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LUNG, COLORECTAL, BREAST, MELANOMA AND UPPER GI CANCER INCIDENCE AND SURVIVAL STATISTICS FOR NORTHERN IRELAND: 1993-2022

The Queen's University Northern Ireland Cancer Registry (NICR) today (Wednesday 20th November 2024) released the official statistics on lung, colorectal, breast, melanoma and upper GI cancer diagnosed in Northern Ireland during 1993-2022. This release provides details of the number of cancer cases diagnosed each year along with incidence rates over time and estimates of patient survival. Key facts and figures are presented below.

Colorectal cancer

- There were 1,269 (708 male, 561 female) patients diagnosed with colorectal cancer each year during 2018-2022. The odds of developing colorectal cancer by age 85 were 1 in 15 (12 for men, 18 for women).
- The average number of cases per year increased by 8.4% from 1,171 per year in 2013-2017 to 1,269 per year in 2018-2022.
- Among patients diagnosed with colorectal cancer during 2013-2017 one-year survival after diagnosis was 81.4%, while five-year survival was 61.7%. However, one in seven (13.5%) patients died within 6 months of diagnosis.
- One-year colorectal cancer survival declined among men between 2013-2017 and 2018-2022 from 83.5% to 80.2%.
- During 2018-2022 16.5% of colorectal cancer cases were diagnosed at an early stage, while 22.0% were diagnosed at a late stage. Five-year survival for patients diagnosed in 2013-2017 with early stage disease (Stage I) was 93.3%, while for late stage (Stage IV) it was 7.6%.

Female breast cancer

- There were 1,513 women diagnosed with breast cancer each year during 2018-2022. The odds of developing breast cancer by age 85 among women were 1 in 14.
- The average number of cases per year increased by 8.1% from 1,400 per year in 2013-2017 to 1,513 per year in 2018-2022.

- Among women diagnosed with breast cancer during 2013-2017 one-year survival was 96.0%, while five-year survival was 83.1%.
- During 2018-2022 42.1% of female breast cancer cases were diagnosed at an early stage, while 5.3% were diagnosed at a late stage. Five-year survival for patients diagnosed in 2013-2017 with early stage disease (Stage I) was 96.4%, while for late stage (Stage IV) it was 18.8%.
- The most common breast cancer types were infiltrating duct carcinoma (72.0%) and lobular carcinoma (13.7%).

Lung cancer (including trachea)

- There were 1,360 (706 male, 654 female) patients diagnosed with lung cancer each year during 2018-2022. The odds of developing lung cancer by age 85 were 1 in 13 (12 for men, 15 for women).
- The average number of cases per year increased by 4.0% from 1,308 per year in 2013-2017 to 1,360 per year in 2018-2022.
- Among patients diagnosed with lung cancer during 2013-2017 one-year survival after diagnosis was 38.2%, while five-year survival was 15.9%. However, almost one in two (44.6%) patients died within 6 months of diagnosis.
- One-year survival from lung cancer improved between 2013-2017 and 2018-2022, increasing from 38.2% to 42.8%, while five-year survival increased between 2008-2012 and 2013-2017 from 11.1% to 15.9%.
- During 2018-2022 19.1% of lung cancer cases were diagnosed at an early stage, while 44.4% were diagnosed at a late stage. Five-year survival for patients diagnosed in 2013-2017 with early stage disease (Stage I) was 52.4%, while for late stage (Stage IV) it was 1.6%.
- The most common lung cancer types were adenocarcinoma (27.0%) and squamous cell carcinoma (16.5%).

Malignant melanoma

- There were 424 (203 male, 221 female) patients diagnosed with malignant melanoma each year during 2018-2022. In 2022 the total number of melanoma cases exceeded 500 in a given year (512 in total) for the first time.

- The odds of developing malignant melanoma by age 85 were 1 in 47 (44 for men, 49 for women).
- The average number of cases per year increased by 11.9% from 379 per year in 2013-2017 to 424 per year in 2018-2022.
- Among patients diagnosed with malignant melanoma during 2013-2017 one-year survival after diagnosis was 98.2%, while five-year survival was 91.4%.
- During 2018-2022 62.0% of melanoma cases were diagnosed at an early stage, while 3.1% were diagnosed at a late stage. Five-year survival for patients diagnosed in 2013-2017 with early stage disease (Stage I) was 98.9%, while for late stage (Stage III/IV) it was 48.6%.
- The most common melanoma types were superficial spreading melanoma (54.2%) and nodular melanoma (17.6%).

Oesophageal cancer

- There were 222 (162 male, 60 female) patients diagnosed with oesophageal cancer each year during 2018-2022. The odds of developing oesophageal cancer by age 85 were 1 in 81 (52 for men, 161 for women).
- The average number of cases per year increased by 2.3% from 217 per year in 2013-2017 to 222 per year in 2018-2022.
- Among patients diagnosed with oesophageal cancer during 2013-2017 one-year survival after diagnosis was 51.0%, while five-year survival was 20.0%. One in four (28.0%) patients died within 6 months of diagnosis.
- During 2018-2022 8.7% of oesophageal cancer cases were diagnosed at an early stage, while 41.5% were diagnosed at a late stage. Five-year survival for patients diagnosed in 2013-2017 with early stage disease (Stage I) was 65.1%, while for late stage (Stage IV) it was 1.2%.
- The most common oesophageal cancer type among males was adenocarcinoma (69.9%) while among females it was squamous cell carcinoma (52.2%).

Stomach cancer

- There were 188 (117 male, 71 female) patients diagnosed with stomach cancer each year during 2018-2022. The odds of developing stomach cancer by age 85 were 1 in 89 (67 for men, 126 for women).

- The average number of cases per year decreased by 13.4% from 217 per year in 2013-2017 to 188 per year in 2018-2022.
- Among patients diagnosed with stomach cancer during 2013-2017 one-year survival after diagnosis was 47.3%, while five-year survival was 21.6%. One in three (36.8%) patients died within 6 months of diagnosis.
- During 2018-2022 10.1% of stomach cancer cases were diagnosed at an early stage, while 47.8% were diagnosed at a late stage. Five-year survival for patients diagnosed in 2013-2017 with early stage disease (Stage I) was 80.4%, while for late stage (Stage IV) it was 0.7%.

NOTES TO EDITORS:

1. All the statistics in this release are available at

<http://www.qub.ac.uk/research-centres/nicr/CancerInformation/official-statistics/>

2. Legislation designating the Northern Ireland Cancer Registry (NICR) as an official producer of statistics came into place on 1st April 2012. Today's release of data adheres to the code of practice referenced in this legislation.

3. About the data:

a. New cases of cancer are registered from pathology reports, hospital administration records, and death certificates. GP or hospital charts may also be accessed if the above sources do not yield a reliable registration.

b. Registrations are validated and quality-checked according to internationally recognised standards.

c. Released statistics are not patient identifiable.

4. Incidence refers to the number of new cases of cancer diagnosed in a particular period of time and population.

5. Five-year survival refers to the proportion of people diagnosed with a cancer who are still alive five years later. Age-standardised net survival used here is a survival statistic that has been adjusted for background mortality and age profile between periods. Net survival is the theoretical survival of patients if they could die only from the cancer in question.

6. The data in this release was produced by:

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