



Malignant melanoma: incidence, mortality and survival rates in Yorkshire and the Humber SHA and England

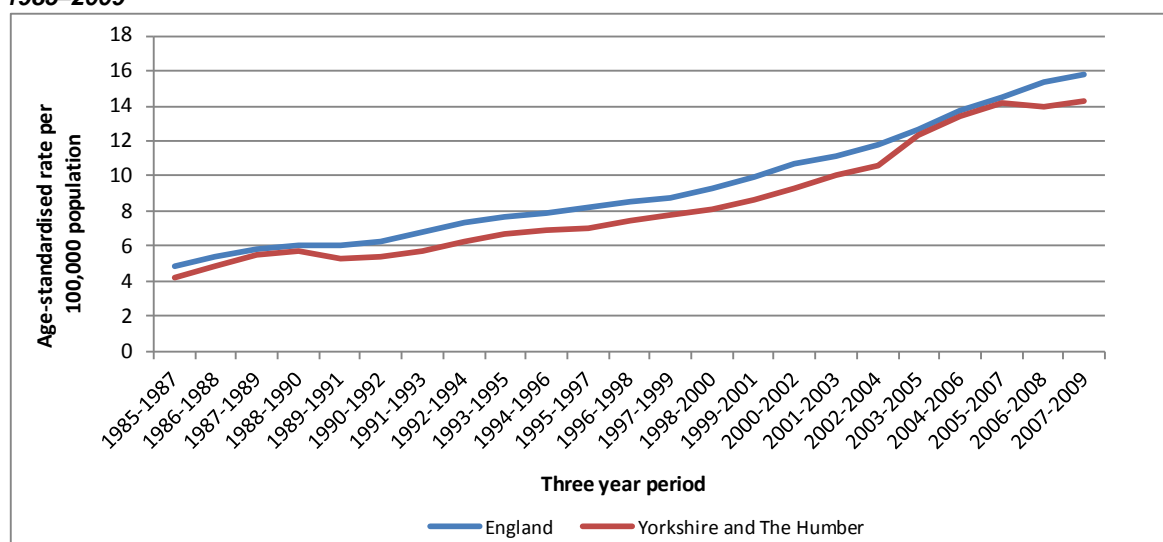
May 2012

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

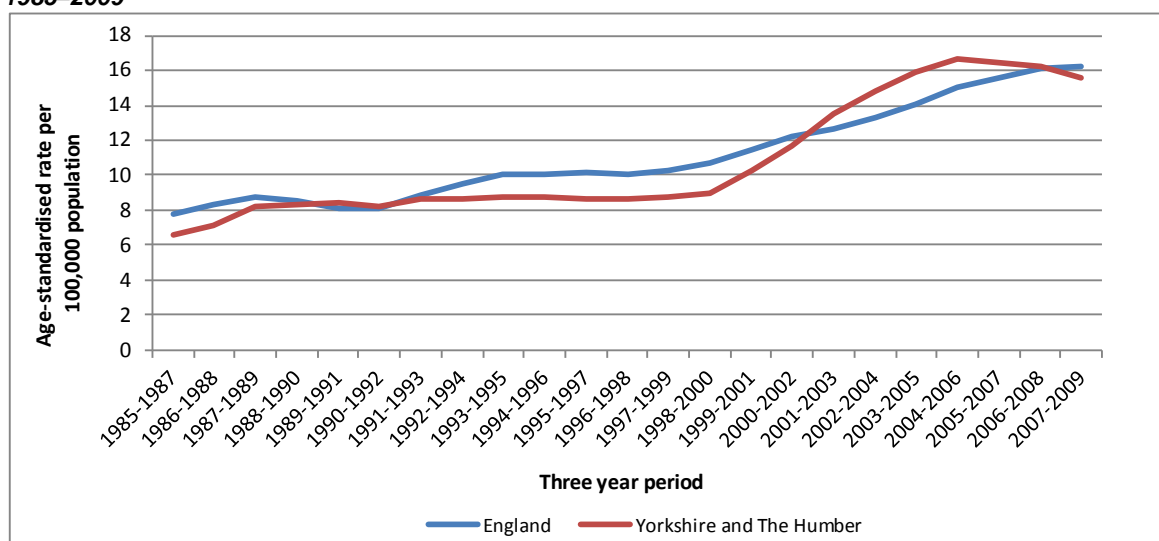
The 3-year average age-standardised incidence rate of malignant melanoma in Yorkshire and the Humber Strategic Health Authority (SHA) for males followed the same trend as the rate for England: an increase in incidence over the last 20 years. During this time, males in Yorkshire and the Humber SHA generally had a lower incidence than England. The female rate for Yorkshire and the Humber SHA was generally lower than the England rate until 1999–2001, but was higher than the England rate from 2001–03 to 2006–08. This is in contrast to the England rate which increased more steadily throughout. In 2007–09, the 3-year average age-standardised incidence rate of malignant melanoma for males was 14.3 (Yorkshire and the Humber SHA) and 15.8 (England) per 100,000 population and for females the rate was 15.6 (Yorkshire and the Humber SHA) and 16.3 (England) per 100,000 population. The age-standardised incidence rate was generally 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)

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

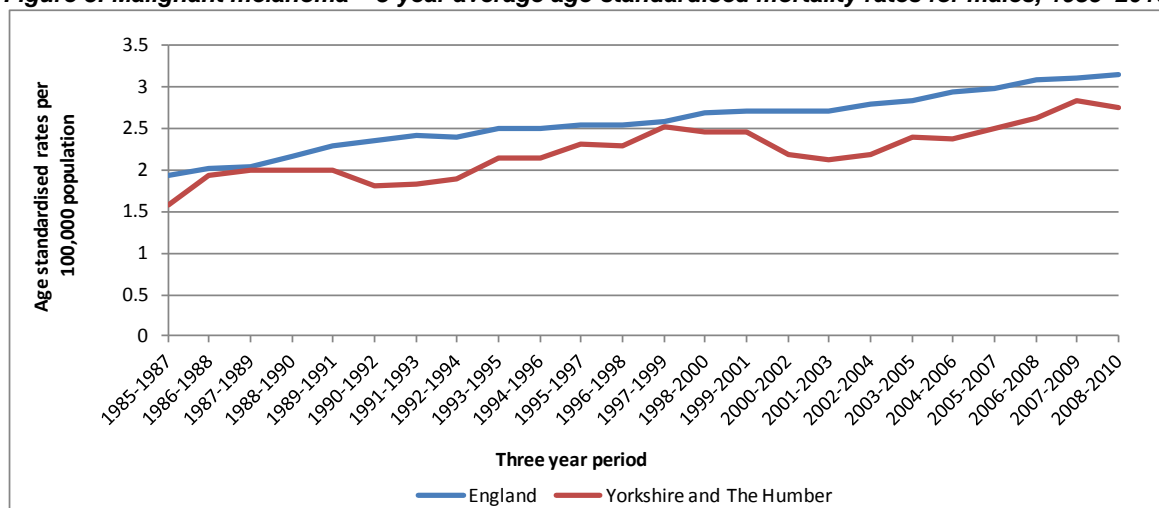


Source: UK Cancer Intelligence Service (UKCIS)

Mortality rates

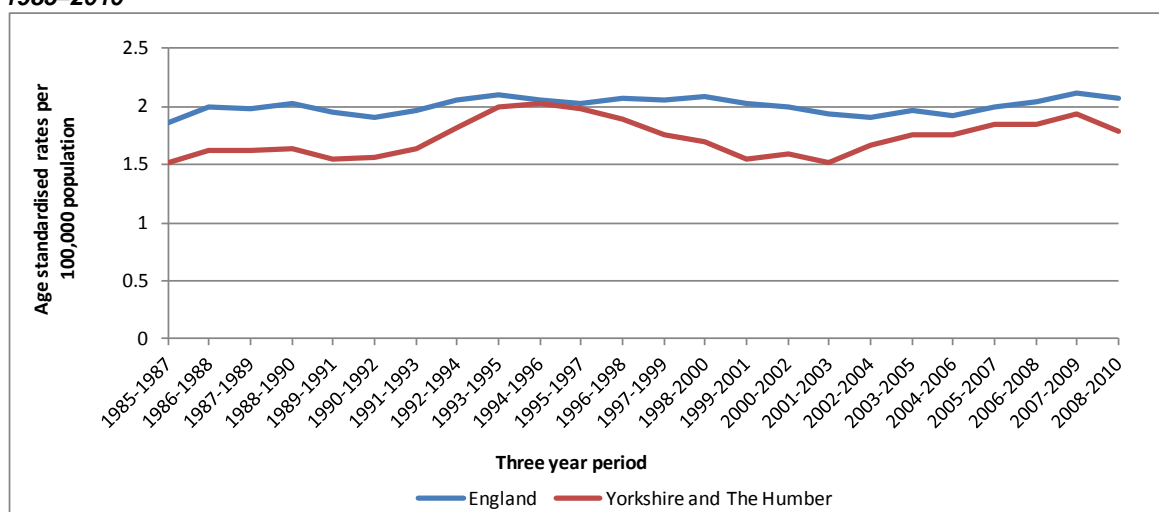
The 3-year average age-standardised mortality rate from malignant melanoma in Yorkshire and the Humber SHA followed a similar trend to the rate for England over the last 20 years: for males the rate increased and for females it stayed constant, despite some fluctuations in the SHA rates. The mortality rate in Yorkshire and the Humber SHA was generally lower or similar to the England rate. In 2008–10 the 3-year average age-standardised mortality rate from malignant melanoma for males was 2.8 (Yorkshire and the Humber SHA) and 3.2 (England) per 100,000 population, and for females the rate was 1.8 (Yorkshire and the Humber SHA) and 2.1 (England) per 100,000 population. From 1997–99, the age-standardised mortality rate was generally 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

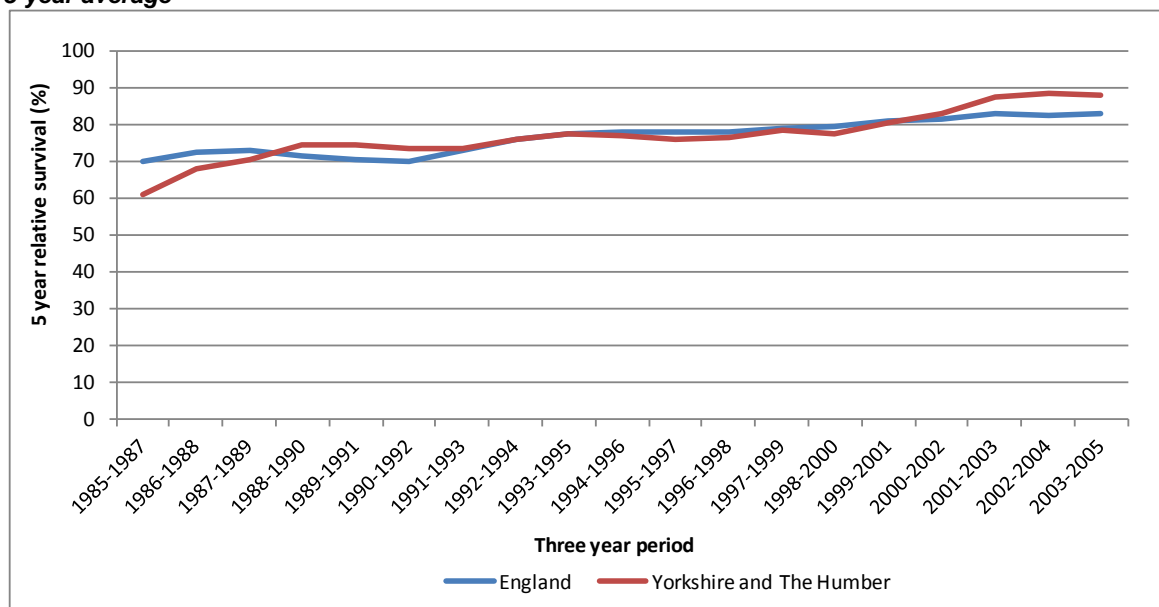


Source: UK Cancer Intelligence Service (UKCIS)

Survival rates

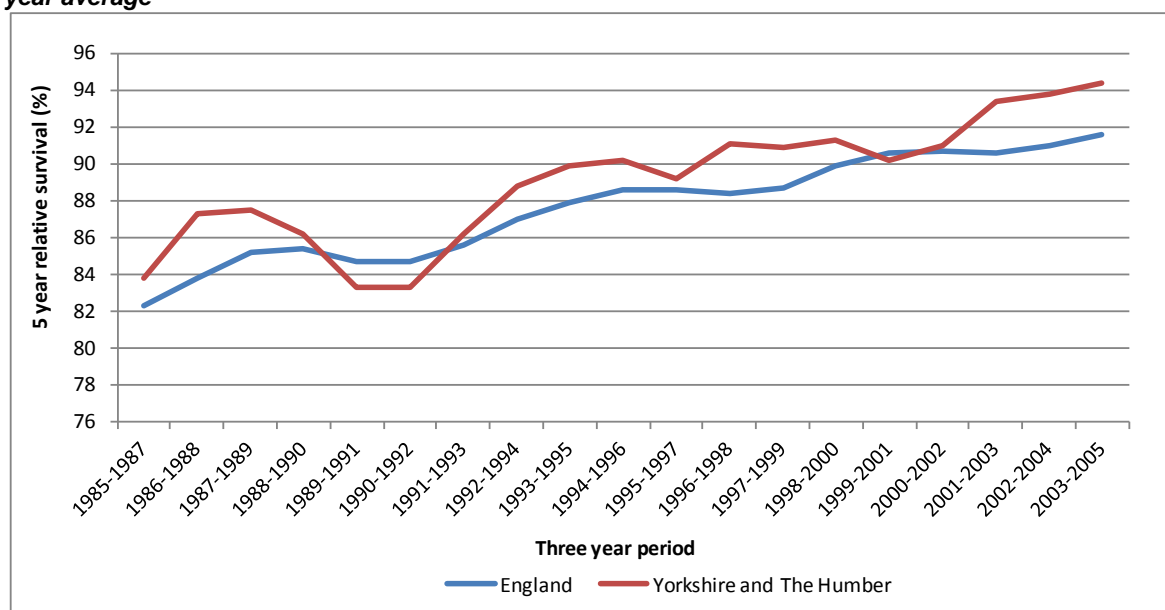
Five-year survival rates from malignant melanoma were higher for Yorkshire and The Humber SHA compared with England for both males and females diagnosed in 2003–05; the survival rate for males was 88.2% in Yorkshire and The Humber SHA and 83.0% in England, while for females the rates were 94.4% in the Yorkshire and The Humber SHA and 91.6% in England. Comparing survival for people diagnosed in 1985–87 and 2003–05, relative survival increased by 27.3% for males and by 10.6% for females in Yorkshire and The Humber 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