable, the study did not examine whether these shifts in diagnosis stage have led to changes in mortality rates.

Dr. Siddiqui said the study underscores the potential value of early detection strategies and supports the continued utilization of high-quality endoscopy tools and techniques. It also raises the possibility that screening high-risk individuals could further improve survival rates.

People at highest risk for stomach cancer include those with *Helicobacter pylori* infection, a family history of the disease, certain inherited genetic conditions, or long-term digestive symptoms such as acid reflux.

Dr. Siddiqui said that newer technologies — such as high-definition endoscopes, narrow-band imaging, and endoscopic ultrasound — allow physicians to detect subtle mucosal changes during gastric evaluation. These innovations, combined with heightened clinical attention to gastrointestinal symptoms, may explain the positive shift in trends.

Dr. Amit Bhatt, staff gastroenterologist at the Cleveland Clinic and the senior author on the study, said there is a need for further research to better define the evolving demographics of stomach cancer in the U.S. He said the findings could help elevate discussions about targeted screening for gastric cancers in high-risk groups — bringing attention to an issue that may warrant greater public health focus in the future.

This [news release](#) was published by Digestive Disease Week on May 3, 2025.

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