Cancer Incidence Projections to 2035 in Northern Ireland


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Cancer incidence trends 1993-2013 with projections to 2035

David Donnelly1 & Anna Gavin1

1 Northern Ireland Cancer Registry, Centre for Public Health, Mulhouse Building, Governor Road, Belfast BT12 6DP

Methods

Data on all cancers (excluding NMSC) diagnosed during 1993-2013 was extracted from the NI Cancer Registry. Age-specific rates for all cancers combined and 30 common cancers were determined for both sexes by year of diagnosis. The data was fitted separately for ages 0-49, 50-59, 60-69, 70-79 and 80+ using a regression model with five-year age group, five-year birth cohort and year of diagnosis used as predictors of the cancer incidence rate. The resulting model was used to predict rates in future years, which were combined with population projections to provide estimates of the future number of cases.

PROJECTED NUMBER OF CASES DIAGNOSED BY SEX AND TYPE

The number of cases diagnosed each year is projected to increase for all cancer types, except for stomach cancer, and cervical cancer.

By 2035 case volume is expected to more than double for liver, kidney and oral cancers, for female uterine and pancreatic cancers and for male melanoma.

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CONCLUSION: The increasing number of cancer cases will result in an increased burden on health services. However the largest increases are projected for cancers such as melanoma that are largely preventable. The opportunity thus exists to reduce the projected increase through preventative measures.

Footnotes

2. With projections to 2035
3. Cancer incidence rates 1993
4. By 2035 the number of cases diagnosed each year is projected to increase for all cancer types, except for stomach cancer, cervix, breast, cervical and colorectal screening programmes) and diagnostic
5. Excessive alcohol consumption;
6. Changes to risk factor exposure within the general population.
7. Factors that can influence incidence projections
8. These include vaccinations (e.g. the HPV vaccination), screening (e.g. the breast, cervical and colorectal screening programmes) and diagnostic tests (e.g. PSA testing for prostate cancer).
9. Changes to cancer classification or revisions to population projections.