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CANCER

Key Findings

- The total cancer registration rate in the Wairarapa is higher but not significantly than the New Zealand rate.
- The Maori cancer rate is higher than the Other ethnicity rate and increasing faster than the Wairarapa rate and the national Maori rate
- A higher proportion of the population living in areas with a NZDep2001 quintile of 4, 5 and 2 is likely to have cancer than those in other deprivation quintile areas.
- Three cancer types are included in the top ten causes of avoidable mortality for the Wairarapa, Lung cancer, colorectal cancer and breast cancer. The rates of these cancers are not significantly different than national rates.
- Breast screening coverage rates for the Wairarapa region are better than the Central Region and equivalent to the national rate

Strategic Context

Cancer is the second leading cause of death (27 percent) and a major cause of hospitalisation (7 percent) in New Zealand. There are about 17,000 new registrations of cancer each year, with the highest rates in the middle and older age groups. To address this priority, a co-ordinated approach is being developed across prevention activities, early detection (particularly screening), treatment and rehabilitation.

The goals of the New Zealand Cancer Control Strategy are;

1. Reduce the incidence of cancer through primary prevention.
2. Ensure effective screening and early detection to reduce cancer incidence and mortality.
3. Ensure effective diagnosis and treatment to reduce cancer morbidity and mortality.
4. Improve the quality of life for those with cancer, their family and whanau.
5. Improve the delivery of services across the continuum of cancer control through effective planning, coordination and integration of resources and activity, monitoring and evaluation.
6. Improve the effectiveness of cancer control in New Zealand through research and surveillance.

Cancer Rates

The Ministry of Health published *Cancer in New Zealand: Trends and Projections* in 2002. This document identifies that an increased risk of cancer has been identified with two-thirds of the increase due to demographic changes and, in particular, growth in the adult population. The incident rate of 'all adult cancer' (i.e. all adult cancers treated as a

single entity) is predicted to increase for both genders over the next decade but at a slower rate than the past decade. A 6% increase is predicted for females between 1996 and 2011 to an incidence rate of 450 per 100,000 and 7% for males to an incidence rate of 510 per 100,000.

The MoH and NZHIS publication *Cancer: New Registrations and Deaths 1999*, indicates that there is a relatively high proportion of registrations where ethnicity is not recorded. The majority of these are where the diagnosis of cancer has been made in the private sector and the only information available may be the laboratory form, which does not include information about ethnicity. These registrations have been omitted from the analysis and therefore the rates indicated below are understated.

The 1999 cancer registration rate for Maori (300.4 per 100,000 population) was higher than for non-Maori (287.3 per 100,000 population). The Maori female rate (303.6 per 100,000 female population) was nearly equal to the Maori male rate (309.3 per 100,000 male population).

The mortality rate from all adult cancer has fallen from a rate of 261 per 100,000 in 1972 to 181 per 100,000 in 1997, with some rises and falls over that time. The decline in mortality is expected to continue at an accelerated pace to 198 per 100,000 for males and 162 per 100,000 for females by 2012. Maori age standardised cancer mortality rates exceeded those of non-Maori.

Despite the decline in mortality the annual number of cancer deaths is forecast to rise each year reflecting population growth and increase in the proportion ageing.

Prevalence

The total cancer registration rate in the Wairarapa is higher but not significantly than the New Zealand rate.

Figure 1: Wairarapa DHB Cancer registrations, Total ethnicity, Age standardised 1991 – 2000.

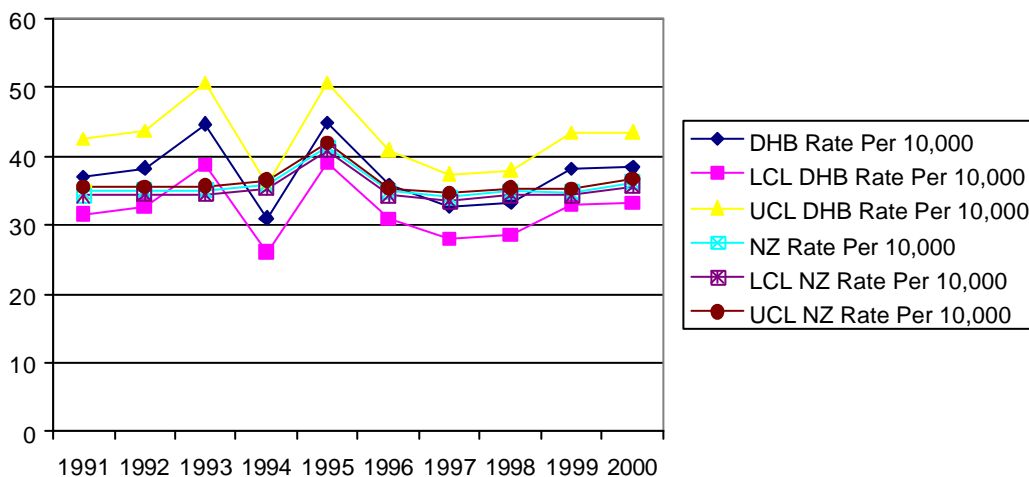
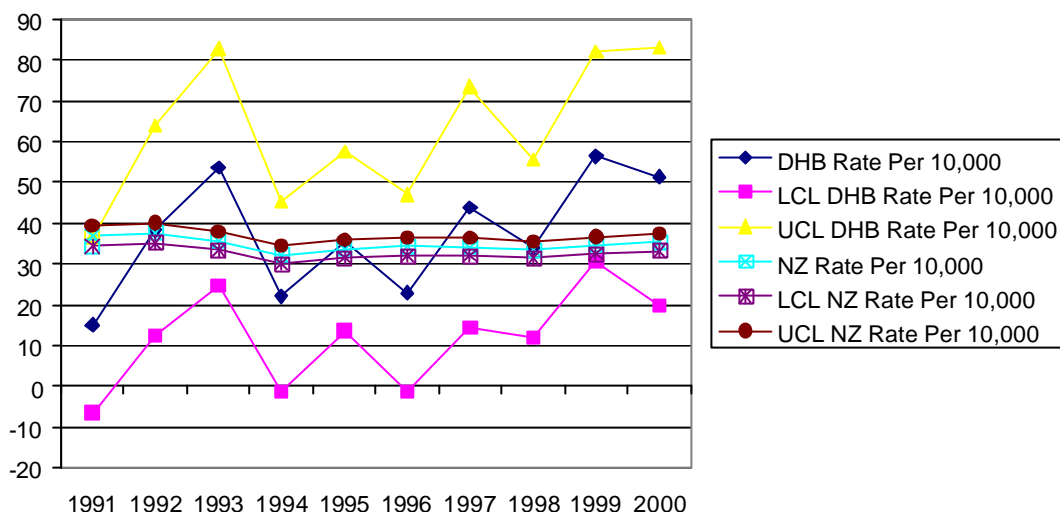


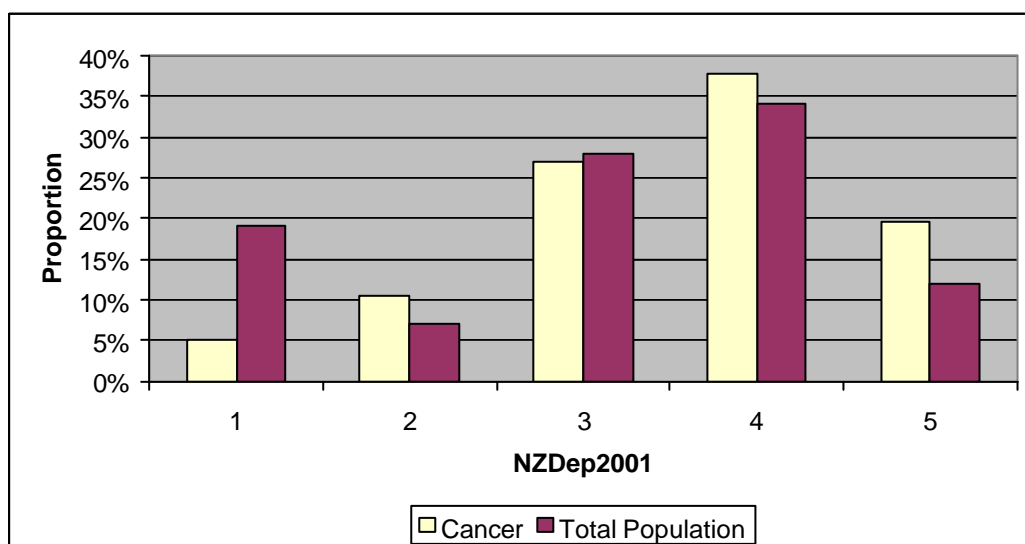
Figure 2: Wairarapa DHB Cancer registrations, Maori Age standardised 1991 – 2000.

The Maori cancer registration rate in the Wairarapa is higher but not significantly than the New Zealand rate. It is higher than the total ethnicity rate and increasing by 2.47 persons per year per 10,000 which is higher than the Wairarapa total ethnicity rate and the national Maori rate.



Cancer registration shows a relationship with deprivation as shown in Figure 3 below. A higher proportion of persons living in areas with a NZDep2001 deprivation quintile of 4, 5 and 2 are likely to have cancer than those in the other deprivation quintiles.

Figure 3: Wairarapa DHB Cancer registrations deprivation proportions 1991 – 2000.



Three cancer types are included in the top ten causes of avoidable mortality for the Wairarapa, Lung cancer, colorectal cancer and breast cancer. These are discussed in more detail below, however “Fact Sheets” are available for all major cancers in the appendices.

The fact sheets are for cancer registrations, avoidable hospitalisations, all hospitalisations, avoidable mortality, and all mortality. They contain information and trends for standardised rates for NZ and Wairarapa by ethnic group, age/gender distributions, and Territorial Local Authority rates (although small numbers in many TAs mean caution must be taken with interpretation).