Regional statistics.

Cancer Council Queensland

Cancer in Greater Brisbane

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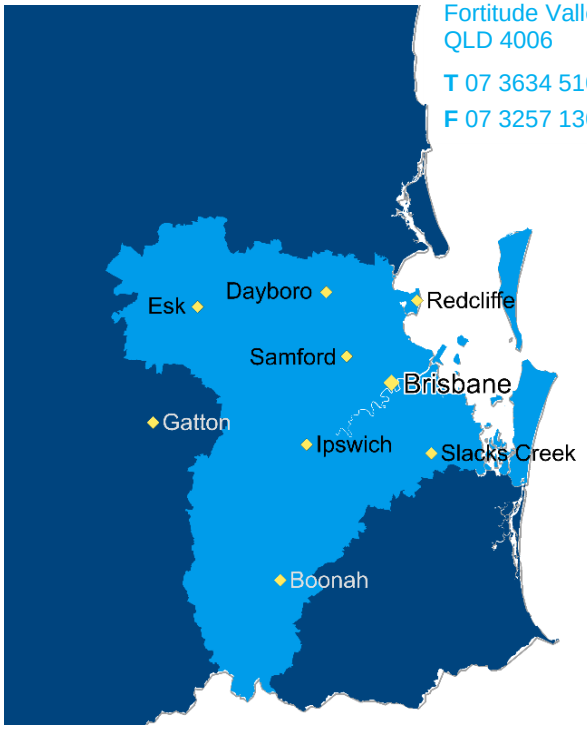
The CCQ region of Greater Brisbane covers only 0.53% of Queensland (9,200 km²). However, its population of 2.14 million in 2016 represented 44% of Queensland's total population.

The Greater Brisbane region has the highest population density of the CCQ regions, and is the commercial and administrative capital of Queensland. In addition to Brisbane City, it includes Ipswich to the west and Redcliffe to the north.

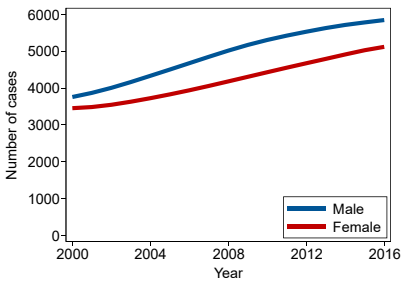
There are currently eight radiation treatment centres in Greater Brisbane – Royal Brisbane and Women's Hospital, Radiation Oncology Princess Alexandra Raymond Terrace (ROPART), Princess Alexandra Hospital, Wesley Hospital, GenesisCare Chermside, Radiation Oncology Centre (ROC) Springfield, ROC North Lakes and ROC Greenslopes. The CCQ Brisbane Office is located in Fortitude Valley.



Region Characteristics (2016 data unless otherwise specified)	Greater Brisbane	Queensland
Per cent of population who ...		
… are female	50.5%	50.4%
… are aged 50 years and over	20.9%	22.9%
… are Indigenous (2015)	2.4%	4.4%
… speak another language at home	17.2%	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	12.5%	17.6%
… live in affluent areas	38.0%	20.1%

All Cancers*	Male	Female	Persons[1]
Number of new cases per year:	5724	4923	10647
Chance of diagnosis by age 80:[2]	1 in 2.2	1 in 2.8	1 in 2.4
Median age at diagnosis:	67 yrs	64 yrs	66 yrs
Five-year relative survival:	72%	75%	73%
Number of deaths per year:	1772	1434	3206
Percent deaths before age 80:	68%	64%	66%

Number diagnosed by year

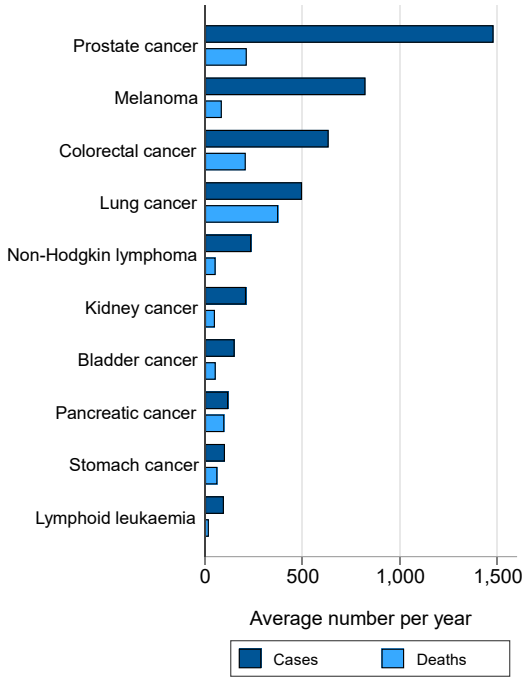


*See notes on page 4 for more details

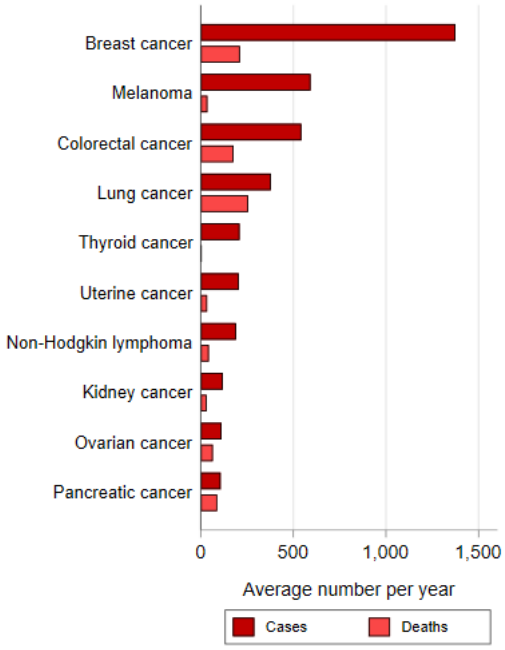
1. Persons data may not equal the sum of males and females due to rounding.
2. Cancers with a lifetime risk above 1 in 5 have the value provided to one decimal point.

The 10 most common cancers diagnosed in Greater Brisbane by sex, 2012-2016

Males

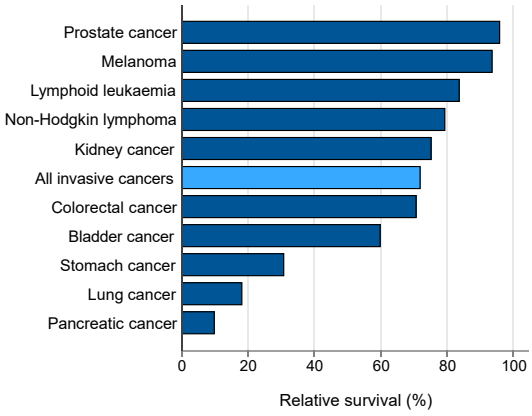


Females

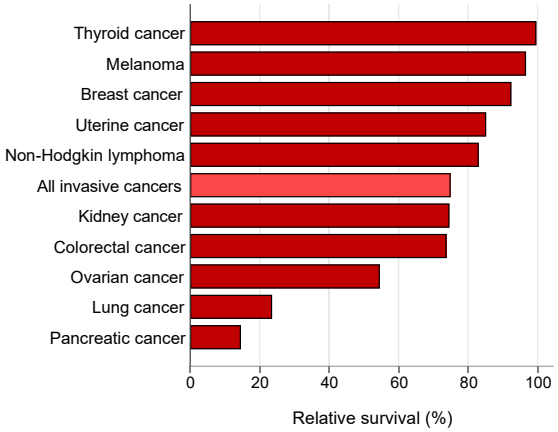


Five-year relative survival in Greater Brisbane by type of cancer and sex, 2012-2016

Males



Females



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.

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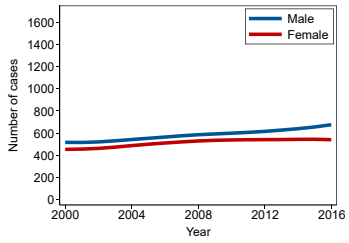
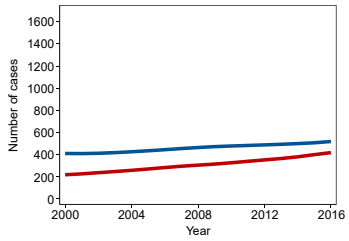
Facts about the most common cancers

Colorectal Cancer	Male	Female	Persons[1]
Number of new cases per year:	635	543	1178
Chance of diagnosis by age 80:	1 in 15	1 in 21	1 in 18
Median age at diagnosis:	69 yrs	71 yrs	70 yrs
Five-year relative survival:	71%	74%	72%
Number of deaths per year:	210	177	387
Percent deaths before age 80:	69%	57%	63%

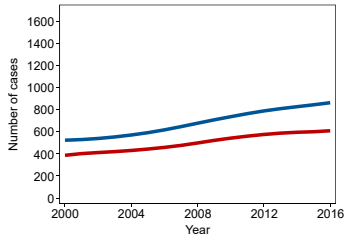
Number diagnosed by year



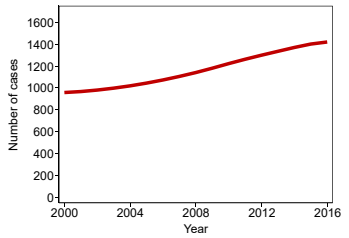
Lung Cancer	Male	Female	Persons[1]
Number of new cases per year:	498	379	877
Chance of diagnosis by age 80:	1 in 18	1 in 26	1 in 21
Median age at diagnosis:	71 yrs	70 yrs	70 yrs
Five-year relative survival:	18%	24%	21%
Number of deaths per year:	376	256	632
Percent deaths before age 80:	73%	74%	73%



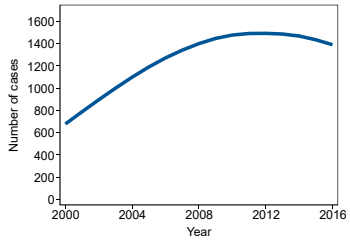
Melanoma	Male	Female	Persons[1]
Number of new cases per year:	824	593	1417
Chance of diagnosis by age 85:	1 in 12	1 in 20	1 in 15
Median age at diagnosis:	64 yrs	59 yrs	62 yrs
Five-year relative survival:	94%	97%	95%
Number of deaths per year:	87	36	123
Percent deaths before age 80:	68%	67%	68%



Female Breast Cancer	Female
Number of new cases per year:	1375
Chance of diagnosis by age 80:	1 in 8
Median age at diagnosis:	60 yrs
Five-year relative survival:	92%
Number of deaths per year:	212
Percent deaths before age 80:	72%



Prostate Cancer	Male
Number of new cases per year:	1481
Chance of diagnosis by age 80:	1 in 6
Median age at diagnosis:	67 yrs
Five-year relative survival:	96%
Number of deaths per year:	215
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.

1. Persons data may not equal the sum of males and females due to rounding.

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More details on the top 10 cancers diagnosed

Type of cancer	Incidence[a] Average number per year	Incidence[a] Annual rate[b] (per 100,000)	Five-year relative survival[c] (%)	Mortality[a] Average number per year	Mortality[a] Annual rate[b] (per 100,000)
Males					
All invasive cancers	5724	602 [595,610]	72 [71,73]	1772	199 [195,203]
Prostate cancer	1481	151 [148,155]	96 [95,97]	215	26 [24,27]
Melanoma	824	86 [83,89]	94 [92,95]	87	10 [9,11]
Colorectal cancer	635	68 [66,71]	71 [69,73]	210	24 [22,25]
Lung cancer	498	55 [53,57]	18 [17,20]	376	42 [40,44]
Non-Hodgkin lymphoma	237	25 [24,27]	79 [76,82]	55	6 [5,7]
Kidney cancer	211	22 [21,23]	75 [72,79]	51	6 [5,6]
Bladder cancer	152	17 [16,18]	60 [55,65]	56	7 [6,7]
Pancreatic cancer	119	13 [12,14]	10 [7,13]	100	11 [10,12]
Stomach cancer	103	11 [10,12]	31 [26,36]	64	7 [6,8]
Lymphoid leukaemia	97	10 [9,11]	84 [79,88]	20	2 [2,3]
Females					
All invasive cancers	4923	459 [454,465]	75 [74,76]	1434	130 [127,133]
Breast cancer	1375	129 [126,133]	92 [92,93]	212	19 [18,20]
Melanoma	593	55 [53,57]	97 [95,98]	36	3 [3,4]
Colorectal cancer	543	50 [48,52]	74 [72,76]	177	16 [15,17]
Lung cancer	379	36 [34,37]	24 [21,26]	256	24 [23,25]
Thyroid cancer	210	20 [19,21]	100 [98,101]	**	**
Uterine cancer	205	19 [18,20]	85 [82,88]	35	3 [3,4]
Non-Hodgkin lymphoma	191	18 [17,19]	83 [80,86]	44	4 [3,4]
Kidney cancer	120	11 [10,12]	75 [70,79]	32	3 [2,3]
Ovarian cancer	113	11 [10,11]	55 [50,59]	66	6 [5,7]
Pancreatic cancer	108	10 [9,11]	15 [11,18]	89	8 [7,9]
Persons[d]					
All invasive cancers	10647	523 [519,528]	73 [73,74]	3206	160 [157,162]
Prostate cancer	1481	n.a.	96 [95,97]	215	n.a.
Melanoma	1417	69 [68,71]	95 [94,96]	123	6 [6,7]
Female breast cancer	1375	n.a.	92 [92,93]	212	n.a.
Colorectal cancer	1178	59 [57,60]	72 [71,74]	387	19 [18,20]
Lung cancer	877	44 [43,45]	21 [19,22]	632	32 [31,33]
Non-Hodgkin lymphoma	428	21 [20,22]	81 [79,83]	99	5 [5,5]
Kidney cancer	331	16 [15,17]	75 [72,78]	83	4 [4,5]
Thyroid cancer	279	14 [13,14]	98 [97,99]	**	**
Pancreatic cancer	227	11 [11,12]	12 [10,14]	189	9 [9,10]
Uterine cancer	205	n.a.	85 [82,88]	35	n.a.

Notes:
a. Incidence and mortality data are averaged over the 5 year period from 2012-2016.
b. Incidence and mortality rates have been directly age-standardised to the 2001 Australian Standard population, with 95% confidence intervals shown in brackets.
c. 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
d. 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 v15.1.
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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