

Skin Cancer Hub Information to support prevention and early diagnosis



# Malignant melanoma: incidence, mortality and survival rates in the London Strategic Health Authority and England

### May 2012

This factsheet presents data for ICD-10 C43 "Malignant melanoma of skin". The latest available incidence, mortality and survival data have been used.

### **Incidence** rates

The 3-year average age-standardised incidence rate of malignant melanoma in London Strategic Health Authority (SHA) for males and females followed a similar trend as the rate for England: an increase in incidence over the last 20 years. However, in London SHA the rate of increase was lower than England. During this time, London SHA had a lower incidence than England. In 2007–09, the 3-year average age-standardised incidence rate of malignant melanoma for males was 10.9 (London SHA) and 15.8 (England) per 100,000 population and for females the rate was 10.5 (London SHA) and 16.3 (England) per 100,000 population. From 1985–87 to 1993–95, the 3-year average age-standardised incidence rate was lower for males than for females.

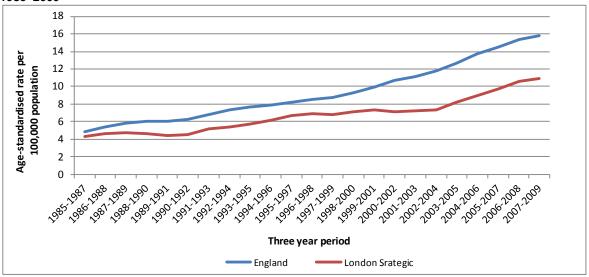


Figure 1: Malignant melanoma – 3-year average age-standardised incidence rates for males, 1985–2009

Source: UK Cancer Intelligence Service (UKCIS)



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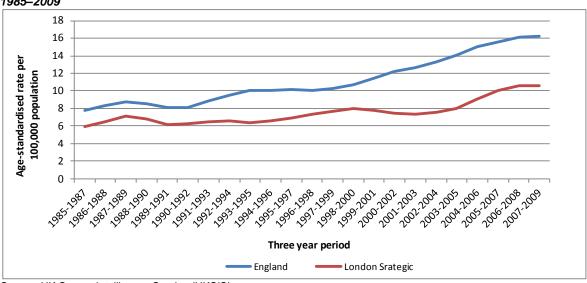


Figure 2: Malignant melanoma – 3-year average age-standardised incidence rates for females, 1985–2009

Source: UK Cancer Intelligence Service (UKCIS)

#### **Mortality rates**

The 3-year average age-standardised mortality rate from malignant melanoma in London SHA for males and females followed a similar trend as the rate for England over the last 20 years: for males the rate increased though there were fluctuations in the SHA rate, and for females it stayed constant. In 2008–10, the mortality rate in London SHA was lower than the England rate in males and females. In 2007–09 the 3-year average age-standardised mortality rate from malignant melanoma for males was 2.6 (London SHA) and 3.2 (England) per 100,000 population, and for females the rate was 1.6 (London SHA) and 2.1 (England) per 100,000 population. From 1993–95, generally the age-standardised mortality rate was higher for males than females.

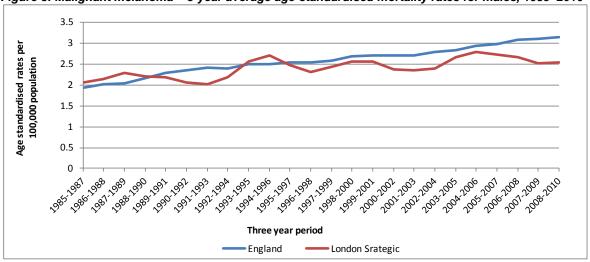


Figure 3: Malignant melanoma – 3-year average age-standardised mortality rates for males, 1985–2010

Source: UK Cancer Intelligence Service (UKCIS)

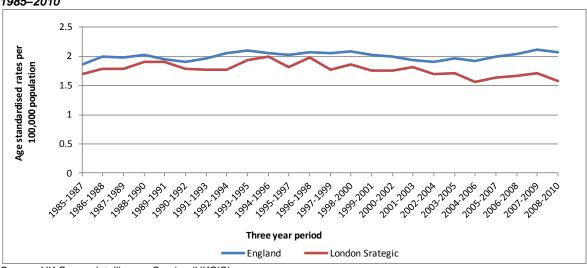


Figure 4: Malignant melanoma – 3-year average age-standardised mortality rates for females, 1985–2010

Source: UK Cancer Intelligence Service (UKCIS)

### **Survival rates**

The 5-year survival rate from malignant melanoma showed a considerable difference between London SHA and England for males diagnosed in 2003–05; the survival rate for males was 77.0% in London SHA and 83.0% in England, while for females the rates were 90.2% in the London SHA and 91.6% in England. Comparing survival for people diagnosed in 1985–87 and 2003–05, relative survival increased by 6% for males and by 9% for females in London SHA.

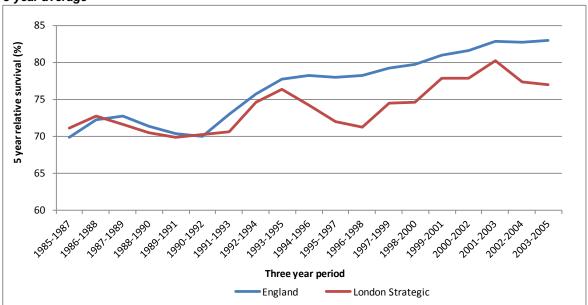


Figure 5: Malignant melanoma – 5-year relative survival rates for males diagnosed in 1985–2005, 3-year average

Source: UK Cancer Intelligence Service (UKCIS)

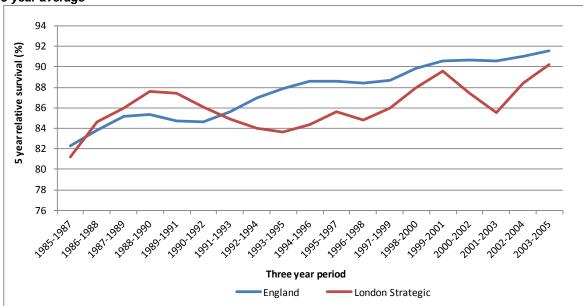


Figure 6: Malignant melanoma – 5-year relative survival rates for females diagnosed in 1985–2005, 3-year average

Source: UK Cancer Intelligence Service (UKCIS)

## **Further information**

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#### About the South West Public Health Observatory

The South West Public Observatory (SWPHO) is part of a network of 12 public health observatories working across the five nations of England, Scotland, Wales, Northern Ireland and the Republic of Ireland. The nine Public Health Observatories in England work together through a single work programme which contains both national and local elements. We produce information, data and intelligence on people's health and health care for practitioners, policy makers and the wider community. Our expertise lies in turning information and data into meaningful health intelligence to support decision makers.

On behalf of the Department of Health, the SWPHO works in partnership with the NHS, local authorities, researchers, national agencies as well as agencies in the South West.

The SWPHO incorporates the National Drug Treatment Monitoring System South West (NDTMS–SW), and in April 2005 merged with the South West Cancer Intelligence Service (SWCIS).

For more information about the SWPHO and its partner organisations, please visit www.swpho.nhs.uk

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