

3. Graphical summaries for cancers diagnosed in the period 1994-1997

In this section, survival data are shown for several cancers on each graph, to allow the reader to develop an overview. To preserve a visual pattern of cancer types in the order in which they are dealt with in other sections, most cancer types are listed even if an age-group analysis of the 1994-1997 data was not possible, and a bar is blank. For clarity, 95% confidence intervals have not been shown.

In Figure 3.1, male-female differences are indicated for the most recent diagnosis period, using all ages combined. For most cancers, survival was similar in males and females, however males appeared to have better survival for bladder and renal cancers.

Relative survival for most cancer types has been shown in context with actual, observed or "absolute" survival data, in Fig. 3.2. Relative survival figures are always higher than the corresponding absolute figures, but differences are low for some cancers, especially those that occur earlier in life (childhood leukaemia and testicular cancer). Survival, however measured, was lowest for mesothelioma, and for primary cancers of the liver, pancreas, lung, gallbladder, oesophagus and brain. Survival appeared best for Hodgkin's lymphoma, testicular and thyroid cancers, cutaneous melanoma and cancers of the lip.

Figures 3.3 - 3.6 show summary relative survival figures for all cancer types, separately for males and females, for different age groups. This give a guide to the impacts of different cancers at different ages, and it will be apparent that while incidence rates and relative survival differ with age, patterns of prominent cancer types, at this summary level, are very similar.

In males, survival was best for cancers of the lip, testicular cancer, cutaneous melanoma and Hodgkin's lymphoma, and for prostate cancer in the older age groups; relative survival after Hodgkin's lymphoma was lower for males over 70 years of age.

In females, relative survival was best for cutaneous melanoma and cancers of the thyroid, although relative survival after thyroid cancer was reduced in those over 70 years of age. In young women, relative survival after gynaecological cancers - cervix, uterus and ovary - was high at 75-93%, but survival was reduced in the oldest age group, especially for ovarian cancer. It should be recalled that cervical cancer occurs predominantly in the young, in contrast to uterine and ovarian cancers.

Figure 3.1 Five-year relative survival by cancer type, 1994-1997: males and females

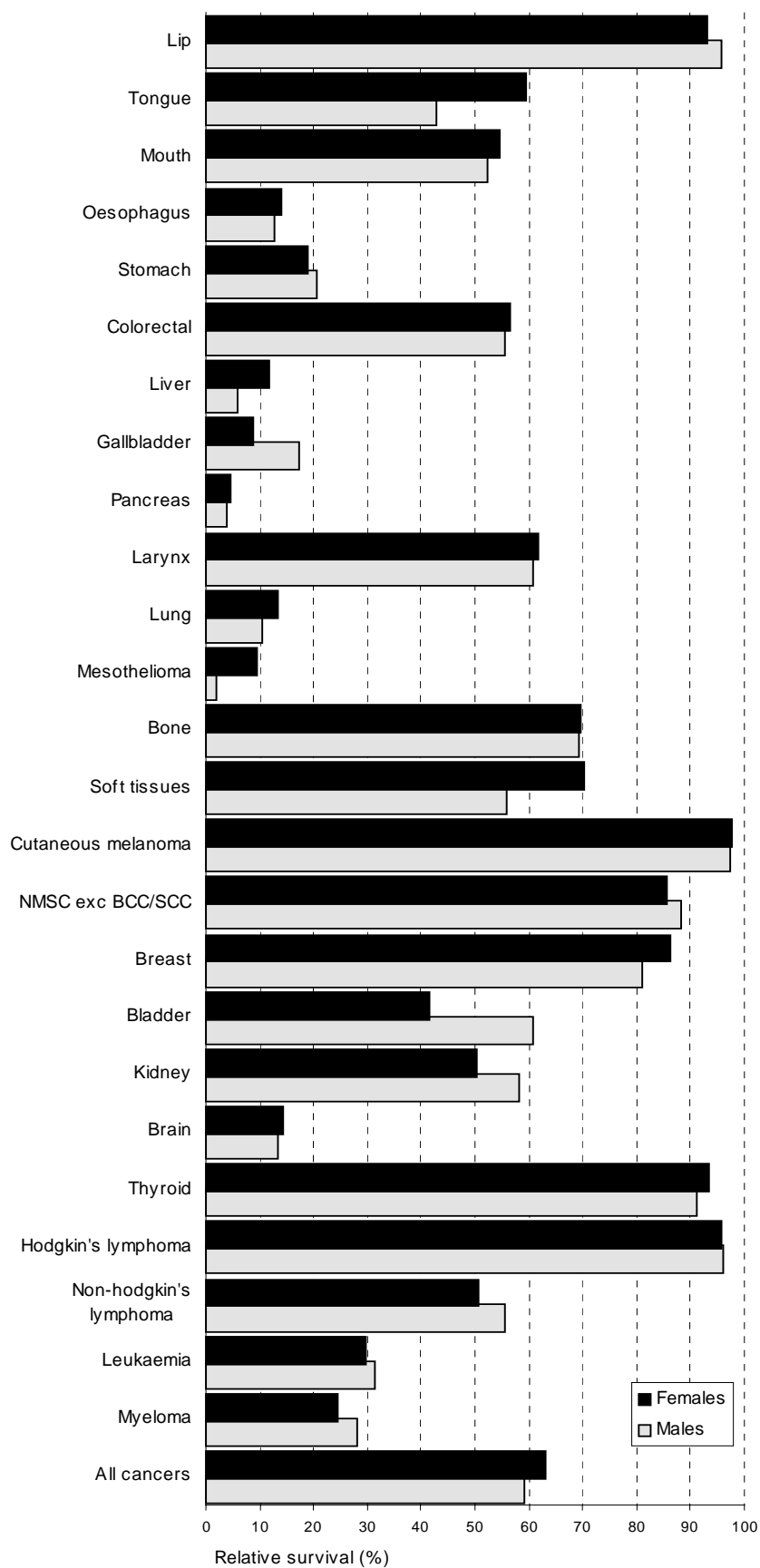
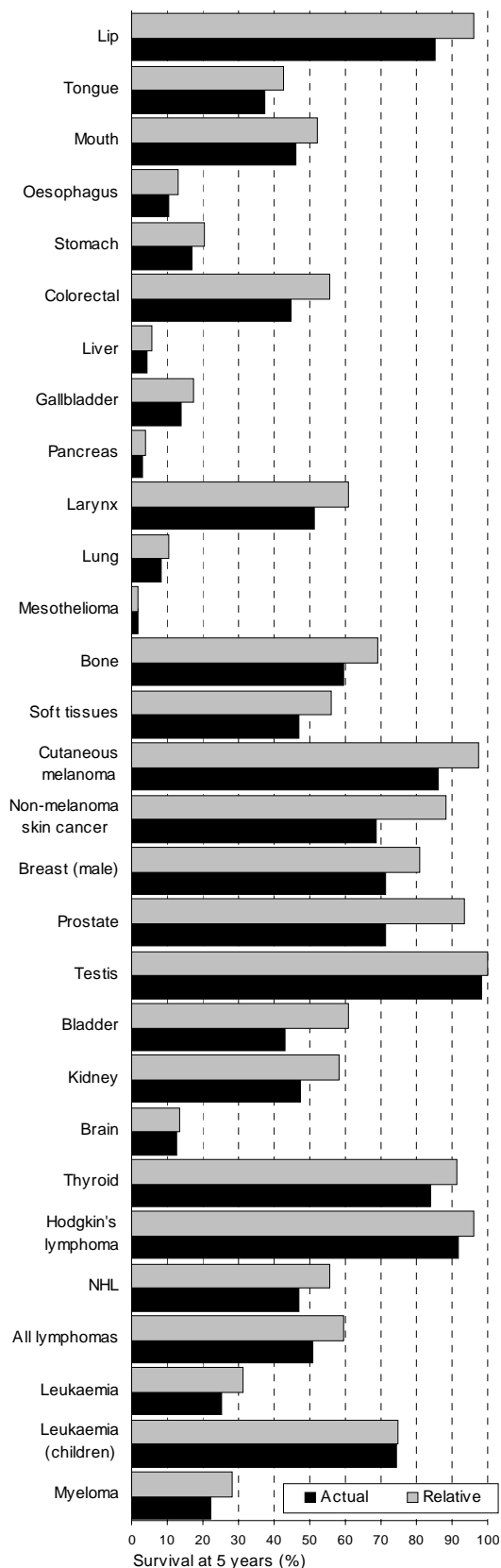


Figure 3.2 Five-year survival by cancer type, 1994-1997: relative and actual survival

Males



Females

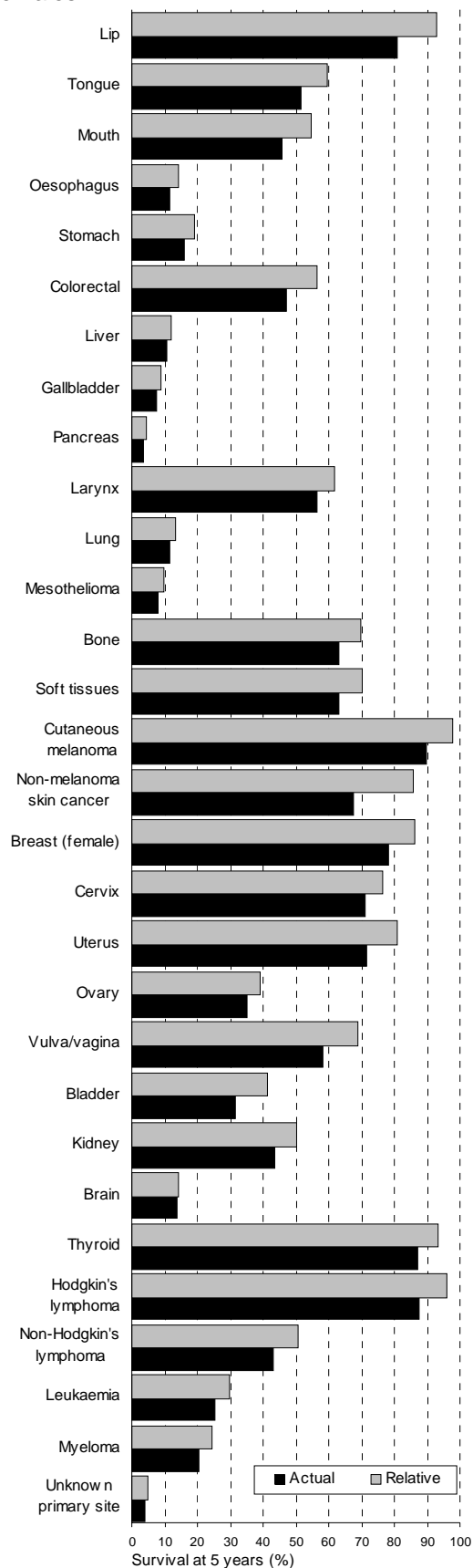
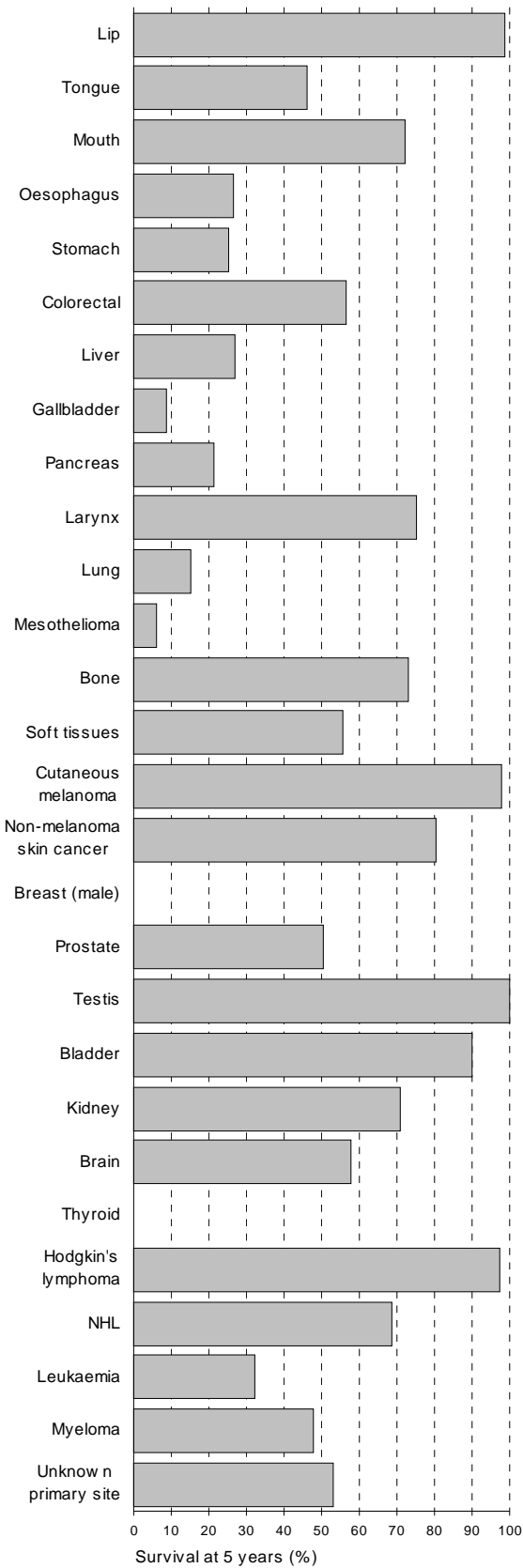


Figure 3.3 Five-year relative survival by cancer type, 1994-1997: persons aged 15-39 years at diagnosis
Males



Females

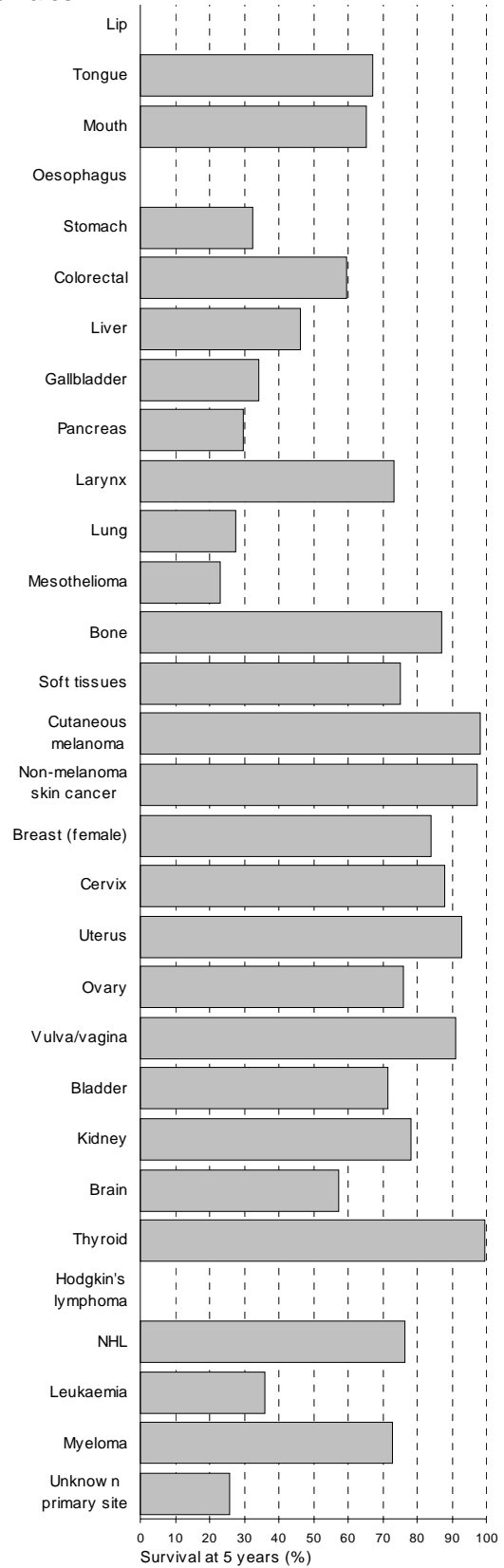


Figure 3.4 Five-year relative survival by cancer type, 1994-1997: persons aged 40-54 years at diagnosis

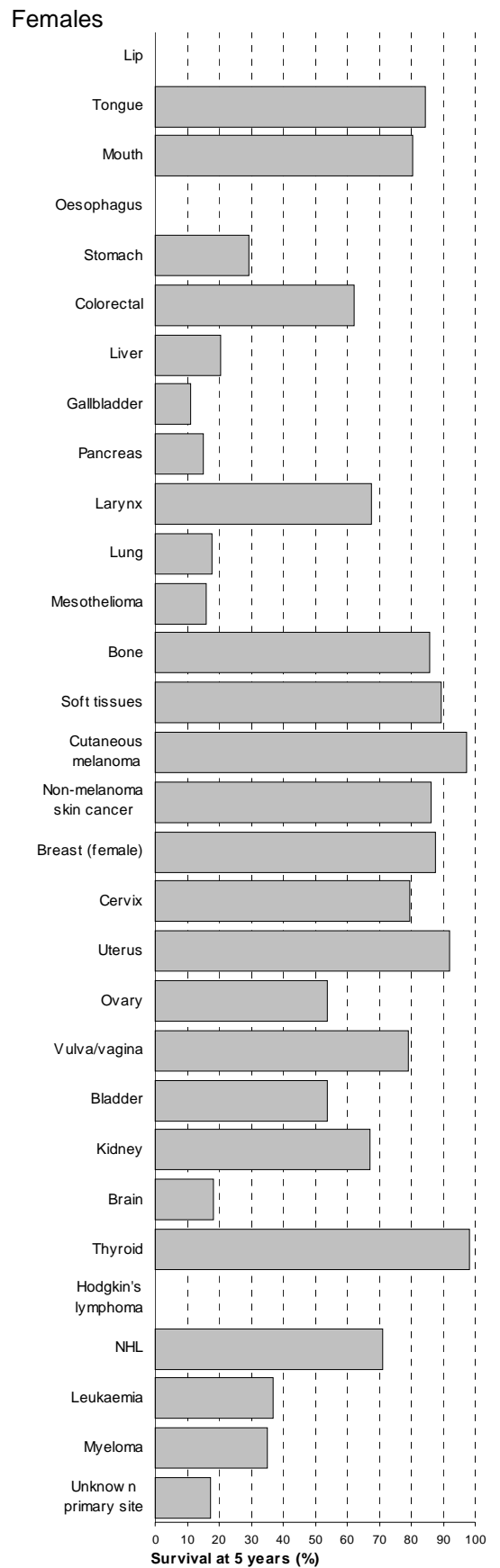
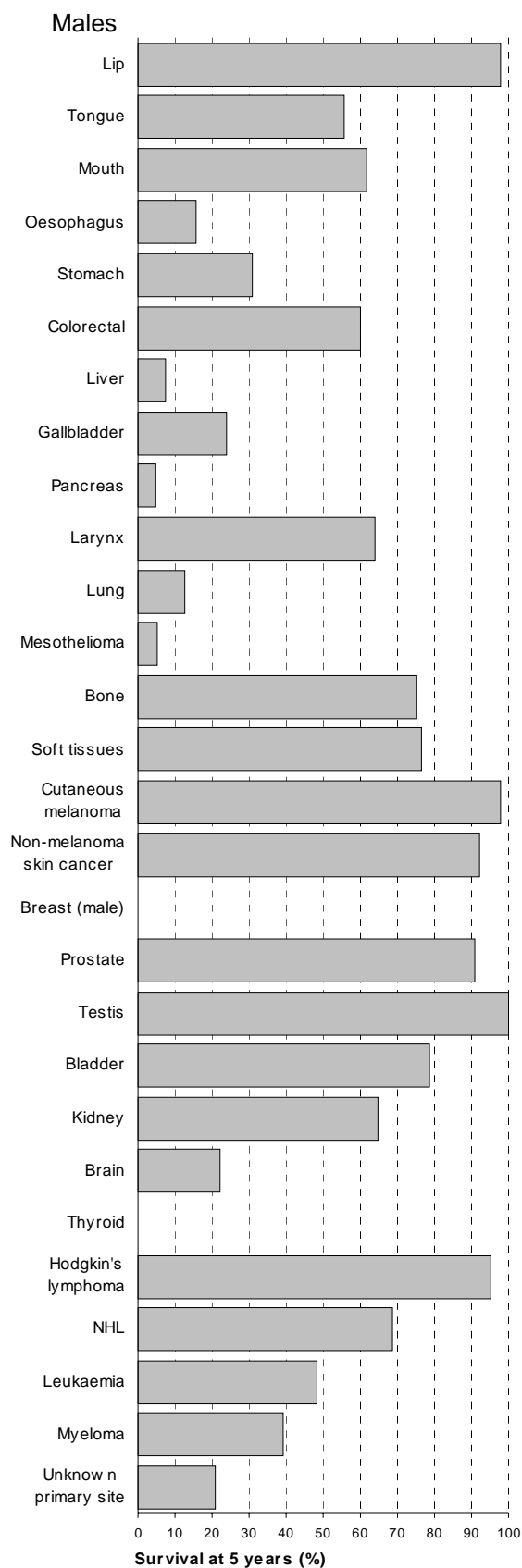


Figure 3.5 Five-year relative survival by cancer type, 1994-1997: persons aged 55-69 years at diagnosis

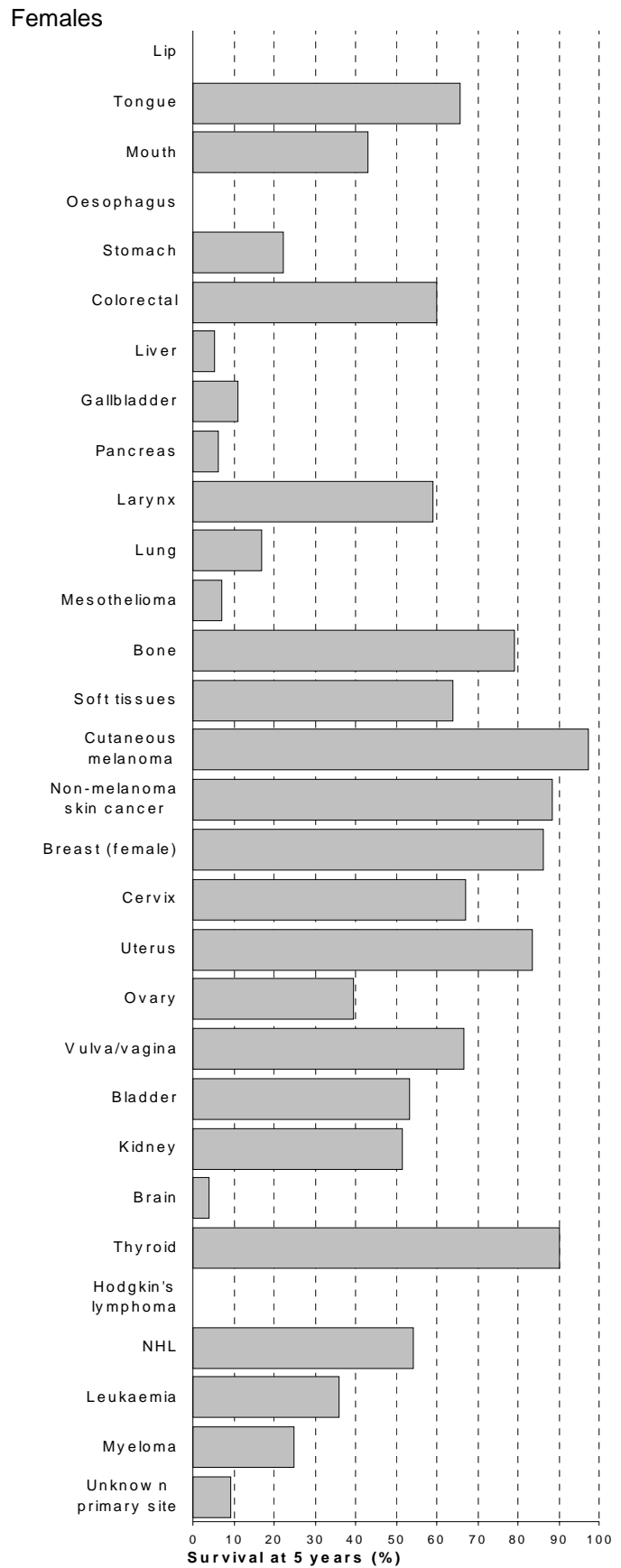
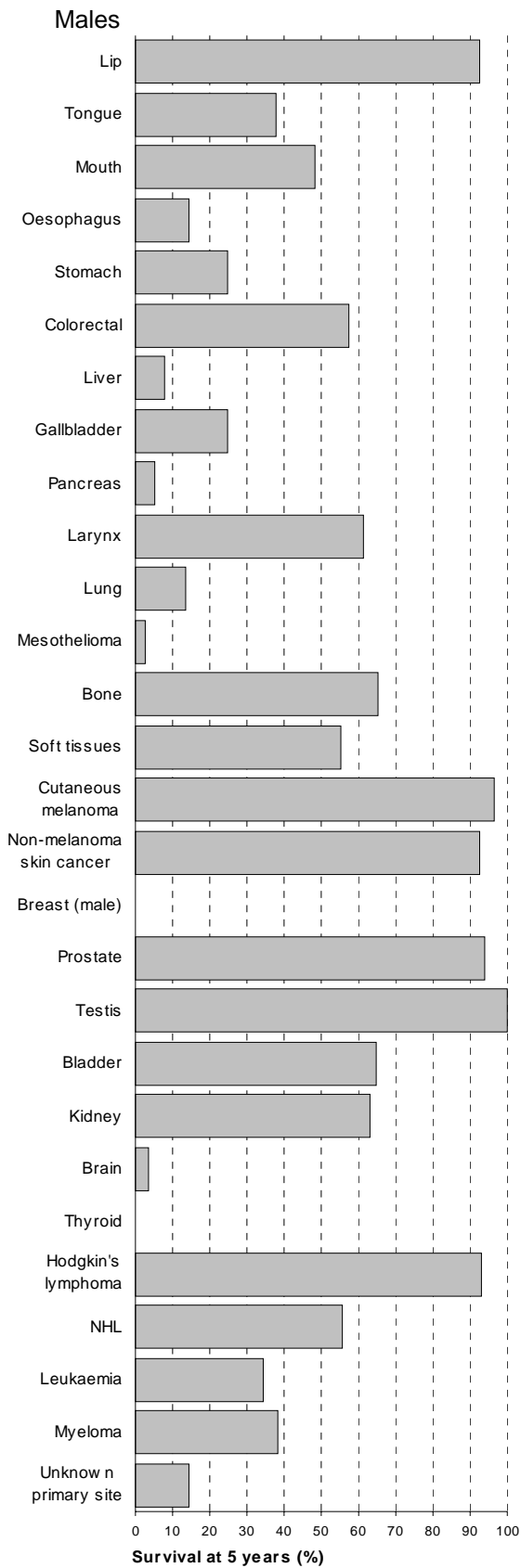


Figure 3.6 Five-year relative survival by cancer type, 1994-1997: persons aged 70 years and over at diagnosis

