Promising prognosis as cancer deaths continue to fall

July 23 2015, by Sasha Petrova

Credit: Tima Miroshnichenko from Pexels

The rate of Australians dying from cancer is on a steady, downhill trajectory, thanks to powerful advances made in prevention, diagnosis and treatment of the disease. New data from the Australian Institute of

Health and Welfare shows a promising outlook for those diagnosed with cancer.

Deaths from all cancers combined fell from 199 per 100,000 people in 1968, to 167 per 100,000 in 2012 - a decline of 2.6 deaths per 100,000 people per year.

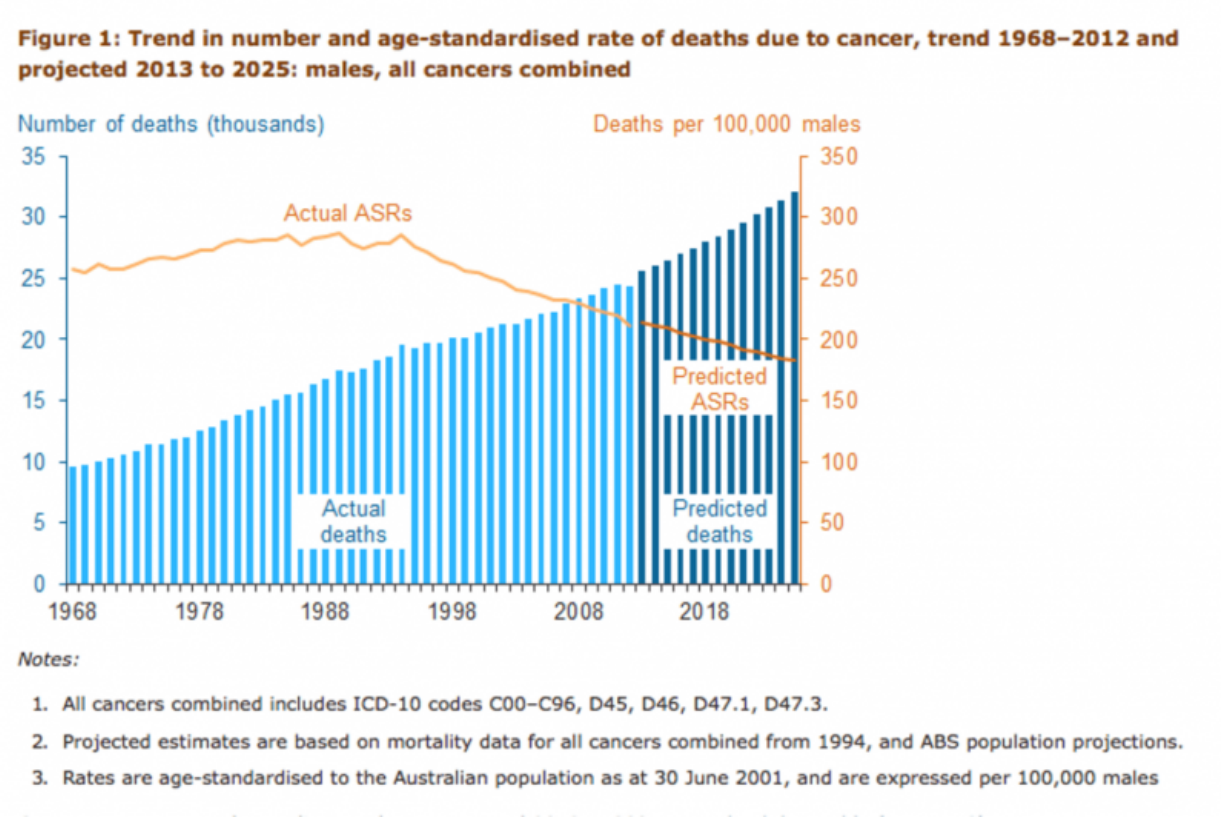
"This confirms that we are steadily making improvements in most cancers, in terms of survival," said Professor Timothy Hughes, Cancer Theme Leader at SAHMRI.

"And it's coming from better prevention, better screening and better therapy."

The downward cancer mortality rate was higher for males than females. Male deaths decreased by 4.1 per 100,000 per year, between 1995 and 2012, compared to 1.8 deaths per 100,000 females per year.

One reason is the base rate of cancer deaths in women was lower than that of men, as men are generally more likely to be diagnosed with cancer than women.

Education and Research Director at the Cancer Council WA, Terry Slevin, said the declining trend was "significant". But he added projection estimates may in some cases be conservative, arguing successful efforts in prevention of certain cancers would see their mortality rates driven down even further than the report's figures.



AIHW cancer codes can be viewed on their website - the codes listed in the appendix depict rare cancers. Credit: AIHW National Mortality Database, projected 2013 to 2025

He said lung cancer - the most common cause of cancer death in Australia - was one example where anti-smoking campaigns would contribute to mortality rates declining from 42.4 male deaths per 100,000 in 2013 to 33 in 2015.

"Another example is colorectal (bowel) cancer. While they've projected a substantial reduction in regards to mortality in men, their projection of the reduction in women is far more modest.

"If we can boost their participation rate in the National Bowel Screening

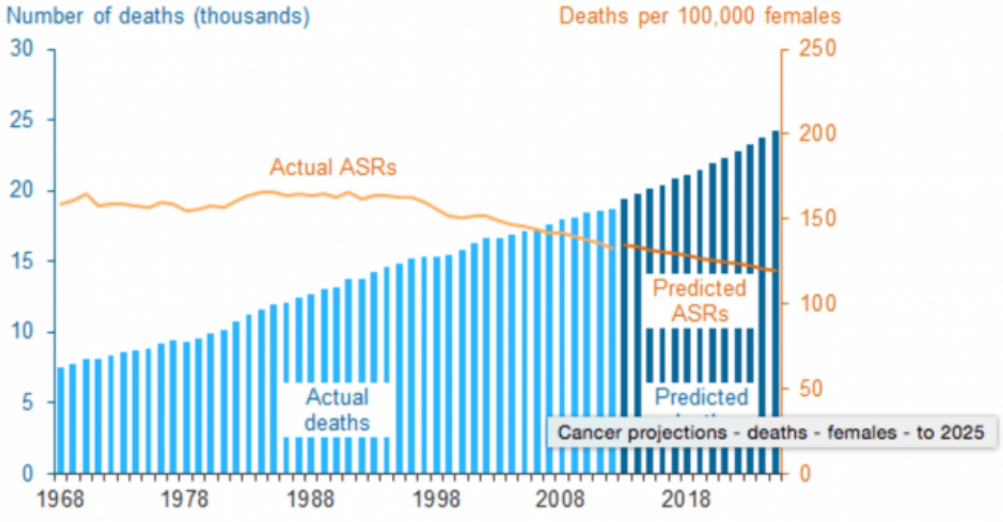
Program, which is currently lower than it should be, I think we can see those figures driven down," he said.

While the rate has dropped, a rise in population levels and ageing has caused, and will cause, the total number of cancer deaths to rise.

In addition to this, Ian Olver, Chair of Translational Cancer Research at the University of South Australia said changing risk factors for cancer, such as obesity, could lead to even further increases in cancer numbers.

Between 2012 and 2025, the total number of deaths from cancer is predicted to increase from an estimated 25,580 to 32,010 among males, and from 19,450 to 24,250 among females. The numbers will undoubtedly put further strain on health services.

Figure 2: Trend in number and age-standardised rate of deaths due to cancer, trend 1968–2012 and projected 2013 to 2025: females, all cancers combined



Notes:

1. All cancers combined includes ICD-10 codes C00–C96, D45, D46, D47.1, D47.3.
2. Projected estimates are based on mortality data for all cancers combined from 1995, and ABS population projections.
3. Rates are age-standardised to the Australian population as at 30 June 2001, and are expressed per 100,000 males.

AIHW cancer codes can be viewed on their website - the codes listed in the appendix depict rare cancers. Credit: AIHW National Mortality Database, projected 2013 to 2025

"We're going to have more people living with the disease as a chronic illness as more people are diagnosed with cancer but fewer die from it. So it's not only the acute cost of treating cancer, it's the cost of maintaining services for an increasing number of people who will survive longer with consequences that could be both psychological and physical," said Ian Olver.

And although overall death rates are falling, the prognosis for some cancers is not as positive. Mortality rates for liver and prostate cancer, for instance, are projected to rise.

Liver cancer deaths were at 8.5 per 100,000 males in 2013 and 3.5 per 100,000 females. The report projects this will increase to 11.3 males in 2015 and 4.7 females.

And the prognosis for ovarian cancer mortality will decline only marginally - from 6.9 per 100,000 women in 2013, to 6.5 in 2025.

"I think there's been increasing resources put into those cancers but there are specific reasons why they are challenging. In the case of ovarian cancer, it's proved very difficult to identify early disease because it tends to spread in the early stage when it's not terribly symptomatic and symptoms are not specific," said Professor Hughes.

"It's cause for reassurance that the things we're doing are giving us steady improvements but some cancers are being left behind and need to be focused on."

Source: The Conversation