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CANCER CASES UP BUT SURVIVAL MORE THAN DOUBLES IN BREAST AND BOWEL CANCER

The number of people surviving some of the most common types of cancer for at least five years has doubled since the National Health Service was founded 60 years ago.

Comparisons have shown that survival for colon cancer has risen dramatically from 18 per cent to 47 per cent while breast cancer survival has more than doubled from 37 per cent to 77 per cent between 1946 and 1998.

Cancer Research UK and the National Cancer Intelligence Network (NCIN) have compared cancer statistics in England and Wales from the inception of the NHS to the present day; survival and mortality statistics are based on recorded data; incidence statistics are estimated for England only.

In 1950 the Registrar General said that cancer killed nearly as many people in a single year as all the men who were killed during the six years of the Second World War. The disease would clearly become a growing burden for the NHS.

Professor David Forman, based at the University of Leeds and NCIN, who helped prepare the figures, said: "We can only estimate the cost of cancer to the NHS because we have been collecting good quality data on incidence, mortality and survival over a long period. Cancer is a substantially more common disease now than in 1948. And the NCIN will help us really understand the effects of improved treatment and earlier diagnosis on better survival."

Cervical cancer survival rates have increased substantially from 35 per cent to 61 per cent while rectal cancer has more than doubled from 22 per cent to 50 per cent.

In contrast, although survival for cancer of the stomach has improved (4 per cent to 13 per cent) and lung cancer survival has gone up (3 per cent to 6 per cent), they both remain sites of cancer with an extremely poor prognosis.

Because people are living longer now than in the post-war years and because the population is much larger, the overall number of cases of cancer has increased. The NHS screening programmes and improved diagnostic tests have also contributed to a higher incidence of cancer.

The statistics show a shocking increase in the rates of malignant melanoma – the potentially fatal form of skin cancer.

Even after allowing for the population increase, melanoma incidence rates in men have increased 13 fold since 1948, when less than 200 men were diagnosed each year compared with 2008 when more than 3000 men will be diagnosed. In women the rates increased more than six fold.

Experts say such a rise in incidence can be partially attributed to the package holiday explosion that began in the 1960s allowing tens of thousands to holiday in the sun for the first time. Sunburn doubles the risk of skin cancer.

The estimated number of breast cancer cases has risen from around 10,000 in 1948 to more than 40,000 in 2008. Lifestyle factors have played their part in this – particularly having fewer children later in life. The NHS Cancer Screening Programme has also meant that many more breast cancers are detected earlier. But early detection and improved treatment account for the huge improvement in survival.

Harpal Kumar, chief executive of Cancer Research UK, said: “The improvement in cancer survival, over the years, is a testament to the world class research that has resulted in earlier diagnosis and better treatments for patients.

“But we must not be complacent; we want to see further improvements in survival in the future as we improve our ability to detect cancer early and as treatments become increasingly tailored to individual patients.”

Prostate cancer cases were estimated to have risen dramatically from around 3,000 in 1948 to over 40,000 in 2008. Allowing for population growth and living longer this equates to a six-fold increase. The introduction of the Prostate Specific Antigen (PSA) test in the early 1990s is largely responsible for the increase in the number of cases diagnosed.

Rates of non-Hodgkin lymphoma increased six fold in 60 years with cases rising from just under 1,000 in 1948 to more than 10,000 in 2008. The increase is partly due to better diagnostic techniques.

Smoking patterns in the population lie behind the statistics for lung cancer in men and women. There were around 13,500 cases in men in 1948; this peaked in the mid-seventies at around 27,000 but has since dropped back to 16,500 in 2008 as more men have given up smoking.

As more and more women started smoking after the Second World War, so more and more cases of lung cancer were diagnosed. In 1948, around 2,000 women were diagnosed with the disease. But in 2008, that figure leapt to more than 12,000. This equates to an incidence rate of less than 10 cases in every 100,000 women in 1948 rising to over 30 cases in every 100,000 women now.

Although incidence rates have increased, better treatments have contributed to a general drop in mortality rates.

In particular, bowel cancer death rates have dropped by well over half despite the increase in incidence.

Deaths from stomach cancer have plummeted from 14,400 in 1948 to 5,000 in 2008. This is largely attributable to the drop in the *H.pylori* infection due to better living conditions and the advent of refrigeration keeping food fresh.

Male lung cancer mortality rates were 45 per 100,000 in 1948. They peaked in 1974 when they were around 110 per 100,000 and dropped substantially in 2005 when they were 50 per 100,000.

Professor Mike Richards, National Cancer Director, said: "Figures like these show the benefit of collecting data over a long period of time. The NCIN was set up with the aim of creating the best cancer information system in the world by 2012.

"The improvements in survival rates over the past 60 years for breast, colorectal and some other cancers are extremely encouraging, as is the fall in mortality rates. But the estimated increase in incidence of some cancers emphasises the need for further attention to be given to prevention and early diagnosis of cancer."

Ends

For media enquiries please contact Sally Staples in the Cancer Research UK press office on 020 7061 8313, or the out of hours' duty press officer on 07050 264059.

Notes to Editor

- The statistics on mortality are based on published recorded data for 1948 and 2005;
- The statistics on survival are based on published recorded data for patients diagnosed in 1945-47 and 1996-99;
- The statistics on "estimated" incidence for England are based on estimated forward and backward projections using reported incidence data from the South East of England for cases in 1960-2004, applied to the England population only.

Full supporting data are available on request from the Cancer Research UK press office.