

No 46, March 2009
ISSN 0815-7219

Canstat: A digest of facts and
figures on cancer

Editors

Vicky Thursfield
Helen Farrugia
Graham Giles

Circulation

Suzi Neumann

Published by the

Cancer Epidemiology Centre
Cancer Council Victoria
1 Rathdowne Street
Carlton Victoria 3053
Australia

Tel: +61[0]3 9635 5000

Fax: +61[0]3 9635 5270

Email: enquiries@cancervic.org.au

Internet: www.cancervic.org.au

© Cancer Council Victoria 2009

Cancer in Victoria 2006

Contents

2	Acknowledgements
3	Victorian Cancer Registry staff
4	Cancer incidence reporting
5	The Victorian Cancer Registry
6–7	Table of cancers by ICD-10 codes
8–9	Overview of 2006 statistics
10	Statistical methods
11	In situ cancers 2006
12–13	Leading cancer sites 2006
14	Incidence summary table 2006
15	Mortality summary table 2006
16–17	Cancer trends 1982–2006
18–28	Cancer incidence in Victoria 2006 by age, sex and site
29	Indices of data quality
30	Demography
31	Population, Victoria 2006
32	Victorian Cancer Registry publications

Acknowledgements

This report has been made possible by the collaboration of numerous persons within Victoria and across Australia. Thanks must first go to each notifying hospital and pathology laboratory for their contributions without which the registry would not exist. I wish also to thank the Registrar of Births, Deaths and Marriages for their continued and valuable assistance.

The registry staff are to be praised for their patience, hard work and diligence in ensuring the quality of the data upon which this volume is based.

The Victorian Cancer Registry's Precis-Central database has now been operational for three years and ongoing modifications will continue to improve efficiency in processing electronic records. Almost three-quarters of our cancer notifications are now received via the Victorian Cancer Registry Internet Portal (VCRIP) and we commend our notifiers for their wide adoption of VCRIP, which allows secure electronic transfer of data files or individual web-based E-forms.

Increases in electronic notification and processing will enhance our ability to provide timely and relevant data to clinicians and researchers and for health service planning and evaluation. We are currently piloting the introduction of additional data elements for tumour staging, treatment and recurrence with a view to further enhancing the value of the Victorian Cancer Registry to Victorian efforts in cancer control.

This publication is a compendium of statewide cancer statistics for 2006. All Victorian Cancer Registry publications are available for download from our website, as are a comprehensive set of prepared slides on the latest cancer incidence and mortality in Victoria that can be used in presentations. Next month the Cancer Epidemiology Centre will launch its new interactive web reporting tool - this will enable external users to select, customise and download a series of figures and tables relating to cancer incidence and mortality in Victoria. Our aim is to ensure that there is easy access to the statistics from the Victorian Cancer Registry in a variety of formats to suit a wide audience and purposes.

Data are also available in more detail in terms of cancer site, histological type and demographics on request – we process almost 400 such requests each year. We are very willing to discuss your data requirements with you; please do not hesitate to ask.



Graham G. Giles, PhD
Director, Victorian Cancer Registry

Victorian Cancer Registry staff

Members of staff

Graham Giles	Director
Debbie McBain	Operations Manager
Helen Farrugia	Director of Information Systems
Jonathan Yue	Programmer
Kelli Anderson	System Maintenance & Training Officer
Loretta Costa	Electronic Notifications Coordinator
Sue Douglas	VCR Project Manager
Suzi Neumann	Departmental Manager
Vicky Thursfield	Cancer Control Information Manager

Coder/Clerks

Naida Gordon	Training and QA officer
Amenual Greenwood	
Anne Vaughan	
Annette Luvisetto	
Aruna Gunasekara	
Cherry Wolfe	
Christine Le	
Jeanette Huybers	
Kris Camm	
Kris Ivanova	
Liam O'Donnell	
Ricklin Le Rossingnol	
Roselyn Santos	
Svetlana Kouperman	
Belinda Phillips	Coder/Administrative assistant

Consultant Pathologist

John Slavin

Volunteer

Roma McIntyre

Data Release Committee

Director, Victorian Cancer Registry
Director, Cancer Council Victoria
Chairperson, Cancer Council Victoria's Human
Research Ethics Committee

Cancer incidence reporting

The incidence data in this report are the 2006 statistics as they stood in March 2009.

Future requests for data and publications may not exactly correspond to the figures in this report, as they will reflect subsequent additions to the dataset.

Incidence

Cancer incidence is defined as the occurrence of new cancers in a defined population in a specified time period.

This report includes all cancers notified to the registry that were first diagnosed in Victorian residents between January 1st and December 31st 2006. For all tumours diagnosed since 2003 both tumour morphology and topography have been coded to the International Classification of Diseases for Oncology, Third Edition (ICDO-3)¹.

In this report, cancers are grouped by ICD-10² as described in Table 1 (pages 6–7). Figures include chronic myeloproliferative disorders and myelodysplastic syndromes which are classified as malignant in ICDO-3 (though these conditions have uncertain behaviour codes in ICD-10).

Multiple primary tumours

Incidence reflects the number of primary tumours rather than the number of individuals with cancer. The Victorian Cancer Registry database records multiple primary cancers in the same person, of which only some are counted for incidence purposes according to the rules of the International Agency for Research on Cancer and the International Association of Cancer Registries^{1,3}.

The rules, in brief, state that:

1. *The recognition of the existence of two or more primary cancers does not depend on time.*
2. *A primary cancer is one that originates in a primary site or tissue and is not an extension, nor a recurrence, nor a metastasis.*
3. *Only one tumour is recognised as arising in an organ or pair of organs or tissue. Some groups of codes are considered to be a single organ for the purposes of defining multiple tumours - in this report we use the ICDO-3 groups defined by IARC³. Multifocal tumours - discrete masses apparently not in continuity with other primary cancers originating in the same primary site or tissue, for example bladder - are counted as a single cancer.*
4. *Rule 3 does not apply in two circumstances:*

Systemic (or multicentric) cancers potentially involving many different organs are only counted once in any individual. These are Kaposi sarcoma (group 15) and tumours of the haematopoietic system (groups 8-14 in IARC).

Neoplasms of different morphology should be regarded as multiple cancers (even if they are diagnosed simultaneously in the same site). If the morphological diagnoses fall into one category, and arise in the same primary site, they are considered to be the same morphology for the purpose of counting multiple primaries. If the morphological diagnoses fall into two or more of the categories, even if they concern the same site, the morphology is considered to be different, and two or more cases should be counted.

If, however, one morphology is not specific (groups 5, 14 and 17) and a specific morphology is available, the case should be reported with the specific histology and the non-specific diagnosis ignored.

Publication of incidence reports

There is usually about twelve months from year of diagnosis to publication of incidence data. This is due to the time delay between the date of cancer diagnosis and receipt of all relevant notifications to the Victorian Cancer Registry, and to the considerable time spent on matching, classifying and checking of cases at the registry.

It should also be noted that despite intensive efforts to ensure the completeness of incidence data before publication, the incidence rates for a given time period change by a small percentage over time. The registry will continue to receive notifications for cases already counted in incidence, and the tumour morphology (based on microscopic diagnosis) or date of diagnosis may be amended as a result of this later notification. Reports for previously uncounted cases diagnosed in a particular year will continue to arrive at the registry for some years after the incidence for that period has been published. The database is therefore continually being updated and the quality of data improved across the entire period of cancer reporting.

1. Fritz A, Percy C Jack A et al eds. *International Classification of Diseases for Oncology. Third Edition. World Health Organization, Geneva, 2000.*

2. National Centre for Classification in Health. *The International Statistical Classification of Diseases and Related Health Problems. Tenth Revision, Australian Modification (ICD-10-AM). Fourth edition. University of Sydney 2006.*

3. *International rules for multiple primary cancers (ICDO 3rd Edition). Internal Report No. 2004/2. IARC, Lyon, 2004. http://www.iacr.com.fr/MPrules_July2004.pdf*

The Victorian Cancer Registry

The Victorian Cancer Registry has been a population-based registry since 1982. Amendments to the Cancer Act in 1981 made it mandatory for all hospitals and pathology laboratories to notify the cancer registry of the presence of cancer in patients or human tissues. Canstat No 37 “A Guide to the Victorian Cancer Registry” describes in more detail the legislation, history, purpose and operation of the registry.

All malignant neoplasms are registered, as are in situ carcinoma of breast and cervix and in situ melanoma. Basal and squamous cell carcinomas of the skin are only registered when they occur in genital and perianal skin and the vermilion border of lip.

Squamous and basal cell carcinomas of other skin sites are not registered by the Victorian Cancer Registry as many are treated in doctors’ surgeries using destructive techniques which preclude histological confirmation and also as they vastly outnumber all other forms of cancer.

All other non-melanocytic skin cancers (NMSC), such as Merkel cell tumour, malignant fibrous histiocytoma (MFH), dermatofibroma protuberans (DFSP), sweat gland and skin appendage tumours are registered and reported as “other skin cancer”.

Currently, about 250 hospitals and 40 pathology laboratories notify cancer to the registry, increasingly via electronic media. In preparing the 2006 incidence data, around 100,000 notifications were processed. In addition, death certificates are obtained from the Registrar of Births, Deaths and Marriages in computerised format on a regular basis.

The first task at the registry is to match incoming notifications against the register to see if the case has already been registered from another source.

Demographic details and codes for tumour site and histology are entered on the system and data are checked for internal consistency and completeness. Further notifications for cancers already on the system are also processed, with any differences being resolved by follow-up, and a censoring date for survival analysis obtained.

Additional information is recorded for some cancer sites e.g. size, hormone receptor status and TNM stage for breast cancer, Clark’s level and Breslow’s thickness for malignant melanoma. Specially trained staff interpret pathology reports to extract and code these data elements, assisted by a consultant pathologist.

The incidence tables on pages 18–28 give site, sex and age-specific numbers and rates for most 3-digit ICD-10 rubrics. Age standardised rates (ASR) with standard errors (SE) are given for each site. Confidence limits (95%) for each rate may be obtained by calculating $(ASR \pm 1.96 \times SE)$. A brief explanation of the statistical methods used may be found on page 10.

The minimum data set collected for each cancer consists of:

- registry identification number
- name(s)
- residential address
- date of birth
- indigenous status
- country of birth
- sex
- vital status
- date of last contact
- number of primary tumours
- date of diagnosis
- site of cancer
- cancer histology
- tumour grade
- method of diagnosis.

In preparing the 2006 incidence data, over 100,000 notifications were processed from around 250 hospitals and 40 pathology laboratories.

Table 1: Details of cancer sites and groups used in this report by ICD-10 codes

Figures include chronic myeloproliferative disorders and myelodysplastic syndromes which are classified as malignant in ICDO-3 (though these conditions have uncertain behaviour codes in ICD-10).

ICD-10 description	ICD-10	Label in tables
LIP, ORAL CAVITY & PHARYNX (C00–C14)		
Lip	C00	Lip
Tongue	C01,C02	Tongue
Gum	C03	Gum
Floor of mouth	C04	Floor of mouth
Other & unspecified parts of mouth	C05,C06	Other mouth
Oral Cavity	C01–C06	Oral Cavity
Major salivary glands	C07,C08	Salivary glands
Oropharynx	C09,C10	Oropharynx
Nasopharynx	C11	Nasopharynx
Hypopharynx including pyriform sinus	C12,C13	Hypopharynx
Pharynx	C09–C13	Pharynx
Other & unspecified sites of lip, oral cavity & pharynx	C14	Other oral
DIGESTIVE ORGANS (C15–C26)		
Oesophagus	C15	Oesophagus
Stomach	C16	Stomach
Small intestine including duodenum	C17	Small intestine
Colon	C18	Colon
Rectum including rectosigmoid, anal canal and anus	C19–C21	Rectum
Bowel	C18–C21	Bowel
Liver & intrahepatic bile ducts	C22	Liver
Gallbladder & other biliary tract	C23,C24	Gallbladder
Pancreas	C25	Pancreas
RESPIRATORY SYSTEM & INTRATHORACIC ORGANS (C30–C39)		
Nose, nasal cavities, middle ear & accessory sinuses	C30,C31	Nasal cavities
Larynx	C32	Larynx
Trachea, bronchus & lung	C33,C34	Lung
Thymus, heart, mediastinum & pleura	C37,C38	Thymus etc
BONES, JOINTS & ARTICULAR CARTILAGE (C40–C41)		
Bone & articular cartilage	C40,C41	Bone
MELANOMA (C43)		
Melanoma of skin	C43	Melanoma
OTHER MALIGNANT NEOPLASMS OF SKIN (C44)		
Other skin cancer (excludes squamous and basal cell carcinomas of skin)	C44	Other skin
MESOTHELIAL & SOFT TISSUE (C45–C49)		
Mesothelioma	C45	Mesothelioma
Kaposi sarcoma	C46	Kaposi sarcoma
Retroperitoneum & peritoneum	C48	Peritoneum
Other connective tissue (incl. peripheral nerves etc)	C47,C49	Connective tissue
BREAST (C50) and FEMALE GENITAL ORGANS (C51–C58)		
Breast	C50	Breast
Cervix uteri	C53	Cervix
Body of uterus	C54, C55	Uterus
Ovary	C56	Ovary
Placenta	C58	Placenta
Vulva & other/unspecified female genital organs	C51, C52, C57	Vulva etc

ICD-10 description	ICD-10	Label in tables
MALE GENITAL ORGANS (C60–C63)		
Prostate	C61	Prostate
Testis	C62	Testis
Penis & other male genital organs	C60,C63	Penis etc
URINARY TRACT (C64–C68)		
Kidney, except renal pelvis	C64	Kidney
Bladder	C67	Bladder
Renal pelvis & other/unspecified urinary organs	C65,C66,C68	Renal pelvis etc
EYE, BRAIN & OTHER PARTS OF CENTRAL NERVOUS SYSTEM (C69–C72)		
Eye	C69	Eye
Meninges	C70	Meninges
Brain	C71	Brain
Cranial nerves, spinal cord & unspecified CNS	C72	Other CNS
Brain & CNS	C70–C72	Brain & CNS
THYROID & OTHER ENDOCRINE GLANDS (C73–C75)		
Thyroid gland	C73	Thyroid
Other endocrine glands and related structures	C74,C75	Other endocrine
UNKNOWN PRIMARY SITE (C26, C39, C76–C80)		
Other and ill-defined sites	C26, C39, C76–79	Ill-defined sites
Unspecified site	C80	Unspecified site
MALIGNANT NEOPLASMS OF LYMPHOID, HAEMATOPOIETIC AND RELATED TISSUE (C81–96, D45–47)		
Hodgkin lymphoma	C81	Hodgkin lymphoma
Nodular non-Hodgkin lymphoma	C82	Nodular NHL
Diffuse non-Hodgkin lymphoma	C83	Diffuse NHL
Peripheral & cutaneous T-cell lymphoma	C84	T-cell lymphoma
Other/unspecified non-Hodgkin lymphoma	C85	Other NHL
Non-Hodgkin lymphoma	C82–85	All NHL
All lymphoma	C81–85	Lymphoma
Malignant immunoproliferative disease	C88	Immunoproliferative
Multiple myeloma and malignant plasma cell neoplasms	C90	Multiple myeloma
Lymphoid leukaemia	C91	Lymphoid leukaemia
<i>Acute lymphoblastic leukaemia</i>	C91.0	
<i>Chronic lymphocytic leukaemia</i>	C91.1	
Myeloid leukaemia	C92	Myeloid leukaemia
<i>Acute myeloid leukaemia</i>	C92.0	
<i>Chronic myeloid leukaemia</i>	C92.1	
Monocytic leukaemia	C93	Monocytic leukaemia
Other specified leukaemia	C94	Other leukaemia
Unspecified cell leukaemias	C95	Unspecified leukaemia
All leukaemia	C91–C95	All leukaemia
Other & unspecified haematopoietic neoplasms	C96	Other haematopoietic
Chronic myeloproliferative & myelodysplastic syndromes	D45–D47	Myeloproliferative
ALL MALIGNANT TUMOURS (except squamous & basal cell carcinoma of skin)	C00–C96, D45–D47	All malignant tumours
The following in situ tumours are also reported:		
In situ melanoma	D03	
Carcinoma in situ of breast	D05	

Overview of 2006

In 2006, 25,535 Victorians were diagnosed with malignant cancer¹ and 9,935 died from cancer²

¹ Excludes basal and squamous cell carcinomas of skin, the common non-melanocytic skin cancers (NMSC).

² Excludes all NMSC deaths (see page 9 for statistics on NMSC mortality)

Both figures include the myelodysplastic syndromes and myeloproliferative disorders that are classified as malignant neoplasms in ICDO-3 (the classification used by IARC) but not in ICD-10 (as reported in Australian Bureau of Statistics publications).

Figure 1: Leading causes of death, Victoria 2006. The proportion of all deaths and years of potential life lost (YPLL) are shown for each cause

YPLL measures the extent of "premature" mortality, assumed to be any death between 1 and 78 years. YPLL estimates enable assessment of the relative significance of specific causes of premature death. IHD=Ischaemic heart disease; CVD=Cerebrovascular disease (stroke); CLRD=Chronic lower respiratory disease (asthma & emphysema).

Source: Causes of Death, Australia 2006 (Australian Bureau of Statistics Cat. No. 3303.0)

Numbers

Each year, more than 25,500 Victorians develop cancer, other than one of the common NMSC¹, and nearly 10,000 deaths are caused by it. In 2006, 14,220 men and 11,315 women presented with new cancers and 5,532 men and 4,403 women died from cancer.

Age and sex

Cancer was very age-dependent with less than 1% of tumours occurring before age 15 and 58% in persons over 65 years. More men than women developed cancer: 126 for every 100 females. The male excess was largely due to tobacco-related cancers.

Incidence

The standardised incidence rates (per 100,000) were 361 for males and 266 for females. The cumulative rates per cent to age 75 were 42.6% for males and 29.6% for females. These represented risks of over 1 in 3 for men and 1 in 4 for women. At least one in three Victorians will develop a cancer other than non-melanocytic skin cancer by the age of 75.

A summary table of incidence rates by sex and individual sites is given on page 14.

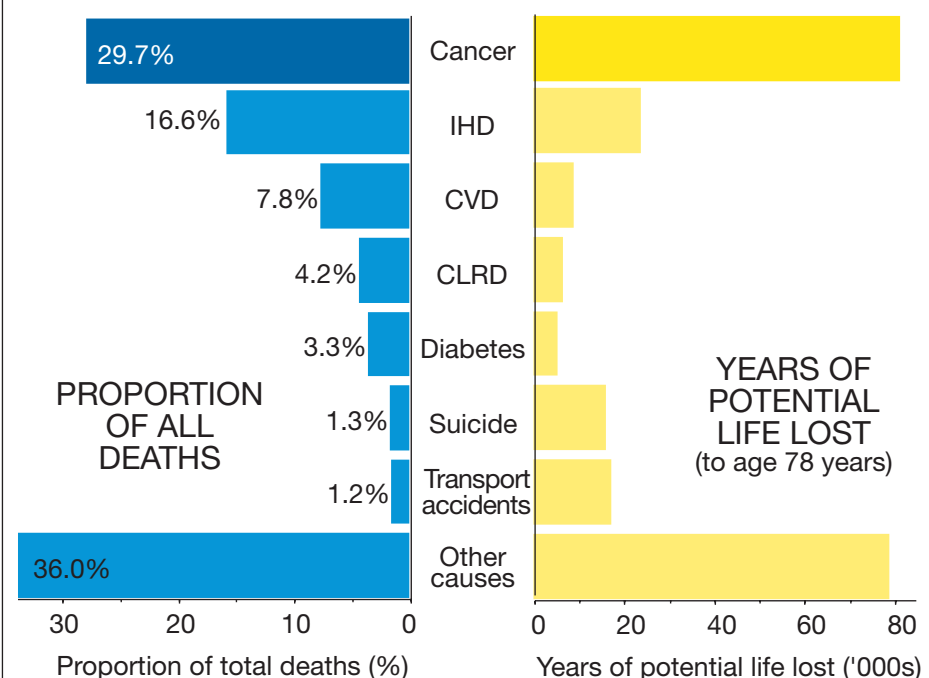
Mortality

In 2006, more Victorians died from cancer¹ (9,935, 29.8% of all deaths) than from all heart disease (7,506, 22.5%). Together these caused more than half of all deaths in Victoria.

Age-standardised mortality rates for cancer were 123.5 per 100,000 males and 83.3 per 100,000 females. These rates are higher than those for both ischaemic heart disease (men 57.4, women 29.5) and all heart disease (men 73.9, women 43.7).

Cancer death rates for men and women continue to decrease at about 1.3% and 1.0% per year respectively. The years of potential life lost (YPLL) to age 75 were 29,024 for males and 24,360 for females.

Figure 1 shows the proportion of deaths in Victoria 2006 caused by cancer and the years of potential life lost compared with other leading causes of death.



Cancer is the leading cause of death in Victoria and caused 9,935 deaths (30% of total) in 2006.

Note:

Some tumour types changed their behaviour codes between ICDO editions 2 and 3 (in which the Victorian Cancer Registry has coded since 2003). These changes affect the range of tumours included in incidence reporting. In particular, ovarian tumours of borderline malignancy and superficial (non-invasive) transitional cell cancers of the bladder are no longer coded as malignant tumours and are therefore not included. Conversely, myelodysplastic syndromes and myeloproliferative disorders are now classified as malignant and are included in this report.

Changes to reported rates prior to and after 2003 may reflect these coding changes. Please refer to ICDO-3 for further details (see page 4).

A table summarising mortality rates by sex and individual sites is given on page 15. In 2006, there were also 74 deaths from non-melanocytic skin cancer (50 male and 24 female). These include squamous and basal cell carcinomas, which are not included elsewhere in this report, and the less common skin cancers, including Merkel cell tumours, DFSP, (MFH) and skin appendage tumours, reported in incidence as “other skin cancer”.

Leading sites

The leading sites for cancer in Victorians are shown in Figures 2 & 3 (pages 12–13).

Prostate cancer was again the leading site of new cancer in 2006 (4,240 cases, 17% of all cancers and 30% of cancers in men). Incidence rates rose steeply between 1987 and 1995 largely due to detection of early cancers by Prostate Specific Antigen (PSA) testing. After falling sharply from 1995 to 1997, rates are now increasing again. Prostate cancer was the third ranking cause of cancer death (770 deaths, 8%) in 2006.

In 2006, bowel (colon and rectum) cancer was the second most common new cancer in Victorians with 3,516 cases (14% of all cancers). It was the second ranking site of fatal cancer (1,050 deaths, 11%).

Breast cancer was the third most common new cancer, accounting for 13% (3,204) of new cases and 28% of all cancers in women. It was the fourth ranking cause of cancer death (671 deaths, 7%). Incidence rates have stabilised recently after a decade of increase, largely due to mammographic detection, whilst mortality rates have shown a downward trend since 1994.

Lung cancer is again the fourth site of new cancer (2,378 new

cases) in 2006, having been overtaken by melanoma in 2005, and remains the leading cause of cancer death (1,848 deaths, 19% of all cancer deaths). Incidence and mortality rates continue to decline in males and increase slightly in females.

Melanoma is the fifth ranking new cancer in Victorians (2,191 cases, 9% of total) and was the twelfth cause of cancer death (278 deaths, 3% of total). Mortality rates are stable whilst incidence continues to increase.

The difference in rank orders of incidence and mortality reflects the differing survivorship of patients with different tumours. Lung cancer is both common and quickly fatal and, therefore, ranks high in both new cancers and cancer deaths. Pancreatic cancer is not so common but is usually rapidly lethal so its mortality ranking is higher than its incidence ranking.

Cancers of unspecified primary site form a substantial group of new cancers with 746 (3%) diagnoses in 2006. We do not include cancers of unknown primary site in our leading sites figures as these are a very heterogeneous group. Numerically these cancers would appear in the top ten cancer sites for incidence and, because they are often advanced or widespread at the time of diagnosis, rank second behind lung cancer for mortality.

There are estimated to be nearly 40,000 new diagnoses in Victoria each year of the common types of NMSC (squamous and basal cell carcinomas). These cancers are not collected by the registry and not included in this report. However, we have included this year for the first time incidence figures for the less common NMSC (including Merkel cell tumours, MFH and DFSP) reported as “other skin cancer”.

Statistical methods

The following statistical terms and abbreviations have been used in this report.

Incidence and mortality rates

Incidence and mortality rates were calculated using the estimated resident population for Victoria in 2006 (page 31) and expressed as diagnoses or deaths per 100,000 population per annum.

Crude rates

The crude rate is defined as the number of new cases (or deaths) divided by the whole population at risk in the specified time period, and is expressed as an annual rate per 100,000 population.

Age-specific rates

Age-specific rates are calculated in the same way as the crude rate by dividing the number of cases in each five-year age and sex stratum by the Australian Bureau of Statistics' population estimate for that stratum and multiplying by 100,000 (to give rates per 100,000).

Age-standardised rates

Rates are adjusted to enable comparisons between populations having different age structures. The Victorian standardised rates (ASR) in this publication were based on the World Standard Population (Cancer Incidence in Five Continents, Volume IV, 1982, IARC). These rates are calculated using the direct method by summation of the weighted age-specific rates. The standard error (SE) of each ASR is given in the tables; a 95% confidence interval for the rate can be estimated by (rate \pm 1.96 SE).

Cumulative rates (to age 75 years)

Five-year age–sex specific rates per person are multiplied by five and summed over age groups from 0–4 to 70–74. This rate is then expressed as a percentage. The rate is a good estimator of lifetime risk.

Risk to age 75 years

This risk is a measure of the risk of contracting a particular cancer by the age of 75 years if the risks at the time of calculation continued throughout life. It is calculated from the cumulative rate using the formula below and expressed as a “1 in x” proportion.

$$\text{Risk to age 75} = 1/\text{cumulative risk}$$

where

$$\text{Cumulative risk} = 1 - e^{-(\text{cumulative rate})/100}$$

Years of Potential Life Lost (to age 75 years)

Years of potential life lost (YPLL) is a measure of the number of years of life lost per year due to premature death from a particular cause given population life expectancy. All deaths in age groups from 0–4 to 70–74 were used in calculations, as deaths before the age of 75 years are considered premature.

In situ cancers 2006

Incidence rates are reported for in situ melanomas and carcinoma in situ of female breast and cervix. In situ cancers are localised lesions that have not invaded beyond the epithelial layer. If untreated, some in situ neoplasms may progress to become invasive cancer and metastasise to other body sites through the lymphatics or bloodstream.

The *BreastScreen* and *PapScreen Victoria* programs provide women in Victoria with access to regular breast and cervical screening. These services offer two-yearly screening with the aim of maximising early detection of cancer or pre-malignant abnormalities. The *SunSmart* program has made considerable

impact on the early detection of melanoma with extensive education programs for medical practitioners and the general public.

The reporting of in situ incidence of these cancers will be of interest in monitoring the effects of interventions. We would expect to see in situ incidence increasing with early detection, to be accompanied eventually by decreasing numbers of invasive cancers.

Note: For the purposes of this report, carcinoma in situ of the cervix includes CIN II-III lesions as well as CIN III lesions.

	Cervix Female		Breast Female		Melanoma			
	Cases	Rate	Cases	Rate	Male Cases	Male Rate	Female Cases	Female Rate
0-4	0	0.0	0	0.0	0	0.0	0	0.0
5-9	0	0.0	0	0.0	0	0.0	0	0.0
10-14	0	0.0	0	0.0	0	0.0	0	0.0
15-19	59	34.8	0	0.0	1	0.6	0	0.0
20-24	359	197.7	0	0.0	6	3.2	6	3.3
25-29	501	283.9	2	1.1	5	2.8	13	7.4
30-34	364	191.8	3	1.6	11	5.9	13	6.9
35-39	241	122.6	18	9.2	20	10.4	35	17.8
40-44	165	86.0	24	12.5	30	16.0	37	19.3
45-49	89	48.0	42	22.7	42	23.2	46	24.8
50-54	42	25.0	66	39.3	59	35.8	68	40.5
55-59	39	24.9	59	37.6	100	65.7	71	45.3
60-64	18	14.9	54	44.6	92	76.9	63	52.0
65-69	15	15.1	53	53.4	92	96.7	60	60.5
70-74	4	4.8	34	40.4	91	119.1	56	66.5
75-79	2	2.6	29	37.3	91	140.4	57	73.4
80-84	1	1.6	9	14.5	78	182.6	66	106.1
85+	2	3.5	6	10.6	47	175.5	35	62.0
Total cases	1,901		399		765		626	
Cumulative rate (%)	5.3		1.3		2.3		1.7	
Lifetime risk (to age 75)	1 in 20		1 in 77		1 in 44		1 in 59	
Age-standardised rate	72.0		11.0		19.8		15.6	

Leading cancer sites 2006

Figure 2:

Leading cancer sites, Victoria 2006

The ten top-ranking sites for cancer incidence and mortality in Victoria are included for males, females and persons. The bars represent the percentages of total new cases or deaths in each site. Numbers of cases/deaths are also shown on the graphs.

ALL CANCER

Incidence

Male 14,220

Female 11,315

Persons 25,535

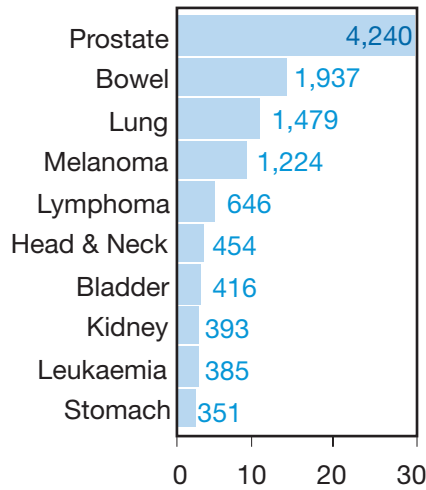
Mortality

Male 5,532

Female 4,403

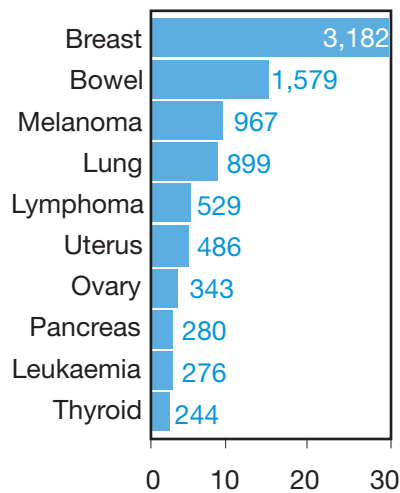
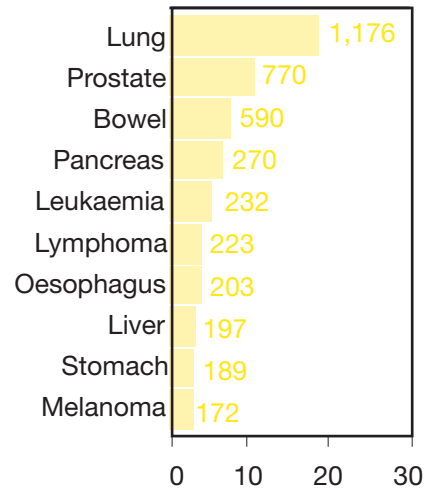
Persons 9,935

Incidence

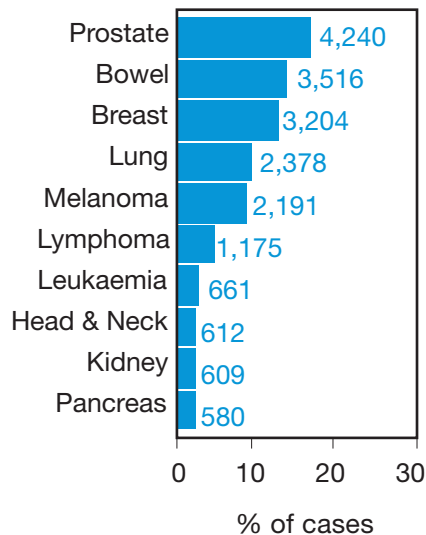
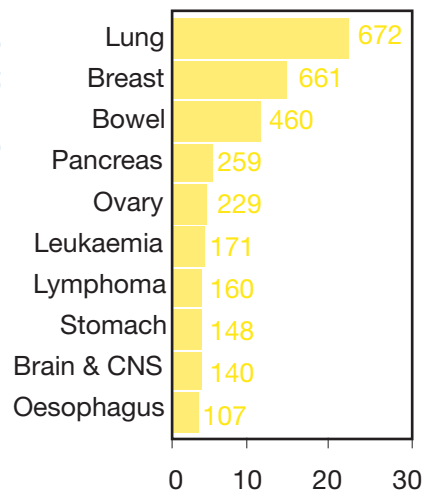


Male

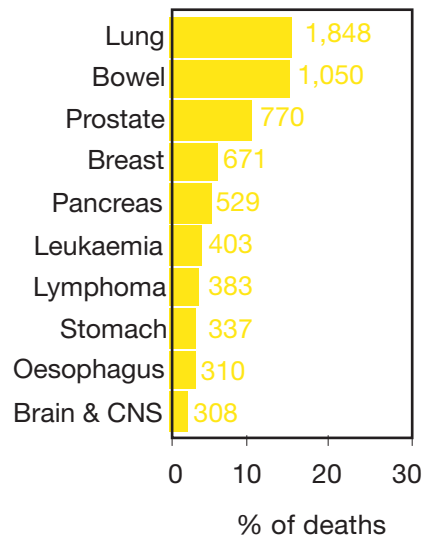
Mortality



Female



Person



Note: All Head and neck cancers have been combined in this graph. This includes ICD-10 sites C01-C14 and C30-C32.

Leading cancer sites by age

Figure 3:

Leading sites for cancer incidence, Victoria 2006 by sex and age group

For each age group and sex the five top ranking new cancer sites in 2006 are included. The percentage of total new cancers in that age group are plotted together with the numbers of cases.

ALL CANCER Incidence by age group and sex

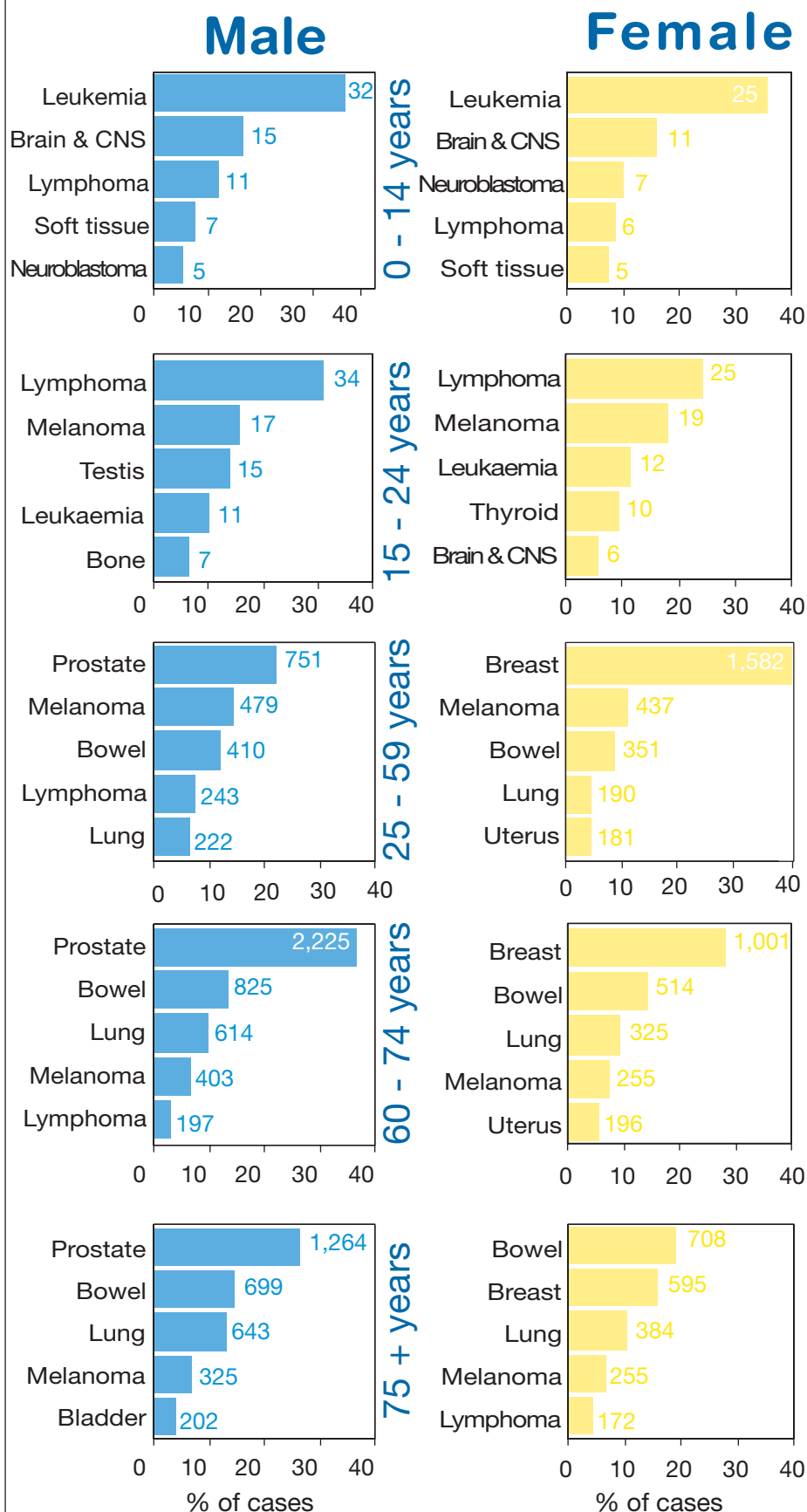
Male

0-14	87
15-24	110
25-59	3,381
60-74	5,922
75+	4,720

Female

0-14	68
15-24	103
25-59	3,921
60-74	3,544
75+	3,679

Note: Malignant cancers in children under 15 years were grouped following the definitions presented in: Steliarova-Foucher E, Stiller C, Lacour B, Kaatsch P. International Classification of Childhood Cancer, Third Edition. Cancer 2005;103:1457-67.



Incidence summary table 2006

ICD	Site	Males				Females			
		N	CR	CR%	SR	N	CR	CR%	SR
C00	Lip	135	5.3	0.4	3.6	56	2.2	0.1	1.1
C01,C02	Tongue	84	3.3	0.3	2.4	37	1.4	0.1	0.9
C07,C08	Salivary glands	29	1.1	0.1	0.7	24	0.9	0.1	0.6
C03	Gum	8	0.3	0.0	0.2	11	0.4	0.0	0.3
C04	Floor of mouth	13	0.5	0.0	0.3	6	0.2	0.0	0.1
C05, C06	Other mouth	28	1.1	0.1	0.7	33	1.3	0.1	0.7
C01-C06	Oral cavity	133	5.2	0.4	3.6	87	3.4	0.2	2.0
C09, C10	Oropharynx	68	2.7	0.2	1.9	10	0.4	0.0	0.3
C11	Nasopharynx	25	1.0	0.1	0.8	10	0.4	0.0	0.3
C12, C13	Hypopharynx	30	1.2	0.1	0.8	3	0.1	0.0	0.1
C09-C13	Pharynx	123	4.9	0.4	3.5	23	0.9	0.1	0.7
C14	Other oral	10	0.4	0.0	0.3	5	0.2	0.0	0.1
C15	Oesophagus	206	8.1	0.6	4.9	103	4.0	0.2	1.7
C16	Stomach	351	13.8	1.0	8.5	204	7.9	0.4	4.2
C17	Small Intestine	51	2.0	0.2	1.3	46	1.8	0.1	1.2
C18	Colon	1,143	45.1	3.3	27.2	1,079	41.6	2.4	21.2
C19-C21	Rectum	794	31.3	2.5	20.2	500	19.3	1.3	11.0
C18-C21	Bowel	1,937	76.4	5.7	47.4	1,579	60.9	3.7	32.2
C22	Liver	243	9.6	0.7	6.4	82	3.2	0.2	1.8
C23, C24	Gallbladder	56	2.2	0.2	1.4	103	4.0	0.3	2.1
C25	Pancreas	300	11.8	0.9	7.2	280	10.8	0.6	5.2
C30, C31	Nasal Cavities	30	1.2	0.1	0.7	7	0.3	0.0	0.1
C32	Larynx	129	5.1	0.4	3.2	12	0.5	0.0	0.3
C33, C34	Lung	1,479	58.3	4.0	34.3	899	34.7	2.2	18.7
C37, C38	Thymus etc	9	0.4	0.0	0.3	6	0.2	0.0	0.3
C40, C41	Bone	27	1.1	0.1	1.0	12	0.5	0.0	0.5
C43	Melanoma	1,224	48.3	3.6	32.6	967	37.3	2.5	24.5
C44	Other skin	64	2.5	0.2	1.7	44	1.7	0.1	1.0
C45	Mesothelioma	96	3.8	0.3	2.4	20	0.8	0.0	0.4
C46	Kaposi sarcoma	20	0.8	0.1	0.5	3	0.1	0.0	0.0
C48	Peritoneum	7	0.3	0.0	0.2	23	0.9	0.1	0.7
C47, C49	Connective tissue	92	3.6	0.2	2.4	82	3.2	0.2	2.4
C50	Breast	22	0.9	0.1	0.6	3,182	122.8	9.5	82.9
C53	Cervix					160	6.2	0.5	4.5
C54, C55	Uterus					486	18.8	1.5	12.1
C56	Ovary					343	13.2	1.0	8.5
C58	Placenta					1	0.0	0.0	0.0
C51,C52,C57	Vulva etc					111	4.3	0.3	2.5
C61	Prostate	4,240	167.3	14.2	107.7				
C62	Testis	154	6.1	0.4	5.5				
C60, C63	Penis etc	24	0.9	0.1	0.6				
C64	Kidney	393	15.5	1.2	10.5	216	8.3	0.5	4.8
C67	Bladder	416	16.4	1.0	9.4	123	4.7	0.2	2.1
C65, C66,C68	Renal pelvis etc	49	1.9	0.1	1.0	41	1.6	0.1	0.
C69	Eye	33	1.3	0.1	1.0	29	1.1	0.1	0.7
C70	Meninges	1	0.0	0.0	0.0	5	0.2	0.0	0.2
C71	Brain	216	8.5	0.7	6.6	159	6.1	0.5	4.5
C72	Other CNS	7	0.3	0.0	0.2	4	0.2	0.0	0.1
C70-C72	Brain & CNS	224	8.8	0.8	6.8	168	6.5	0.5	4.8
C73	Thyroid	62	2.4	0.2	1.8	244	9.4	0.7	7.2
C74, C75	Other endocrine	16	0.6	0.0	0.7	11	0.4	0.0	0.3
C26,C39,C76-C79	Ill-defined site	17	0.7	0.0	0.4	17	0.7	0.0	0.
C80	Unspecified site	283	11.2	0.6	6.4	329	12.7	0.5	5.4
C81	Hodgkin lymphoma	82	3.2	0.2	3.1	73	2.8	0.2	2.7
C82	Nodular NHL	123	4.9	0.3	3.3	100	3.9	0.3	2.4
C83	Diffuse NHL	284	11.2	0.8	7.7	243	9.4	0.6	5.4
C84	T-cell lymphoma	19	0.7	0.1	0.5	11	0.4	0.0	0.3
C85	Other NHL	138	5.4	0.4	3.5	102	3.9	0.2	2.1
C82-C85	Non-Hodgkin lymphoma	564	22.2	1.6	15.1	456	17.6	1.2	10.2
C88	Immunoproliferative	20	0.8	0.0	0.4	5	0.2	0.0	0.1
C90	Multiple myeloma	184	7.3	0.5	4.4	148	5.7	0.3	2.9
C91	Lymphoid leukaemia	184	7.3	0.5	5.6	107	4.1	0.3	3.0
C91.0	Acute lymphoblastic leukaemia	51	2.0	0.2	2.4	30	1.2	0.1	1.6
C91.1	Chronic lymphocytic leukaemia	119	4.7	0.4	2.9	72	2.8	0.2	1.3
C92	Myeloid leukaemia	190	7.5	0.4	4.7	155	6.0	0.3	3.8
C92.0	Acute myeloid leukaemia	113	4.5	0.3	2.8	95	3.7	0.2	2.5
C92.1	Chronic myeloid leukaemia	39	1.5	0.1	1.0	33	1.3	0.1	0.8
C93	Monocytic leukaemia	3	0.1	0.0	0.1	5	0.2	0.0	0.2
C94	Other leukaemia	4	0.2	0.0	0.1	4	0.2	0.0	0.1
C95	Unspecified leukaemia	4	0.2	0.0	0.1	5	0.2	0.0	0.2
C96	Other haematopoietic	1	0.0	0.0	0.0	2	0.1	0.0	0.0
C91-C95	All leukaemia	385	15.2	1.0	10.6	276	10.7	0.7	7.1
D45-D47	Myeloproliferative	300	11.8	0.6	6.4	227	8.8	0.4	4.2
C00-C96, D45-D47	All malignant tumours	14,220	560.9	42.6	360.7	11,315	436.6	29.6	266.0

N Number

CR Crude Rate

SR Standard Rate

CR% Cumulative Rate to

Mortality summary table 2006

ICD	Site	N	CR	Males		N	Female		SR
				YPLL	SR		YPLL	SR	
C00	Lip	0	0.0	0	0.0	0	0.0	0	0.0
C01,C02	Tongue	25	1.0	237	0.6	11	0.4	61	0.2
C07,C08	Salivary glands	6	0.2	20	0.1	4	0.2	28	0.1
C03	Gum	0	0.0	0	0.0	0	0.0	0	0.0
C04	Floor of mouth	6	0.2	58	0.2	0	0.0	0	0.0
C05, C06	Other mouth	10	0.4	65	0.3	7	0.3	19	0.1
C01-C06	Oral cavity	41	1.6	361	1.0	18	0.7	80	0.3
C09, C10	Oropharynx	13	0.5	83	0.3	5	0.2	59	0.1
C11	Nasopharynx	15	0.6	213	0.4	2	0.1	52	0.1
C12, C13	Hypopharynx	4	0.2	27	0.1	1	0.0	26	0.0
C09-C13	Pharynx	32	1.3	322	0.8	8	0.3	136	0.2
C14	Other oral	10	0.4	57	0.2	5	0.2	16	0.1
C15	Oesophagus	203	8.0	1,299	4.9	107	4.1	233	1.5
C16	Stomach	189	7.5	1,003	4.2	148	5.7	1,017	2.8
C17	Small Intestine	8	0.3	52	0.2	15	0.6	209	0.4
C18	Colon	335	13.2	1,727	7.5	297	11.5	1,106	4.8
C19-C21	Rectum	255	10.1	1,524	6.1	163	6.3	1,034	3.2
C18-C21	Bowel	590	23.3	3,259	13.6	460	17.8	2,142	8.0
C22	Liver	197	7.8	1,451	4.8	90	3.5	528	1.7
C23, C24	Gallbladder	15	0.6	137	0.4	43	1.7	212	0.8
C25	Pancreas	270	10.7	1,456	6.1	259	10.0	1,058	4.6
C30, C31	Nasal Cavities	3	0.1	23	0.1	2	0.1	7	0.0
C32	Larynx	40	1.6	211	1.0	6	0.2	21	0.1
C33, C34	Lung	1,176	46.4	6,179	26.9	672	25.9	4,170	13.6
C37, C38	Thymus etc	3	0.1	44	0.1	3	0.1	33	0.1
C40, C41	Bone	12	0.5	343	0.4	7	0.3	72	0.1
C43	Melanoma	172	6.8	1,356	4.0	106	4.1	958	2.2
C45	Mesothelioma	78	3.1	454	1.9	19	0.7	100	0.4
C46	Kaposi sarcoma	0	0.0	0	0.0	0	0.0	0	0.0
C48	Peritoneum	2	0.1	13	0.1	8	0.3	42	0.2
C47, C49	Connective tissue	35	1.4	323	0.8	29	1.1	592	0.8
C50	Breast	10	0.4	52	0.2	661	25.5	5,823	14.1
C53	Cervix					38	1.5	584	1.0
C54, C55	Uterus					85	3.3	467	1.6
C56	Ovary					229	8.8	1,717	4.7
C58	Placenta					0	0.0	0	0.0
C51,C52,C57	Vulva etc					20	0.8	157	0.4
C61	Prostate	770	30.4	1,450	14.8				
C62	Testis	2	0.1	64	0.1				
C60, C63	Penis etc	6	0.2	43	0.1				
C64	Kidney	126	5.0	781	2.9	77	3.0	405	1.4
C67	Bladder	144	5.7	409	2.9	79	3.0	176	1.1
C65, C66, C68	Renal pelvis etc	11	0.4	7	0.2	10	0.4	28	0.2
C69	Eye	1	0.0	0	0.0	2	0.1	2	0.0
C70	Meninges	0	0.0	0	0.0	4	0.2	101	0.2
C71	Brain	167	6.6	2,171	4.6	135	5.2	1,615	3.2
C72	Other CNS	1	0.0	20	0.0	1	0.0	55	0.1
C70-C72	Brain & CNS	168	6.6	2,191	4.6	140	5.4	1,772	3.4
C73	Thyroid	9	0.4	33	0.2	18	0.7	66	0.3
C74, C75	Other endocrine	9	0.4	164	0.3	8	0.3	156	0.2
C26, C39, C76-C79	Ill-defined site	165	6.5	638	3.5	175	6.8	664	2.8
C80	Unspecified site	390	15.4	1,830	8.4	341	13.2	1,487	5.7
C81	Hodgkin lymphoma	9	0.4	131	0.2	5	0.2	12	0.1
C82	Nodular NHL	5	0.2	25	0.1	6	0.2	28	0.1
C83	Diffuse NHL	44	1.7	275	1.0	17	0.7	94	0.3
C84	T-cell lymphoma	15	0.6	127	0.3	8	0.3	33	0.1
C85	Other NHL	150	5.9	830	3.3	124	4.8	503	2.0
C82-C85	Non-Hodgkin lymphoma	214	8.4	1,258	4.8	155	6.0	657	2.5
C88	Immunoproliferative	9	0.4	18	0.1	2	0.1	0	0.0
C90	Multiple myeloma	103	4.1	484	2.2	94	3.6	271	1.6
C91	Lymphoid leukaemia	63	2.5	396	1.5	43	1.7	311	0.9
C91.0	Acute lymphoblastic leukaemia	8	0.3	218	0.3	6	0.2	192	0.2
C91.1	Chronic lymphocytic leukaemia	51	2.0	154	1.1	33	1.3	105	0.5
C92	Myeloid leukaemia	158	6.2	647	3.3	110	4.2	680	2.1
C92.0	Acute myeloid leukaemia	108	4.3	494	2.3	86	3.3	520	1.6
C92.1	Chronic myeloid leukaemia	17	0.7	49	0.3	11	0.4	63	0.2
C93	Monocytic leukaemia	1	0.0	2	0.0	3	0.1	2	0.0
C94	Other leukaemia	0	0.0	0	0.0	1	0.0	0	0.0
C95	Unspecified leukaemia	10	0.4	31	0.2	14	0.5	33	0.2
C96	Other haematopoietic	2	0.1	2	0.0	1	0.0	12	0.0
C91-C95	All leukaemia	232	9.2	1,078	5.0	171	6.6	1,027	3.1
D45-D47	Myeloproliferative	69	2.7	39	1.2	82	3.2	150	1.1
C00-C96, D45-D47	All malignant tumours	5,532	218.2	29,024	123.5	4,403	169.9	24,360	

N Number

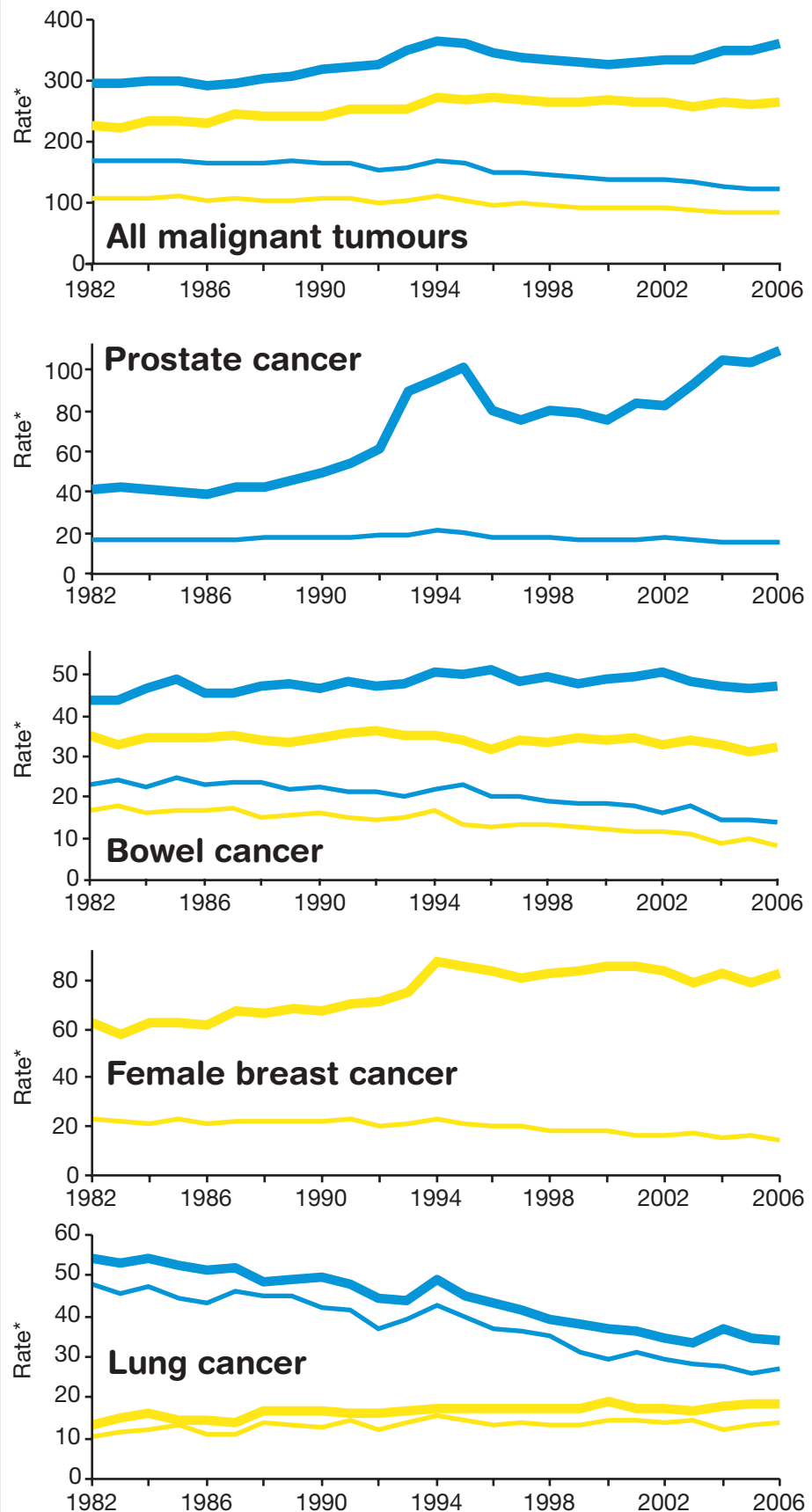
CR Crude Rate

SR Standard Rate

YPLL Years of potential life lost

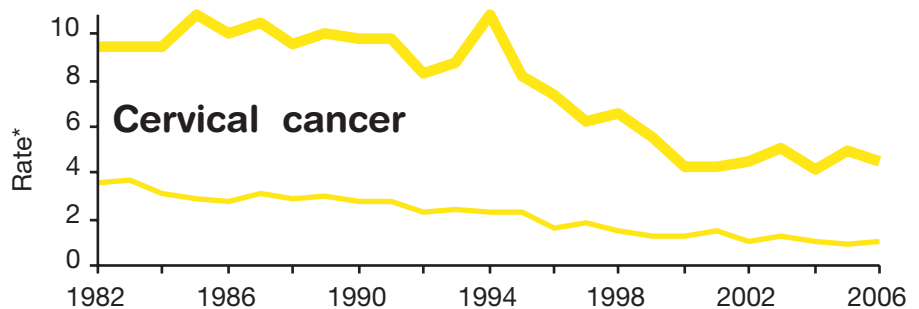
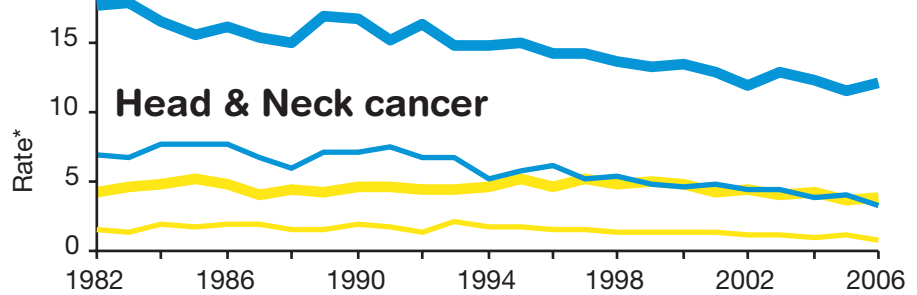
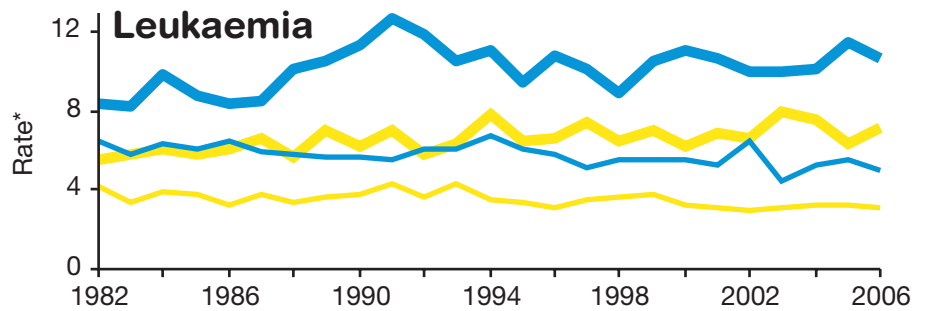
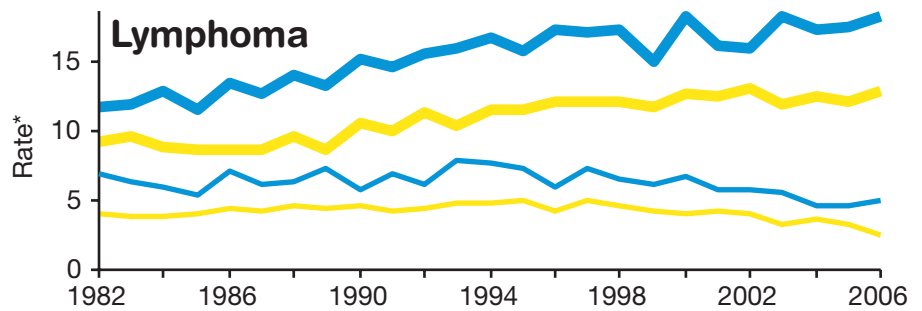
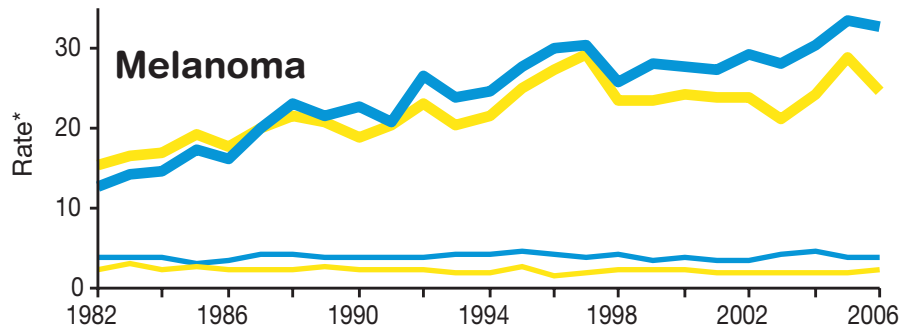
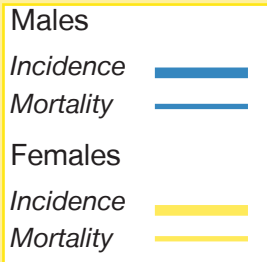
Cancer trends 1982–2006

Figure 4:
Incidence and mortality trends by sex in Victoria 1982–2006 for all cancer and selected common cancers



*Rate = Annual age- standardised incidence/ mortality rate per 100,000 persons.

Incidence and Mortality



Cancer incidence in Victoria 2006 by age, sex and site

Age	0-4	5-9	10-14	15-19	20-24	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69	70-74	75-79	80-84	85+	Total	CR	ASR	SE
C00 Lip																						
Male	0	0	0	0	0	2	1	7	5	9	13	12	15	16	20	18	9	8	135			
	0.0	0.0	0.0	0.0	0.0	1.1	0.5	3.6	2.7	5.0	7.9	7.9	12.5	16.8	26.2	27.8	21.1	29.9		5.3	3.6	0.3
Female	0	0	0	0	0	0	0	0	1	4	0	1	7	6	11	8	9	9	56			
	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.5	2.2	0.0	0.6	5.8	6.1	13.1	10.3	14.5	16.0		2.2	1.1	0.2
C01, C02 Tongue																						
Male	0	0	0	0	1	0	1	2	3	6	15	15	14	10	7	5	3	2	84			
	0.0	0.0	0.0	0.0	0.5	0.0	0.5	1.0	1.6	3.3	9.1	9.9	11.7	10.5	9.2	7.7	7.0	7.5		3.3	2.4	0.3
Female	0	0	0	0	0	0	1	1	4	3	6	1	4	3	4	3	3	4	37			
	0.0	0.0	0.0	0.0	0.0	0.0	0.5	0.5	2.1	1.6	3.6	0.6	3.3	3.0	4.8	3.9	4.8	7.1		1.4	0.9	0.2
C07, C08 Salivary glands																						
Male	0	0	1	0	0	0	1	3	0	0	1	3	2	4	3	5	3	3	29			
	0.0	0.0	0.6	0.0	0.0	0.0	0.5	1.6	0.0	0.0	0.6	2.0	1.7	4.2	3.9	7.7	7.0	11.2		1.1	0.7	0.2
Female	0	0	1	0	1	0	0	3	1	1	6	1	2	0	1	2	4	1	24			
	0.0	0.0	0.6	0.0	0.6	0.0	0.0	1.5	0.5	0.5	3.6	0.6	1.7	0.0	1.2	2.6	6.4	1.8		0.9	0.6	0.2
C03 Gum																						
Male	0	0	0	0	0	0	0	0	0	1	0	1	0	1	2	1	0	2	8			
	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.6	0.0	0.7	0.0	1.1	2.6	1.5	0.0	7.5		0.3	0.2	0.1
Female	0	0	1	0	0	0	0	0	0	1	0	1	0	3	3	0	1	1	11			
	0.0	0.0	0.6	0.0	0.0	0.0	0.0	0.0	0.0	0.5	0.0	0.6	0.0	3.0	3.6	0.0	1.6	1.8		0.4	0.3	0.1
C04 Floor of mouth																						
Male	0	0	0	0	0	0	0	0	0	0	1	4	2	2	2	2	0	0	13			
	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.6	2.6	1.7	2.1	2.6	3.1	0.0	0.0		0.5	0.4	0.1
Female	0	0	0	0	0	0	0	1	0	0	1	0	1	0	1	1	0	1	6			
	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.5	0.0	0.0	0.6	0.0	0.8	0.0	1.2	1.3	0.0	1.8		0.2	0.1	0.1

Numbers (Blue) and age-specific rates (Black) CR=Crude incidence rate ASR=Age-standardised rate SE=Standard error of ASR All rates are per 100,000

Cancer incidence in Victoria 2006 by age, sex and site

Age	0-4	5-9	10-14	15-19	20-24	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69	70-74	75-79	80-84	85+	Total	CR	ASR	SE
C01-C06 Oral cavity																						
Male	0	0	0	0	1	0	3	2	4	9	17	20	20	15	16	11	7	8	133			
	0.0	0.0	0.0	0.0	0.5	0.0	1.6	1.0	2.1	5.0	10.3	13.1	16.7	15.8	21.0	17.0	16.4	29.9		5.3	3.6	0.3
Female	0	0	1	0	0	0	2	3	5	5	9	5	10	8	10	12	10	7	87			
	0.0	0.0	0.6	0.0	0.0	0.0	1.1	1.5	2.6	2.7	5.4	3.2	8.3	8.1	11.9	15.5	16.1	12.4		3.4	2.0	0.2
C09, C10 Oropharynx																						
Male	0	0	0	0	0	0	0	1	3	8	12	16	5	7	8	5	2	1	68			
	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.5	1.6	4.4	7.3	10.5	4.2	7.4	10.5	7.7	4.7	3.7		2.7	1.9	0.3
Female	0	0	0	0	0	0	0	0	1	0	2	1	1	2	1	1	1	0	10			
	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.5	0.0	1.2	0.6	0.8	2.0	1.2	1.3	1.6	0.0		0.4	0.3	0.1
C11 Nasopharynx																						
Male	0	0	0	0	1	1	1	2	2	6	4	3	3	1	1	0	0	0	25			
	0.0	0.0	0.0	0.0	0.5	0.6	0.5	1.0	1.1	3.3	2.4	2.0	2.5	1.1	1.3	0.0	0.0	0.0		1.0	0.8	0.2
Female	0	0	0	1	0	1	0	0	1	2	0	2	0	2	1	0	0	0	10			
	0.0	0.0	0.0	0.6	0.0	0.6	0.0	0.0	0.5	1.1	0.0	1.3	0.0	2.0	1.2	0.0	0.0	0.0		0.4	0.3	0.1
C12, C13 Hypopharynx																						
Male	0	0	0	0	0	0	0	0	0	2	4	6	4	3	4	4	1	2	30			
	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	1.1	2.4	3.9	3.3	3.2	5.2	6.2	2.3	7.5		1.2	0.8	0.2
Female	0	0	0	0	0	0	0	0	0	1	0	1	1	0	0	0	0	0	3			
	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.5	0.0	0.6	0.8	0.0	0.0	0.0	0.0	0.0		0.1	0.1	0.1
C09-C13 Pharynx																						
Male	0	0	0	0	1	1	1	3	5	16	20	25	12	11	13	9	3	3	123			
	0.0	0.0	0.0	0.0	0.5	0.6	0.5	1.6	2.7	8.8	12.1	16.4	10.0	11.6	17.0	13.9	7.0	11.2		4.9	3.5	0.3
Female	0	0	0	1	0	1	0	0	2	3	2	4	2	4	2	1	1	0	23			
	0.0	0.0	0.0	0.6	0.0	0.6	0.0	0.0	1.0	1.6	1.2	2.6	1.7	4.0	2.4	1.3	1.6	0.0		0.9	0.7	0.2

Numbers (Blue) and age-specific rates (Black) CR=Crude incidence rate ASR=Age-standardised rate SE=Standard error of ASR All rates are per 100,000

Cancer incidence in Victoria 2006 by age, sex and site

Age	0-4	5-9	10-14	15-19	20-24	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69	70-74	75-79	80-84	85+	Total	CR	ASR	SE
CC15 Oesophagus																						
Male	0	0	0	0	0	0	0	2	3	4	15	22	28	22	27	36	34	13	206			
	0.0	0.0	0.0	0.0	0.0	0.0	0.0	1.0	1.6	2.2	9.1	14.5	23.4	23.1	35.4	55.6	79.6	48.6		8.1	4.9	0.4
Female	0	0	0	0	0	0	0	0	1	0	3	4	2	12	18	19	22	22	103			
	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.5	0.0	1.8	2.6	1.7	12.1	21.4	24.5	35.4	39.0		4.0	1.7	0.2
C16 Stomach																						
Male	0	0	0	0	0	2	1	2	8	8	26	37	38	44	57	50	50	28	351			
	0.0	0.0	0.0	0.0	0.0	1.1	0.5	1.0	4.3	4.4	15.8	24.3	31.8	46.3	74.6	77.2	117.1	104.6		13.9	8.5	0.5
Female	0	0	0	0	0	0	0	6	8	7	17	14	22	20	18	27	31	34	204			
	0.0	0.0	0.0	0.0	0.0	0.0	0.0	3.1	4.2	3.8	10.1	8.9	18.2	20.2	21.4	34.8	49.8	60.2		7.9	4.2	0.3
C17 Small intestine																						
Male	0	0	0	0	0	0	0	1	0	0	4	6	8	8	8	10	4	2	51			
	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.5	0.0	0.0	2.4	3.9	6.7	8.4	10.5	15.4	9.4	7.5		2.0	1.3	0.2
Female	0	0	0	0	1	2	0	2	4	2	2	6	7	7	4	4	3	4	46			
	0.0	0.0	0.0	0.0	0.6	1.1	0.0	1.0	2.2	1.2	1.2	3.8	5.8	7.1	4.8	5.2	4.8	7.1		1.8	1.2	0.2
C18 Colon																						
Male	0	0	0	1	1	2	4	11	13	40	38	93	116	177	192	196	161	98	1,143			
	0.0	0.0	0.0	0.6	0.5	1.1	2.1	5.7	6.9	22.1	23.0	61.1	97.0	186.1	251.4	302.5	376.9	366.0		45.1	27.2	0.8
Female	0	0	0	1	3	1	7	11	21	36	53	82	93	117	127	181	178	168	1,079			
	0.0	0.0	0.0	0.6	1.7	0.6	3.7	5.6	10.9	19.4	31.6	52.3	76.7	118.0	150.8	233.1	286.1	297.7		41.6	21.2	0.7
C19-C21 Rectum																						
Male	1	0	0	0	0	1	10	8	24	23	61	82	112	107	121	128	69	47	794			
	0.6	0.0	0.0	0.0	0.0	0.6	5.4	4.2	12.8	12.7	37.0	53.9	93.6	112.5	158.4	197.5	161.5	175.5		31.3	20.2	0.7
Female	0	0	0	2	0	1	3	2	18	30	36	50	50	61	66	61	67	53	500			
	0.0	0.0	0.0	1.2	0.0	0.6	1.6	1.0	9.4	16.2	21.4	31.9	41.3	61.5	78.4	78.6	107.7	93.9		19.3	11.0	0.5

Numbers (Blue) and age-specific rates (Black) CR=Crude incidence rate ASR=Age-standardised rate SE=Standard error of ASR All rates are per 100,000

Cancer incidence in Victoria 2006 by age, sex and site

Age	0-4	5-9	10-14	15-19	20-24	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69	70-74	75-79	80-84	85+	Total	CR	ASR	SE
C18-C21 Bowel																						
Male	1	0	0	1	1	3	14	19	37	63	99	175	228	284	313	324	230	145	1,937			
	0.6	0.0	0.0	0.6	0.5	1.7	7.5	9.9	19.7	34.8	60.0	115.0	190.6	298.5	409.8	500.0	538.4	541.5		76.4	47.4	1.1
Female	0	0	0	3	3	2	10	13	39	66	89	132	143	178	193	242	245	221	1,579			
	0.0	0.0	0.0	1.8	1.7	1.1	5.3	6.6	20.3	35.6	53.0	84.2	118.0	179.5	229.1	311.6	393.8	391.6		60.9	32.2	0.8
C22 Liver																						
Male	3	0	0	0	0	0	0	2	4	12	23	20	43	31	31	43	18	13	243			
	1.9	0.0	0.0	0.0	0.0	0.0	0.0	1.0	2.1	6.6	13.9	13.1	35.9	32.6	40.6	66.4	42.1	48.6		9.6	6.4	0.4
Female	2	0	0	0	0	0	1	0	2	6	4	8	8	5	13	12	13	8	82			
	1.3	0.0	0.0	0.0	0.0	0.0	0.5	0.0	1.0	3.2	2.4	5.1	6.6	5.0	15.4	15.5	20.9	14.2		3.2	1.8	0.2
C23, C24 Gallbladder																						
Male	0	0	0	0	0	0	1	1	2	2	2	3	5	5	17	5	9	4	56			
	0.0	0.0	0.0	0.0	0.0	0.0	0.5	0.5	1.1	1.1	1.2	2.0	4.2	5.3	22.3	7.7	21.1	14.9		2.2	1.4	0.2
Female	0	0	0	0	0	0	0	0	0	1	8	12	8	15	15	17	12	15	103			
	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.5	4.8	7.7	6.6	15.1	17.8	21.9	19.3	26.6		4.0	2.1	0.2
C25 Pancreas																						
Male	0	0	0	0	0	0	1	1	3	5	16	20	37	48	49	44	41	35	300			
	0.0	0.0	0.0	0.0	0.0	0.0	0.5	0.5	1.6	2.8	9.7	13.1	30.9	50.5	64.2	67.9	96.0	130.7		11.8	7.2	0.4
Female	0	0	0	0	0	0	1	0	2	6	9	17	28	32	36	55	48	46	280			
	0.0	0.0	0.0	0.0	0.0	0.0	0.5	0.0	1.0	3.2	5.4	10.8	23.1	32.3	42.7	70.8	77.2	81.5		10.8	5.2	0.3
C30, C31 Nasal cavities																						
Male	0	0	0	0	0	0	0	0	0	2	5	6	0	3	6	4	2	2	30			
	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	1.1	3.0	3.9	0.0	3.2	7.9	6.2	4.7	7.5		1.2	0.8	0.2
Female	0	0	0	0	0	0	0	0	1	0	0	0	0	1	2	0	2	1	7			
	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.5	0.0	0.0	0.0	0.0	1.0	2.4	0.0	3.2	1.8		0.3	0.1	0.1

Numbers (Blue) and age-specific rates (Black) CR=Crude incidence rate ASR=Age-standardised rate SE=Standard error of ASR All rates are per 100,000

Cancer incidence in Victoria 2006 by age, sex and site

Age	0-4	5-9	10-14	15-19	20-24	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69	70-74	75-79	80-84	85+	Total	CR	ASR	SE
C32 Larynx																						
Male	0	0	0	0	1	0	0	0	1	5	11	16	18	17	19	24	13	4	129			
	0.0	0.0	0.0	0.0	0.5	0.0	0.0	0.0	0.5	2.8	6.7	10.5	15.1	17.9	24.9	37.0	30.4	14.9		5.1	3.2	0.3
Female	0	0	0	0	0	0	0	1	0	0	4	0	1	1	1	3	0	1	12			
	0.0	0.0	0.0	0.0	0.0	0.0	0.5	0.0	0.0	0.0	2.4	0.0	0.8	1.0	1.2	3.9	0.0	1.8		0.5	0.3	0.1
C33, C34 Lung																						
Male	0	0	0	0	0	0	3	10	6	40	66	97	157	216	241	280	235	128	1,479			
	0.0	0.0	0.0	0.0	0.0	0.0	1.6	5.2	3.2	22.1	40.0	63.7	131.2	227.0	315.5	432.1	550.1	478.0		58.3	34.3	0.9
Female	0	0	0	0	4	4	7	16	36	41	82	100	97	128	161	122	101	101	899			
	0.0	0.0	0.0	0.0	2.3	2.1	3.6	8.3	19.4	24.4	52.3	82.5	82.5	97.8	152.0	207.3	196.1	179.0		34.7	18.7	0.6
C40, C41 Bone																						
Male	0	2	0	4	3	1	1	2	4	0	2	1	0	1	2	1	1	2	27			
	0.0	1.2	0.0	2.2	1.6	0.6	0.5	1.0	2.1	0.0	1.2	0.7	0.0	1.1	2.6	1.5	2.3	7.5		1.1	1.0	0.2
Female	0	1	1	2	0	1	0	2	1	0	1	0	2	0	0	0	0	1	12			
	0.0	0.6	0.6	1.2	0.0	0.6	0.0	1.0	0.5	0.0	0.6	0.0	1.7	0.0	0.0	0.0	0.0	1.8		0.5	0.5	0.2
C43 Melanoma																						
Male	0	0	0	6	11	18	36	40	66	78	99	142	135	138	130	149	90	86	1,224			
	0.0	0.0	0.0	3.4	5.9	10.0	19.3	20.8	35.2	43.1	60.0	93.3	112.8	145.1	170.2	229.9	210.7	321.2		48.3	32.6	1.0
Female	0	0	1	4	15	22	52	55	66	84	72	86	100	83	72	100	81	74	967			
	0.0	0.0	0.6	2.4	8.3	12.5	27.4	28.0	34.4	45.3	42.9	54.8	82.5	83.7	85.5	128.8	130.2	131.1		37.3	24.5	0.8
C44 Other skin (excluding squamous cell and basal cell carcinoma)																						
Male	0	0	1	2	0	0	2	2	0	3	2	3	9	12	10	8	7	3	64			
	0.0	0.0	0.6	1.1	0.0	0.0	1.1	1.0	0.0	1.7	1.2	2.0	7.5	12.6	13.1	12.3	16.4	11.2		2.5	1.7	0.2
Female	0	0	0	0	2	0	1	3	1	2	1	1	8	4	3	4	6	8	44			
	0.0	0.0	0.0	0.0	1.1	0.0	0.5	1.5	0.5	1.1	0.6	0.6	6.6	4.0	3.6	5.2	9.6	14.2		1.7	1.0	0.2

Numbers (Blue) and age-specific rates (Black) CR=Crude incidence rate ASR=Age-standardised rate SE=Standard error of ASR All rates are per 100,000

Cancer incidence in Victoria 2006 by age, sex and site

Age	0-4	5-9	10-14	15-19	20-24	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69	70-74	75-79	80-84	85+	Total	CR	ASR	SE
C45 Mesothelioma																						
Male	0	0	0	0	0	0	0	0	2	3	5	10	16	14	13	17	8	8	96			
	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	1.1	1.7	3.0	6.6	13.4	14.7	17.0	26.2	18.7	29.9		3.8	2.4	0.3
Female	0	0	0	0	0	1	0	0	0	0	0	2	3	1	2	3	3	5	20			
	0.0	0.0	0.0	0.0	0.0	0.5	0.0	0.0	0.0	0.0	0.0	1.3	2.5	1.0	2.4	3.9	4.8	8.9		0.8	0.4	0.1
C46 Kaposi sarcoma																						
Male	0	0	0	0	1	1	2	4	0	0	0	2	1	2	2	0	3	2	20			
	0.0	0.0	0.0	0.0	0.6	0.5	1.0	2.1	0.0	0.0	0.0	1.3	0.8	2.1	2.6	0.0	7.0	7.5		0.8	0.5	0.2
Female	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	3	3			
	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	5.3		0.1	0.0	0.0
C48 Peritoneum																						
Male	1	0	0	0	0	1	0	0	1	0	0	0	1	1	1	2	0	0	7			
	0.6	0.0	0.0	0.0	0.0	0.5	0.0	0.5	0.0	0.0	0.0	0.0	0.8	1.1	1.3	3.1	0.0	0.0		0.3	0.2	0.1
Female	3	0	0	0	1	0	1	0	1	2	0	1	2	4	5	1	3	0	23			
	1.9	0.0	0.0	0.0	0.5	0.0	0.5	0.0	0.5	1.1	0.0	0.6	1.7	4.0	5.9	1.3	4.8	0.0		0.9	0.7	0.2
C47- C49 Connective tissue																						
Male	0	2	1	1	2	1	4	3	2	6	6	8	6	6	12	14	10	8	92			
	0.0	1.2	0.6	0.6	1.1	0.6	2.1	1.6	1.1	3.3	3.6	5.3	5.0	6.3	15.7	21.6	23.4	29.9		3.6	2.4	0.3
Female	3	0	3	0	5	3	4	3	4	4	7	6	9	8	4	7	5	7	82			
	1.9	0.0	1.8	0.0	2.8	1.7	2.1	1.5	2.1	2.2	4.2	3.8	7.4	8.1	4.8	9.0	8.0	12.4		3.2	2.4	0.3
C50 Breast																						
Male	0	0	0	1	0	0	0	1	1	0	2	2	2	2	3	4	2	2	22			
	0.0	0.0	0.0	0.6	0.0	0.0	0.0	0.5	0.5	0.0	1.2	1.3	1.7	2.1	3.9	6.2	4.7	7.5		0.9	0.6	0.1
Female	0	0	0	0	4	22	46	128	261	339	371	415	383	338	280	228	179	188	3,182			
	0.0	0.0	0.0	0.0	2.2	12.5	24.2	65.1	136.0	182.9	221.0	264.6	316.0	340.8	332.4	293.6	287.7	333.1		122.8	82.9	1.5

Numbers (Blue) and age-specific rates (Black) CR=Crude incidence rate ASR=Age-standardised rate SE=Standard error of ASR All rates are per 100,000

Cancer incidence in Victoria 2006 by age, sex and site

Age	0-4	5-9	10-14	15-19	20-24	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69	70-74	75-79	80-84	85+	Total	CR	ASR	SE
C53 Cervix																						
Female	0	0	0	0	1	9	16	23	19	10	10	10	16	11	10	4	10	7	160			
	0.0	0.0	0.0	0.0	0.6	5.1	8.4	11.7	9.9	5.4	8.3	6.4	13.2	11.1	11.9	5.2	16.1	12.4		6.2	4.5	0.4
C54, C55 Uterus																						
Female	0	0	0	0	0	2	6	8	10	32	51	72	69	70	57	52	29	28	486			
	0.0	0.0	0.0	0.0	0.0	1.1	3.2	4.1	5.2	17.3	30.4	45.9	56.9	70.6	67.7	67.0	46.6	49.6		18.8	12.1	0.6
C56 Ovary																						
Female	0	0	1	1	3	1	8	9	18	27	29	41	30	55	32	31	29	28	343			
	0.0	0.0	0.6	0.6	1.7	0.6	4.2	4.6	9.4	14.6	17.3	26.1	24.8	55.5	38.0	39.9	46.6	49.6		13.2	8.5	0.5
C51, C52, C57 Vulva etc																						
Female	0	0	0	0	0	0	0	1	7	9	7	7	13	15	13	10	11	18	111			
	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.5	3.7	4.9	4.2	4.5	10.7	15.1	15.4	12.9	17.7	31.9		4.3	2.5	0.3
C61 Prostate																						
Male	0	0	0	0	0	0	0	2	10	45	204	490	725	794	706	588	380	296	4,240			
	0.0	0.0	0.0	0.0	0.0	0.0	0.0	1.0	5.3	24.9	123.7	321.9	606.0	834.6	924.2	907.4	889.6	1105.3		167.3	107.7	1.7
C62 Testis																						
Male	1	0	2	4	11	30	31	25	21	11	10	2	4	0	1	1	0	0	154			
	0.6	0.0	1.2	2.2	5.9	16.7	16.6	13.0	11.2	6.1	6.1	1.3	3.3	0.0	1.3	1.5	0.0	0.0		6.1	5.5	0.5
C60, C63 Penis etc																						
Male	0	0	0	0	0	0	0	1	2	1	0	2	2	4	4	3	2	3	24			
	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.5	1.1	0.6	0.0	1.3	1.7	4.2	5.2	4.6	4.7	11.2		1.0	0.6	0.2

Numbers (Blue) and age-specific rates (Black) CR=Crude incidence rate ASR=Age-standardised rate SE=Standard error of ASR All rates are per 100,000

Cancer incidence in Victoria 2006 by age, sex and site

Age	0-4	5-9	10-14	15-19	20-24	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69	70-74	75-79	80-84	85+	Total	CR	ASR	SE	
C64 Kidney																							
Male	2	1	0	0	1	4	9	20	28	28	44	61	49	49	45	34	18	393					
	1.2	0.6	0.0	0.0	0.6	2.1	4.7	10.7	15.5	17.0	28.9	51.0	51.5	64.2	69.4	79.6	67.2		15.5	10.5	0.6		
Female	2	0	2	0	1	2	2	6	9	11	23	20	27	38	27	20	216						
	1.3	0.0	1.2	0.0	0.6	1.1	1.0	3.1	4.9	6.6	14.7	16.5	27.2	29.7	48.9	43.4	35.4		8.3	4.8	0.3		
C67 Bladder																							
Male	1	0	0	1	0	0	0	3	2	3	16	35	40	55	58	80	65	57	416				
	0.6	0.0	0.0	0.6	0.0	0.0	0.0	1.6	1.1	1.7	9.7	23.0	33.4	57.8	75.9	123.5	152.2	212.9		16.4	9.4	0.5	
Female	0	0	0	0	0	1	1	0	2	5	5	6	14	13	19	23	34	123					
	0.0	0.0	0.0	0.0	0.0	0.5	0.5	0.0	1.1	3.0	3.2	5.0	14.1	15.4	24.5	37.0	60.2		4.8	2.1	0.2		
C65, C66, C68 Renal pelvis etc																							
Male	0	0	0	0	0	0	0	0	1	1	2	1	5	2	7	13	11	6	49				
	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.5	0.6	1.2	0.7	4.2	2.1	9.2	20.1	25.8	22.4		1.9	1.0	0.2	
Female	0	0	0	0	0	0	0	0	0	0	0	1	2	6	11	6	8	7	41				
	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.6	1.7	6.1	13.1	7.7	12.9	12.4		1.6	0.7	0.1	
C69 Eye																							
Male	4	1	0	0	0	1	0	0	0	3	0	5	2	3	2	3	4	5	33				
	2.5	0.6	0.0	0.0	0.0	0.6	0.0	0.0	0.0	1.7	0.0	3.3	1.7	3.2	2.6	4.6	9.4	18.7		1.3	1.0	0.2	
Female	0	0	0	0	0	2	1	2	0	2	2	1	4	3	3	3	3	3	29				
	0.0	0.0	0.0	0.0	0.0	1.1	0.5	1.0	0.0	1.1	1.2	0.6	3.3	3.0	3.6	3.9	4.8	5.3		1.1	0.7	0.2	
C70-C72 Brain & CNS																							
Male	8	2	3	2	2	5	6	9	15	14	14	29	22	33	26	19	11	4	224				
	4.9	1.2	1.7	1.1	1.1	2.8	3.2	4.7	8.0	7.7	8.5	19.1	18.4	34.7	34.0	29.3	25.8	14.9		8.8	6.8	0.5	
Female	2	6	3	3	3	4	6	6	10	8	10	18	24	16	13	15	13	8	168				
	1.3	3.8	1.8	1.8	1.7	2.3	3.2	3.1	5.2	4.3	6.0	11.5	19.8	16.1	15.4	19.3	20.9	14.2		6.5	4.8	0.4	

Numbers (Blue) and age-specific rates (Black) CR=Crude incidence rate ASR=Age-standardised rate SE=Standard error of ASR All rates are per 100,000

Cancer incidence in Victoria 2006 by age, sex and site

Age	0-4	5-9	10-14	15-19	20-24	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69	70-74	75-79	80-84	85+	Total	CR	ASR	SE
C73 Thyroid																						
Male	0	0	0	3	0	3	3	4	6	3	5	11	6	5	5	4	3	1	62			
	0.0	0.0	0.0	1.7	0.0	1.7	1.6	2.1	3.2	1.7	3.0	7.2	5.0	5.3	6.6	6.2	7.0	3.7		2.5	1.8	0.3
Female	0	0	0	3	7	9	26	24	27	25	23	25	30	14	6	9	12	4	244			
	0.0	0.0	0.0	1.8	3.9	5.1	13.7	12.2	14.1	13.5	13.7	15.9	24.8	14.1	7.1	11.6	19.3	7.1		9.4	7.2	0.5
C74, C75 Other endocrine																						
Male	1	3	2	1	1	0	1	0	0	1	1	1	2	1	0	0	1	0	16			
	0.6	1.8	1.2	0.6	0.5	0.0	0.5	0.0	0.0	0.6	0.6	0.7	1.7	1.1	0.0	0.0	2.3	0.0		0.6	0.7	0.2
Female	1	1	0	0	0	0	0	0	1	2	2	0	0	0	0	1	2	1	11			
	0.7	0.6	0.0	0.0	0.0	0.0	0.0	0.0	0.5	1.1	1.2	0.0	0.0	0.0	0.0	1.3	3.2	1.8		0.4	0.3	0.1
C80 Unspecified site																						
Male	0	1	0	0	1	1	0	2	2	8	12	21	31	29	30	44	58	43	283			
	0.0	0.6	0.0	0.0	0.5	0.6	0.0	1.0	1.1	4.4	7.3	13.8	25.9	30.5	39.3	67.9	135.8	160.6		11.2	6.4	0.4
Female	0	0	0	0	1	0	0	3	5	9	11	17	21	16	40	46	64	96	329			
	0.0	0.0	0.0	0.0	0.6	0.0	0.0	1.5	2.6	4.9	6.6	10.8	17.3	16.1	47.5	59.2	102.9	170.1		12.7	5.4	0.3
C81 Hodgkin lymphoma																						
Male	0	4	3	10	12	9	8	10	7	2	3	3	3	4	0	3	1	0	82			
	0.0	2.4	1.7	5.6	6.4	5.0	4.3	5.2	3.7	1.1	1.8	2.0	2.5	4.2	0.0	4.6	2.3	0.0		3.2	3.1	0.4
Female	0	0	4	10	10	6	9	10	1	3	1	9	4	1	3	2	0	0	73			
	0.0	0.0	2.4	5.9	5.5	3.4	4.7	5.1	0.5	1.6	0.6	5.7	3.3	1.0	3.6	2.6	0.0	0.0		2.8	2.7	0.4
C82 Nodular NHL																						
Male	0	0	0	0	0	0	2	2	9	11	15	17	14	15	7	17	6	8	123			
	0.0	0.0	0.0	0.0	0.0	0.0	1.1	1.0	4.8	6.1	9.1	11.2	11.7	15.8	9.2	26.2	14.1	29.9		4.9	3.3	0.3
Female	0	0	0	1	0	0	3	5	6	3	6	15	12	13	10	7	7	12	100			
	0.0	0.0	0.0	0.6	0.0	0.0	1.6	2.5	3.1	1.6	3.6	9.6	9.9	13.1	11.9	9.0	11.3	21.3		3.9	2.4	0.3

Numbers (Blue) and age-specific rates (Black) CR=Crude incidence rate ASR=Age-standardised rate SE=Standard error of ASR All rates are per 100,000

Cancer incidence in Victoria 2006 by age, sex and site

Age	0-4	5-9	10-14	15-19	20-24	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69	70-74	75-79	80-84	85+	Total	CR	ASR	SE
C83 Diffuse NHL																						
Male	1	2	0	5	3	4	3	10	14	19	22	23	37	37	27	31	32	14	284			
	0.6	1.2	0.0	2.8	1.6	2.2	1.6	5.2	7.5	10.5	13.3	15.1	30.9	38.9	35.4	47.8	74.9	52.3		11.2	7.7	0.5
Female	1	1	0	1	2	1	6	7	3	8	15	21	30	27	26	38	32	24	243			
	0.7	0.6	0.0	0.6	1.1	0.6	3.2	3.6	1.6	4.3	8.9	13.4	24.8	27.2	30.9	48.9	51.4	42.5		9.4	5.5	0.4
C84 T-cell lymphoma																						
Male	0	0	1	0	2	0	0	0	0	0	2	1	1	3	4	3	1	1	19			
	0.0	0.0	0.6	0.0	1.1	0.0	0.0	0.0	0.0	0.0	1.2	0.7	0.8	3.2	5.2	4.6	2.3	3.7		0.8	0.5	0.2
Female	0	0	0	0	0	0	0	0	1	0	1	1	2	2	0	2	2	0	11			
	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.5	0.0	0.6	0.6	1.7	2.0	0.0	2.6	3.2	0.0		0.4	0.3	0.1
C85 Other NHL																						
Male	0	0	0	0	2	1	3	3	5	9	8	18	12	18	15	19	13	12	138			
	0.0	0.0	0.0	0.0	1.1	0.6	1.6	1.6	2.7	5.0	4.9	11.8	10.0	18.9	19.6	29.3	30.4	44.8		5.4	3.5	0.3
Female	0	0	0	1	0	0	2	1	1	5	4	8	8	10	16	19	11	16	102			
	0.0	0.0	0.0	0.6	0.0	0.0	1.1	0.5	0.5	2.7	2.4	5.1	6.6	10.1	19.0	24.5	17.7	28.4		3.9	2.1	0.2
C82-C85 Non-Hodgkin lymphoma																						
Male	1	2	1	5	7	5	8	15	28	39	47	59	64	73	53	70	52	35	564			
	0.6	1.2	0.6	2.8	3.7	2.8	4.3	7.8	14.9	21.6	28.5	38.8	53.5	76.7	69.4	108.0	121.7	130.7		22.3	15.1	0.7
Female	1	1	0	3	2	1	11	13	11	16	26	45	52	52	52	66	52	52	456			
	0.7	0.6	0.0	1.8	1.1	0.6	5.8	6.6	5.7	8.6	15.5	28.7	42.9	52.4	61.7	85.0	83.6	92.1		17.6	10.2	0.5
C90 Multiple myeloma																						
Male	0	0	0	0	0	0	0	1	5	8	14	18	13	28	25	33	26	13	184			
	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.5	2.7	4.4	8.5	11.8	10.9	29.4	32.7	50.9	60.9	48.6		7.3	4.4	0.3
Female	0	0	0	0	0	0	0	1	0	4	7	16	13	19	19	30	18	21	148			
	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.5	0.0	2.2	4.2	10.2	10.7	19.2	22.6	38.6	28.9	37.2		5.7	3.0	0.3

Numbers (Blue) and age-specific rates (Black) CR=Crude incidence rate ASR=Age-standardised rate SE=Standard error of ASR All rates are per 100,000

Cancer incidence in Victoria 2006 by age, sex and site

Age	0-4	5-9	10-14	15-19	20-24	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69	70-74	75-79	80-84	85+	Total	CR	ASR	SE
C91 Lymphoid leukaemia																						
Male	12	5	10	2	2	1	1	3	3	5	10	10	17	19	26	21	18	19	184			
	7.4	3.0	5.8	1.1	1.1	0.6	0.5	1.6	1.6	2.8	6.1	6.6	14.2	20.0	34.0	32.4	42.1	71.0		7.3	5.6	0.4
Female	8	8	0	1	3	0	0	1	2	0	8	4	9	3	18	9	10	23	107			
	5.2	5.1	0.0	0.6	1.7	0.0	0.0	0.5	1.0	0.0	4.8	2.6	7.4	3.0	21.4	11.6	16.1	40.8		4.1	3.0	0.3
C92 Myeloid leukaemia																						
Male	2	1	1	2	5	3	5	9	6	6	6	11	18	12	21	34	31	17	190			
	1.2	0.6	0.6	1.1	2.7	1.7	2.7	4.7	3.2	3.3	3.6	7.2	15.1	12.6	27.5	52.5	72.6	63.5		7.5	4.8	0.4
Female	2	3	1	3	5	5	3	7	5	9	7	11	9	12	11	17	17	28	155			
	1.3	1.9	0.6	1.8	2.8	2.8	1.6	3.6	2.6	4.9	4.2	7.0	7.4	12.1	13.1	21.9	27.3	49.6		6.0	3.8	0.3
C91-C95 All leukaemia																						
Male	14	6	11	4	7	4	6	12	10	11	16	21	35	32	49	57	51	39	385			
	8.6	3.6	6.4	2.2	3.7	2.2	3.2	6.3	5.3	6.1	9.7	13.8	29.3	33.6	64.2	88.0	119.4	145.6		15.2	10.6	0.6
Female	11	11	1	4	8	5	3	8	7	9	17	17	19	17	33	26	27	53	276			
	7.1	7.0	0.6	2.4	4.4	2.8	1.6	4.1	3.7	4.9	10.1	10.8	15.7	17.1	39.2	33.5	43.4	93.9		10.7	7.1	0.5
D45-D47 Myeloproliferative & myelodysplastic																						
Male	0	1	0	0	1	1	3	6	3	2	8	18	25	22	39	61	59	51	300			
	0.0	0.6	0.0	0.0	0.5	0.6	1.6	3.1	1.6	1.1	4.9	11.8	20.9	23.1	51.1	94.1	138.1	190.5		11.8	6.4	0.4
Female	2	0	0	2	1	0	2	6	2	9	5	8	18	13	30	35	42	52	227			
	1.3	0.0	0.0	1.2	0.6	0.0	1.1	3.1	1.0	4.9	3.0	5.1	14.9	13.1	35.6	45.1	67.5	92.1		8.8	4.2	0.3
C00-C96, D45-D47 All malignant tumours																						
Male	37	25	25	45	65	89	140	203	289	446	819	1,395	1,825	2,041	2,056	2,088	1,547	1,085	14,220			
	22.8	15.1	14.5	25.2	34.8	49.6	75.0	105.7	153.9	246.4	496.5	916.3	1525.4	2145.3	2691.5	3222.1	3621.4	4051.7		560.9	360.7	3.1
Female	30	20	18	36	67	96	216	342	539	746	868	1,114	1,188	1,173	1,183	1,306	1,176	1,197	11,315			
	19.4	12.8	11.0	21.2	36.9	54.4	113.8	173.9	280.9	402.4	516.9	710.3	980.2	1182.7	1404.4	1681.8	1890.3	2120.9		436.6	266.0	2.5

Numbers (Blue) and age-specific rates (Black) CR=Crude incidence rate ASR=Age-standardised rate SE=Standard error of ASR All rates are per 100,000

Indices of data quality

¹ Muir C, Waterhouse J, Mack T, et al. *Cancer Incidence in Five Continents Vol V. IARC Scientific Publication No 88. Lyon: International Agency for Research on Cancer, 1987.*

Three indices of data quality are shown in the following table. These indices, as defined in *Cancer Incidence in Five Continents Vol. V*¹, are

Death certificate only (DCO%) – the proportion of cases registered for which no information was available other than a statement on the death certificate that the deceased died from or with cancer. A high DCO% suggests incomplete incidence notification, and such diagnoses may be less accurate. Registry staff seek additional information for cancers first notified by death certificate to identify possible missed registrations. If no further information is available, the cancer is registered as DCO on the basis of information provided on the death certificate. For DCO cases, the date of diagnosis is taken as the date of death.

Histological verification (HV%) – the proportion of cases registered which had histological verification of diagnosis. A low HV% suggests incomplete registration of pathology reports and consequently poorer verification of diagnoses and incomplete registration of cancers for which this is often the only source of notification, such as melanoma. The higher the HV% for cancers of less accessible sites, like brain and pancreas, the more confident one can be that the neoplasm existed and that it was primary rather than metastatic.

The mortality to incidence ratio (M/I%) – ratio of the number of deaths attributed to a specific cancer with the number of new cases of the same cancer diagnosed during the same period in the same population. If registration is complete and the incidence of the cancer is not changing rapidly, the mortality to incidence ratio should reflect long-term survival. If survival rates are comparable in two populations, a more complete case ascertainment is suggested by a lower M/I% .

Cancer site	DCO (%)	HV (%)	M/I (%)
All malignant tumours	2.8	91	38
Head & neck	1.0	96	27
Oesophagus	1.0	92	95
Stomach	2.3	94	60
Bowel	1.8	93	29
Liver	4.9	46	86
Gallbladder	3.1	77	35
Pancreas	9.0	56	88
Lung	4.9	79	75
Melanoma	0.3	99	13
Breast	1.6	98	20
Cervix	0.6	98	23
Uterus	1.0	98	17
Ovary	3.8	87	64
Prostate	2.0	95	18
Testis	0.0	95	1
Kidney	2.0	84	32
Bladder	1.5	91	40
Brain & CNS	2.0	86	77
Thyroid	1.0	98	9
Unspecified site	12.7	59	119
Lymphoma	1.6	98	31
Multiple myeloma	4.5	95	58
Leukaemia	7.1	93	59

Demography

Population

In 2006, the population of Victoria was 5,022,346 making it the second most populous state after New South Wales. One in four Australians live in Victoria with nearly three-quarters of these in Metropolitan Melbourne. Most of the remainder live in small provincial cities with only 0.1% in remote areas.

At the 2006 census, the indigenous population was 30,141 making up 0.6% of the Victorian population and 7% of the national Indigenous population.

Victoria has an area of 227,420 km² and makes up less than 3% of the Australian continent. It is the most densely populated state with an average population density of 23 persons per km² (Australia 2.7 persons per km²) ranging from below 2 per km² in the Wimmera to over 6,000 per km² in central Melbourne.

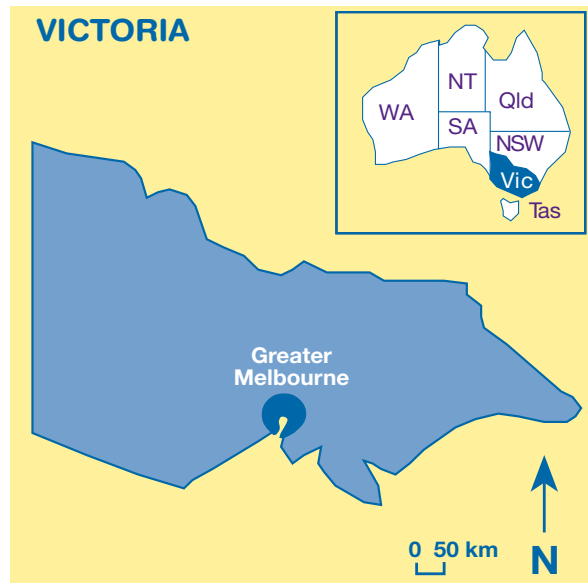
Age and sex

The age-sex distribution is illustrated opposite. Although the shape of its pyramid has been modified by its immigrant history, Victoria has the type of population distribution expected in a country of late demographic transition. With a declining birth rate, a steady ageing of the population is occurring and the pyramid will become increasingly rectangular as more people survive to older ages and the younger strata are not replaced.

In 2006, 19% of Victorians were aged under 15 years and 14% over 65 years. By 2021 these proportions are expected to be 16% aged less than 15 years and 19% over 65 years.

Ethnicity

At the 2006 census, 26% of the population (1,173,206 persons) was



described as overseas born. Of these migrants, 30% were from Asia (Vietnam 5%, China 5%, India 5%, Sri Lanka 3%, Malaysia 3%), 21% from Southern Europe (Italy 7%, Greece 5%), 18% from Great Britain, 10% from the rest of Europe and the USSR, 6% from the Middle East, 6% from New Zealand with smaller numbers from South and North America, Africa and Oceania.

Vital statistics

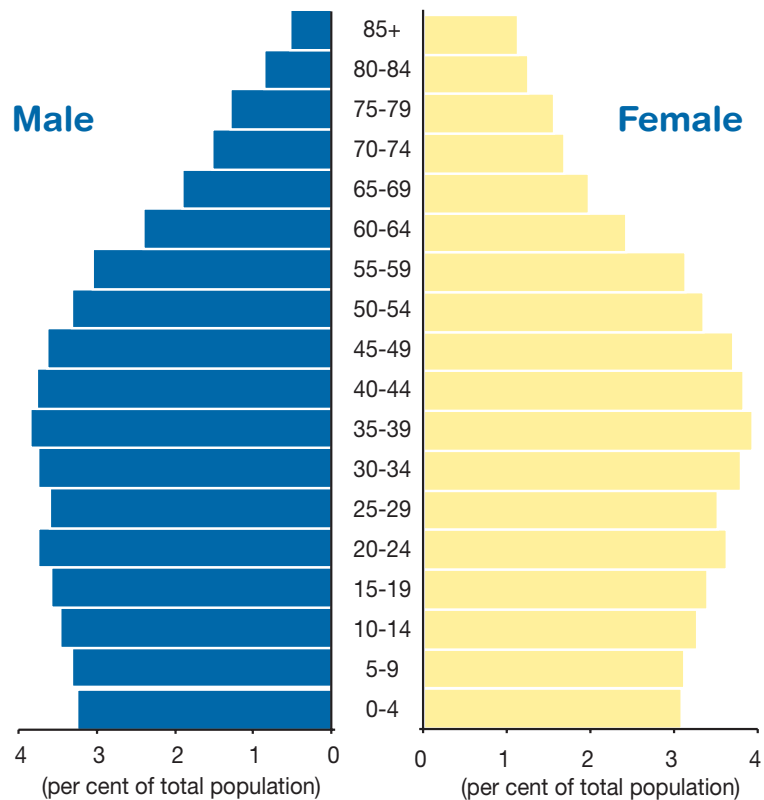
The birth rate has been steadily declining since the early 1970s. In 2006, the crude rate was 12.4 per 1,000 population.

Life expectancy at birth was, in 2004–2006, 79.3 years for males and 83.7 for females. Since 1981 this has increased by 8 and 5 years in males and females respectively.

There were 33,326 deaths of Victorian residents in 2006. Male deaths (16,679) slightly outnumber female (16,647).

Cancer caused 29.7% of all deaths, ischaemic heart disease 16.6%, cerebrovascular disease 7.8%, chronic lower respiratory disease 4.2%, diabetes 3.3%, suicide 1.3% and transport accidents 1.2%.

Population, Victoria



Age	Males	Females	Persons
0-4	162,172	154,399	316,571
5-9	165,174	156,255	321,429
10-14	172,685	163,666	336,351
15-19	178,464	169,714	348,178
20-24	187,022	181,611	368,633
25-29	179,458	176,485	355,943
30-34	186,581	189,767	376,348
35-39	192,140	196,645	388,785
40-44	187,725	191,895	379,620
45-49	180,985	185,370	366,355
50-54	164,964	167,908	332,872
55-59	152,236	156,844	309,080
60-64	119,638	121,194	240,832
65-69	95,137	99,179	194,316
70-74	76,388	84,234	160,622
75-79	64,802	77,657	142,459
80-84	42,718	62,212	104,930
85+	26,779	56,437	83,216
Total	2,535,068	2,591,472	5,022,346

Source: Australian Bureau of Statistics. Population by age and sex: Australian states and territories. (Cat. No. 3201.0)

Victorian Cancer Registry publications

Canstats

Annual Victorian Cancer Registry statistical reports were produced for the years 1982–1990. From 1991–2005 these annual data are published in the Canstat series.

Other Canstat titles include:

- Cancer in Adolescents and Young Adults
- Prostate Cancer
- Testicular Cancer
- Trends in Cancer Mortality, Australia 1910–1999
- Lung Cancer
- A Guide to the Victorian Cancer Registry
- Breast Cancer
- Skin Cancer
- Ovarian Cancer

Reports

English D, Farrugia H, Thursfield V, Chang P, Giles G. April 2007. Cancer Survival Victoria 2007. Estimates of survival in 2004 (and comparison with earlier periods)

All publications are available for download, in pdf format, from our website at : www.cancervic.org.au/canstats

To receive e-mail notification of new Canstat editions for viewing or download from our website, please e-mail us your details.

We are attempting to minimise paper use and costs by reducing the mailing of printed Canstats. However, if you do not have access to e-mail or our on-line publications we will be happy to post copies to you if you tick the box and fax or post us the coupon.

Cancer Council Victoria is an independent volunteer-based charity which relies on public support to maintain vital education and patient welfare programs and to fund major scientific and behavioural research projects.

This task is made possible by the generosity of Victorians, a staff of over 350 and the commitment of over 20,000 volunteers and supporters.

Canstat

A digest of facts and figures on cancer published by Cancer Council Victoria's Cancer Epidemiology Centre

Name

Position held

E-mail:

Or please post hard copy to:

Address

..... Postcode ...

Return to: Cancer Epidemiology Centre
Cancer Council Victoria
1 Rathdowne Street
Carlton Victoria 3053
Australia
Fax: (03) 9635 5330
Email: cec@cancervic.org.au