

**CCQ Regional Office**  
1 Short Street  
Southport QLD 4215

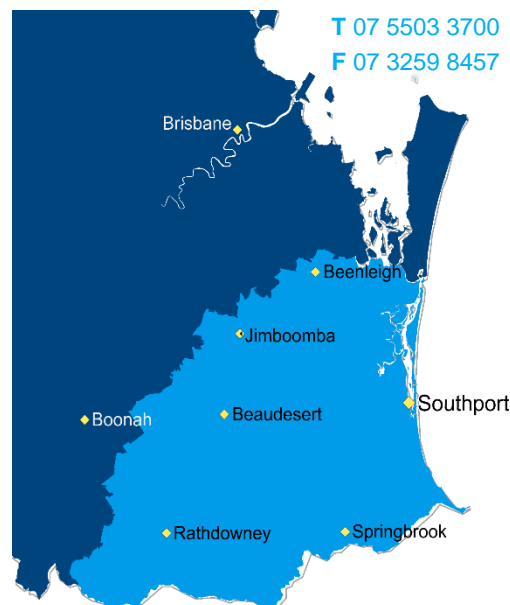
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## Cancer on the Gold Coast

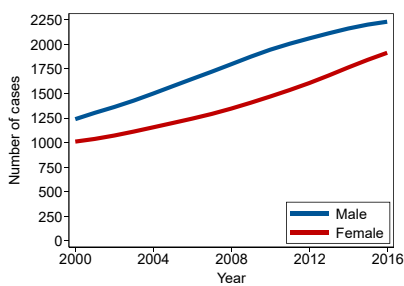
*The CCQ region of the Gold Coast covers 3,900 km<sup>2</sup>, or less than 0.2% of total Queensland. It includes the most south-eastern parts of the State. In 2016 it had a population of 680,306, which was 14% of Queensland's total population.*

Most of the population resides along the coastal strip of the Gold Coast, including Surfers Paradise, Southport and Broadbeach. Tourism is a significant industry for the Gold Coast.

Radiation treatment centres for cancer patients in the Gold Coast region are located at the Gold Coast University Hospital, with additional private facilities at Tugun and Southport (both treating public patients). Private facilities are also available in Springfield. The CCQ Regional Office for the Gold Coast is located in Southport.



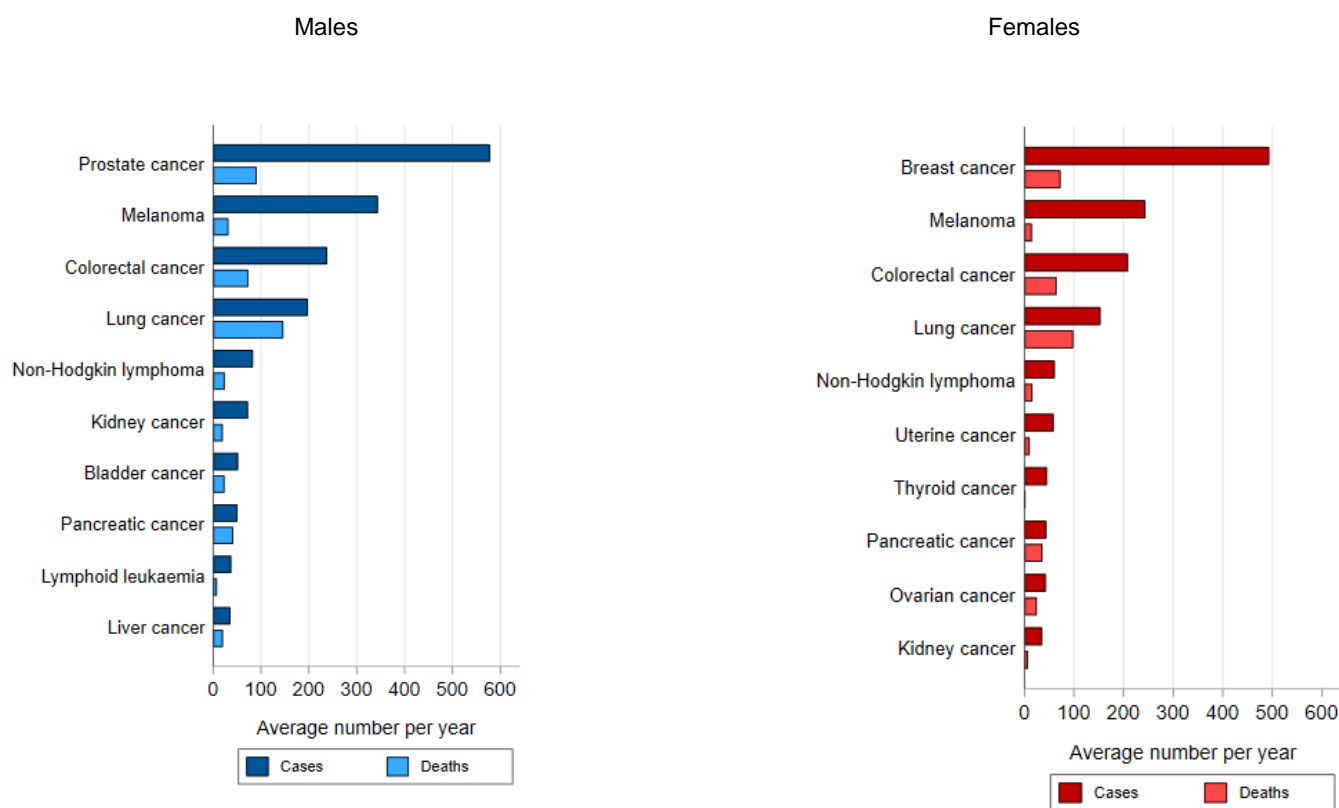
Region Characteristics (2016 data unless otherwise specified)	Gold Coast	Queensland
<b>Per cent of population who ...</b>		
... are female	51.1%	50.4%
... are aged 50 years and over	23.0%	22.9%
... are Indigenous (2015)	1.9%	4.4%
... speak another language at home	11.3%	13.5%
... live in remote areas	0.0%	2.4%
... live within 2 hours drive of radiation treatment	100.0%	90.0%
... live more than 6 hours drive from radiation treatment	0.0%	1.5%
... live in disadvantaged areas	7.0%	17.6%
... live in affluent areas	7.2%	20.1%

All Cancers*	Male	Female	Persons <sup>1</sup>	Number diagnosed by year
Number of new cases per year:	2173	1771	3944	
Chance of diagnosis by age 80: <sup>2</sup>	1 in 2.1	1 in 2.7	1 in 2.4	
Median age at diagnosis:	68 yrs	66 yrs	67 yrs	
Five-year relative survival:	70%	73%	72%	
Number of deaths per year:	685	521	1205	
Percent deaths before age 80:	65%	65%	65%	

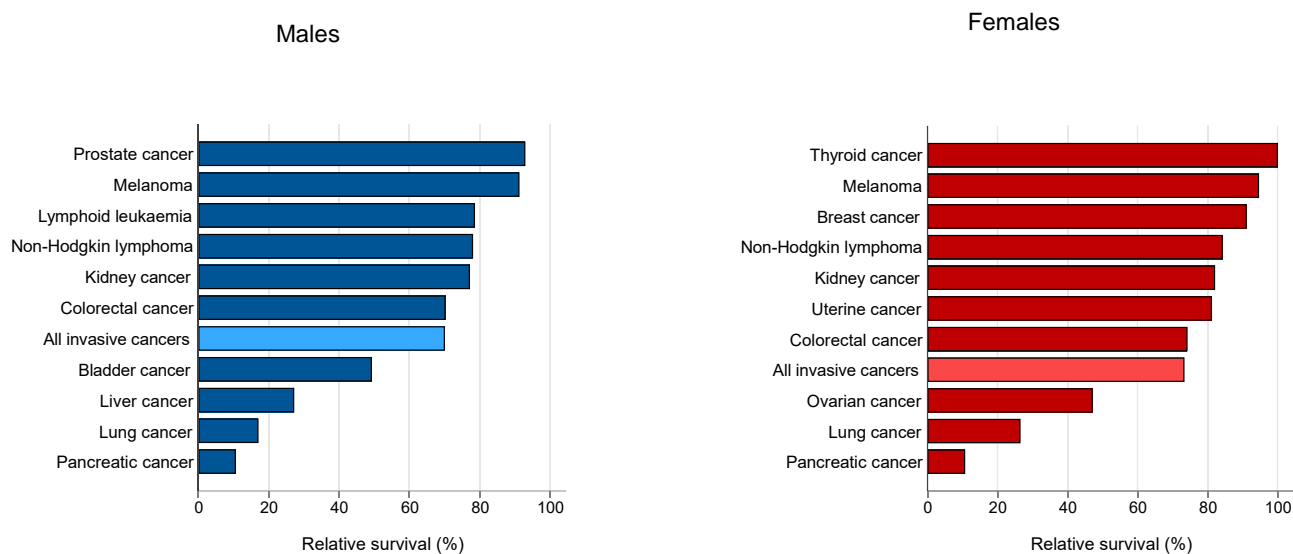
\*See notes on page 4 for more details

- Persons data may not equal the sum of males and females due to rounding.
- Cancers with a lifetime risk above 1 in 5 have the value provided to one decimal point.

## The 10 most common cancers diagnosed in Gold Coast by sex, 2012-2016



## Five-year relative survival in Gold Coast by type of cancer and sex, 2012-2016



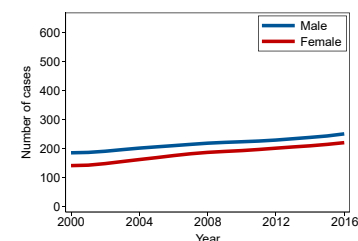
Note: Relative survival calculated using the period method, for persons aged 0-89 years at diagnosis. Data are for "at risk" cases in the period 2012-2016.

## Facts about the most common cancers

### Colorectal Cancer



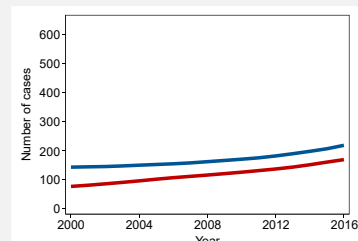
	Male	Female	Persons
Number of new cases per year:	238	208	447
Chance of diagnosis by age 80:	1 in 15	1 in 20	1 in 17
Median age at diagnosis:	69 yrs	72 yrs	70 yrs
Five-year relative survival:	70%	74%	72%
Number of deaths per year:	73	65	138
Percent deaths before age 80:	67%	56%	62%



### Lung Cancer



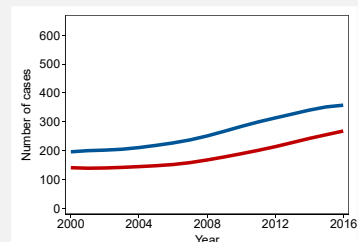
	Male	Female	Persons
Number of new cases per year:	198	153	351
Chance of diagnosis by age 80:	1 in 18	1 in 24	1 in 21
Median age at diagnosis:	71 yrs	71 yrs	71 yrs
Five-year relative survival:	17%	27%	21%
Number of deaths per year:	147	98	245
Percent deaths before age 80:	69%	71%	70%



### Melanoma



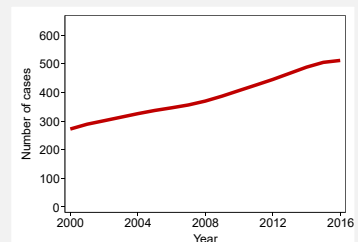
	Male	Female	Persons
Number of new cases per year:	344	244	588
Chance of diagnosis by age 85:	1 in 11	1 in 16	1 in 13
Median age at diagnosis:	66 yrs	59 yrs	64 yrs
Five-year relative survival:	91%	95%	93%
Number of deaths per year:	26	15	47
Percent deaths before age 80:	67%	71%	68%



### Female Breast Cancer



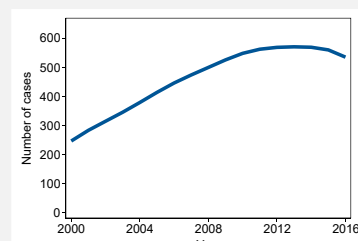
	Female
Number of new cases per year:	493
Chance of diagnosis by age 80:	1 in 8
Median age at diagnosis:	61 yrs
Five-year relative survival:	91%
Number of deaths per year:	73
Percent deaths before age 80:	74%



### Prostate Cancer



	Male
Number of new cases per year:	578
Chance of diagnosis by age 80:	1 in 6
Median age at diagnosis:	68 yrs
Five-year relative survival:	93%
Number of deaths per year:	10
Percent deaths before age 80:	45%



See notes on page 4 for more details. Cancers with a lifetime risk above 1 in 5 have the value provided to one decimal point.

## More details on the top 10 cancers diagnosed

Type of cancer	Incidence <sup>a</sup>		Five-year relative survival <sup>c</sup> (%)	Mortality <sup>a</sup>	
	Average number per year	Annual rate <sup>b</sup> (per 100,000)		Average number per year	Annual rate <sup>b</sup> (per 100,000)
Males					
All invasive cancers	2173	621 [609,633]	70 [69,71]	685	201 [194,207]
Prostate cancer	578	158 [152,163]	93 [91,94]	91	27 [25,30]
Melanoma	344	101 [96,105]	91 [89,93]	32	9 [8,11]
Colorectal cancer	238	69 [65,73]	70 [67,73]	73	22 [19,24]
Lung cancer	198	57 [53,60]	17 [14,20]	147	24 [39,46]
Non-Hodgkin lymphoma	83	24 [22,27]	78 [73,83]	24	7 [6,9]
Kidney cancer	73	21 [19,23]	77 [71,83]	20	6 [5,7]
Bladder cancer	52	15 [13,17]	49 [42,57]	24	7 [6,9]
Pancreatic cancer	51	15 [13,17]	11 [7,16]	42	12 [10,14]
Lymphoid leukaemia	38	11 [9,12]	79 [70,85]	8	2 [2,3]
Liver cancer	36	10 [9,12]	27 [19,36]	20	6 [5,7]
Females					
All invasive cancers	1771	466 [456,476]	73 [72,74]	521	129 [124,134]
Breast cancer	493	132 [127,137]	91 [90,93]	73	19 [17,21]
Melanoma	244	67 [63,71]	95 [93,97]	15	4 [3,5]
Colorectal cancer	208	53 [50,57]	74 [71,78]	65	16 [14,18]
Lung cancer	153	39 [36,42]	27 [23,30]	98	25 [22,27]
Non-Hodgkin lymphoma	61	16 [14,17]	84 [78,89]	16	4 [3,5]
Uterine cancer	59	15 [13,17]	81 [75,86]	11	3 [2,4]
Thyroid cancer	46	13 [12,15]	100 [97,102]	**	**
Pancreatic cancer	44	11 [9,12]	11 [7,16]	36	9 [7,109]
Ovarian cancer	43	11 [10,13]	47 [40,54]	25	6 [5,8]
Kidney cancer	35	9 [8,11]	82 [74,89]	7	2 [1,2]
Persons <sup>d</sup>					
All invasive cancers	3944	538 [530,545]	72 [71,72]	1205	161 [157,165]
Melanoma	588	83 [80,86]	93 [91,94]	47	6 [6,7]
Prostate cancer	578	n.a.	93 [91,94]	91	n.a.
Female breast cancer	493	n.a.	91 [90,93]	73	n.a.
Colorectal cancer	447	61 [58,63]	72 [70,74]	138	19 [17,20]
Lung cancer	351	47 [45,49]	21 [19,23]	245	33 [31,35]
Non-Hodgkin lymphoma	144	20 [18,21]	81 [77,84]	40	5 [5,6]
Kidney cancer	108	15 [13,16]	79 [74,83]	27	4 [3,4]
Pancreatic cancer	95	13 [12,14]	11 [8,14]	78	10 [9,11]
Bladder cancer	72	10 [9,11]	46 [40,53]	35	4 [4,5]
Thyroid cancer	62	9 [8,10]	98 [94,100]	**	**

### Notes:

- Incidence and mortality data are averaged over the 5 year period from 2012-2016.
- Incidence and mortality rates have been directly age-standardised to the 2001 Australian Standard population, with 95% confidence intervals shown in brackets.
- Five-year relative survival calculated using the period method, for persons aged 0-89 years at diagnosis, with 95% confidence intervals shown in brackets. Estimates are for "at risk" cases in the period 2012-2016
- Persons data may not equal the sum of males and females due to rounding.

### Symbols:

\*\* Incidence or mortality counts that averaged less than five per year (and the corresponding rates) have been suppressed to protect confidentiality. Counts and rates for persons have also been suppressed when necessary.

n.a. = not applicable (rates for persons not applicable for sex-specific cancers).

#### Methodology

1. All cancer data are sourced from the Queensland Cancer Register. The access and use of these data for reporting purposes is subject to strict confidentiality and privacy constraints.
2. Census and population data were obtained from the Australian Bureau of Statistics.
3. Population death data used in relative survival calculations were obtained from the Australian Coordinating Registry of Births, Deaths and Marriages.
4. All calculations were performed using Stata v15.
5. Trend lines for incidence numbers have been smoothed using the 'Lowess' method.
6. Remote areas are defined by the Remoteness Areas 2011 classification (combines Remote and Very Remote).
7. Travelling times to radiation treatment are calculated using spatial and road network software, and are approximate based on the shortest road distances at the recommended speed limits.
8. 'Affluent areas' are the 20% of most advantaged Statistical Areas 2 (SA2s) and 'Disadvantaged areas' are the 20% of most disadvantaged SA2s as defined by the 2011 SEIFA Index of Advantage and Disadvantage obtained from the Australian Bureau of Statistics.
9. Relative survival compares overall survival among those diagnosed with cancer to the expected survival of the general population, taking into account age, sex and year of diagnosis.

**Disclaimer:** The information in this publication should not be used as a substitute for advice from a properly qualified medical professional who can advise you about your own individual medical needs. It is not intended to constitute medical advice and is provided for general information purposes only. Information on cancer, including the diagnosis, treatment and prevention of cancer, is constantly being updated and revised by medical professionals and the research community.

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