

Victorian Cancer Registry

Cancer Facts

Number 14 - August 2018



Cancer in Aboriginal Victorians

Note: in this document we use the term Aboriginal Victorians to also include people of Torres Strait Island descent.

The estimated Victorian Aboriginal population in 2016 was 47,788, making up 0.8% of the Victorian total population and 7% of the national Aboriginal population.

Here we provide cancer statistics for Aboriginal Victorians comparing them with those for non-Aboriginal Victorians. Please see section overleaf on data sources.

How common is cancer in Aboriginal Victorians?

Cancer rates presented for Aboriginal Victorians are based on small numbers of cases, even when aggregated across the five year period 2011-2015. As a result, random fluctuations are to be expected across time periods and comparisons should be made with due consideration.

National figures are available from the Australian Institute of Health and Welfare - these provide a more robust overview of the cancer experience of Aboriginal Australians¹.

There were 697 cancer diagnoses reported for Aboriginal Victorians in the five-year period 2011-2015 inclusive, an average of 139 new diagnoses each year. Slightly more diagnoses were made for women (51%) than for men (49%).

Overall incidence rates were more than one-third higher for Aboriginal Victorians (453.6 and 377.5 new cases per 100,000 Aboriginal men and women respectively) than for non-Aboriginal Victorians (347.2 and 282.1 new cases per 100,000 non-Aboriginal men and women, respectively).

Which cancers are common in Aboriginal Victorians?

The most common cancers for Aboriginal Victorians were lung, breast, bowel and prostate cancer. Figure 1 shows the fifteen most common cancers for Aboriginal Victorians compared with Victorians of other descent, as a percentage of total cancers.

Of these more common cancers, rates were significantly higher for both Aboriginal men and women for cancers of the lung, liver, head and neck and unknown primary; for Aboriginal women they were higher for cancers of the cervix and bladder. Incidence rates were significantly lower for melanoma. For cancers in which rates were higher in Aboriginal Victorians, the excess was consistently more than two-fold for both men and women. For example, the rate ratios of Aboriginal to non-Aboriginal were 2.3 and 3.4 for lung cancer in men and women, respectively; 3.1 and 3.5 for liver cancer; 3.9 and 4.0 for head and neck cancers, and 2.2 for cervix cancer.

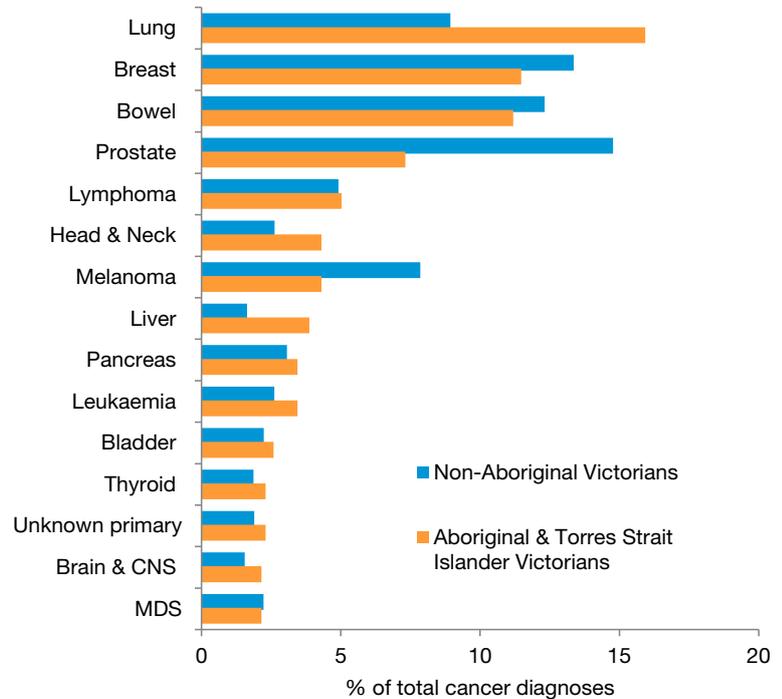


Figure 1: Most common types of cancer for Aboriginal and non-Aboriginal Victorians, 2011-2015

These figures, based on new data sources, show greater numbers of deaths and diagnoses than have been previously reported, and provide more accurate data to support cancer control initiatives in the Victorian Aboriginal population.

For Aboriginal Victorians:

- There are nearly 140 new diagnoses of cancer each year
- There are an average of 73 cancer-related deaths each year
- Cancer incidence and mortality rates were significantly higher, in both men and women, than in non-Aboriginal Victorians
- Incidence rates were higher for lung, liver, head and neck and unknown primary cancers (men and women) and cancers of the cervix and bladder (women) than for non-Aboriginal Victorians
- Mortality rates in Aboriginal Victorians were higher by 85% for men and 75% for women than in non-Aboriginal Victorians

The Cancer Council Victoria acknowledges the support of the Victorian Government.



Cancer incidence by age group

Figure 2 shows age-specific incidence curves for Victorian Aboriginal and non-Aboriginal men and women for the five year period 2011-2015. Cancer incidence rates were higher in Aboriginal Victorians from the fifth decade of life for women, and sixth decade for men, with the gap widening with increasing age. Rates for Aboriginal men and women aged over 70 years were one-third higher than those for non-Aboriginal Victorians.

What are the outcomes for Aboriginal Victorians with cancer?

There were 364 cancer deaths of Aboriginal Victorians in the five years 2011-2015 inclusive, an average of 73 deaths each year. Mortality was slightly higher for men (56%) than for women (44%).

Overall mortality rates were significantly higher for both Aboriginal men and women (200.2 and 133.0 deaths per 100,000, respectively) than for non-Aboriginal men and women (108.2 and 75.7 deaths per 100,000 men and women, respectively).

National figures showed that five-year survival was 40% for Aboriginal Australians diagnosed with cancer between 1999 and 2007, which was lower than non-Aboriginal Australians (52%)¹.

Why do rates differ for some cancers between Aboriginal peoples and other Victorians?

The cancers for which Aboriginal Victorians have relatively higher incidence rates, compared with non-Aboriginal Victorians, are associated mostly with lifestyle risk factors (Figure 1 previous page).

The greater mortality rates experienced by Aboriginal Victorians may be associated with diagnoses occurring at more advanced disease stage. This could reflect problems around timely access to treatment and lower participation in cancer screening services.

What do we know about the causes of cancer for Aboriginal peoples?

The cancers for which Aboriginal Victorians have higher incidence rates, compared with non-Aboriginal Victorians, largely reflect higher prevalence of cancer-related modifiable risk factors¹ such as:

- Cervical cancer: A contributing factor to the higher rates in Aboriginal women could be higher prevalence of HPV infection and lower rates of cervical screening.
- Lung, head and neck, and bladder cancer: The prevalence of smoking among Aboriginal Australians is higher than for non-Aboriginal Australians (38% compared with 18%).
- Liver cancer: This population group experiences higher rates of risky alcohol consumption and higher prevalence of hepatitis B infection.

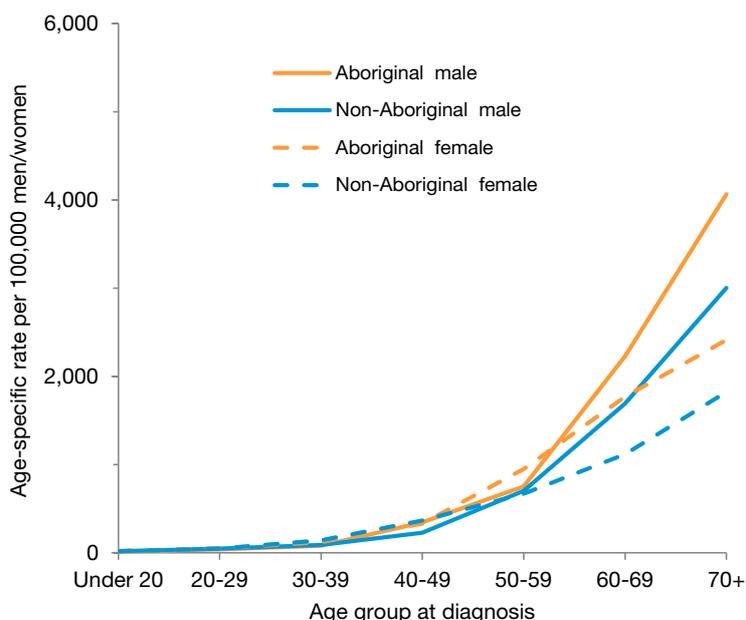


Figure 2: Age-specific cancer incidence rates by sex for Aboriginal and non-Aboriginal Victorians, 2011-2015

Note regarding data sources

The Cancer Outcomes Act (2014) transferred custodianship of the Victorian Cancer Registry (VCR) to the Secretary of the Department of Health and Human Services, Victoria. This change has enabled VCR to augment the Aboriginal status data reported by hospitals for admissions relating to cancer (previously our only source of data for living Victorians) with additional information from other administrative health datasets. This has identified nearly 100 more Aboriginal or Torres Strait Islander Victorians amongst all persons diagnosed with cancers in 2011-2015 (150,000 tumours), representing a 16% increase in cancer incidence for this period relative to that previously reported. Mortality figures changed very little as Aboriginal status is notified to VCR on death certificates. Figures presented in this report replace all previously published figures for 2011-2015 (in Cancer in Victoria 2015).

These improved data highlight the difficulties in accurately collecting Indigenous status through routine VCR reporting channels, and supports the use of multiple data sources - an individual may be identified in one or more health-related episodes or institutions, and business rules have been established to determine their status for analysis using these sources.

Reference

1. Australian Institute of Health and Welfare & Cancer Australia 2013. Cancer in Aboriginal peoples of Australia: an overview. Cancer series no.78. Cat. no. CAN 75. Canberra: AIHW.

For more information about Victorian cancer statistics:

www.cancervic.org.au/about-our-research/registry-statistics/statistics-data

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Victorian Cancer Registry. Cancer Facts: Cancer in Aboriginal Victorians. August 2018.