

CANCER IN TASMANIA
INCIDENCE AND MORTALITY
1998

CANCER IN TASMANIA INCIDENCE AND MORTALITY 1998

**Menzies Centre for
Population Health Research**

University of Tasmania

Tasmanian Cancer Registry

17 Liverpool Street

Hobart Tasmania Australia 7000

Postal address:

GPO Box 252-23

Hobart Tasmania Australia 7001

Telephone (03) 6226 7714

Facsimile (03) 6226 7704

URL: www.menzies.utas.edu.au/

Email: tcr@utas.edu.au

Editors: Pavlides S, Venn A, Blizzard L, Dwyer T.

Publication date: May 2001



The Department of Health and Human Services in Tasmania provides funding for salaries and some running costs while the Menzies Centre provides housing, administrative, biostatistics, computing and all other relevant services. The clerical staff and volunteers of the Registry are commended for their commitment and efforts towards achieving 100% accuracy. This requires unremitting attention to detail. The work of collecting and collating cancer registry data would be much more difficult and time consuming without the continuing assistance of a number of people. These include staff members of:

Medical Records Departments of all Tasmanian hospitals

WP Holman Clinics in Launceston and Hobart

Private and public pathology laboratories

The Registry of Births, Deaths and Marriages

The Australian Bureau of Statistics

We thank doctors in private practice who responded to our written queries for additional information.

Citation

The following citation is suggested in referring to this report:

The Tasmanian Cancer Registry, Menzies Centre for Population Health Research 2001. Cancer in Tasmania: Incidence and Mortality 1998. Hobart: Menzies Centre for Population Health Research, University of Tasmania

The Tasmanian Cancer Registry	4
Introduction	4
Sources of data	4
Data handling.	4
Data collection and coding practices	5
Data control and quality assurance	5
All Cancers	6
All cancers combined, incidence and mortality, 1998	6
All cancers combined, time trends, 1978 – 98	7
Common Cancers	8
Common cancers diagnosed in males, 1998	8
Common cancer-related deaths in males, 1998	8
Common cancers diagnosed in females, 1998	9
Common cancer-related deaths in females, 1998	9
Regional Distribution of Cancers	10
Female Breast Cancer 1997 – 98	11
Tumour size	11
Lymph node involvement	11
Ovarian Cancer	12
Incidence and Mortality, 1998	12
Incidence and Mortality, 1978 – 98.	12
Ovarian cancer time trends, 1978 – 98.	13
Bladder Cancer	14
Incidence and Mortality, 1998	14
Incidence and Mortality, 1978 – 98.	14
Bladder cancer time trends, 1978 – 98.	16
Cancer Incidence and Mortality Tables, 1998	17
Appendices	39
Appendix A: Cancer Codes and Specific Coding Practices	40
Appendix B: Statistical Methods and Calculations	42
Appendix C: Demography of Tasmania	43
Appendix D: Use of Cancer Registry Data	44
Appendix E: Guidelines for Cancer Data Release.	45
Appendix F: Cancer Notification Legislation and Confidentiality of Information.	46
Appendix G: Cancer Registry Staff, Volunteers and Committee Members	47
Appendix H: Incidence and Mortality Summaries, 1998	48

Introduction

The Tasmanian Cancer Registry was established in 1977 as a population-based registry covering the whole State. The Registry was set up for the purpose of providing the State Government with accurate cancer incidence and mortality statistics and to provide the capacity to monitor cancer trends. In July 1988 the responsibility for the operation of the Cancer Registry was transferred from the Department of Health Services to the Menzies Centre for Population Health Research, University of Tasmania. Cancers were proclaimed as notifiable diseases in December 1992 and cancer registration since then has had a legislative basis.

The Registry is assisted by an Advisory Committee and a Data Release Committee. The Registry staff currently comprises a Director, Registrar, Administrative Assistant, Medical Coder and a Clerical Assistant. Volunteers also assist with the paper data handling. The Registry has access to a biostatistician and a computer consultant. The Tasmanian Cancer Registry is a full member of the Australasian Association of Cancer Registries and the International Association of Cancer Registries.

Sources of data

All pathology laboratories in the State provide the Registry with copies of histopathological and cytology reports of cancer and cell marker reports. Discharge summaries are supplied by the two radiation oncology clinics. Private and public hospitals notify diagnoses of cancer to the Registry upon discharge of patients or provide a computerised listing of cancer cases periodically. Copies of death certificates of people dying in Tasmania are reviewed for mention of cancer as a cause of death. Since 1994 breast and cervical cancer screening programs have been undertaken in Tasmania and listings from these sources are available to check against Registry records. Interstate registries supply data to the Tasmanian Cancer Registry on Tasmanian residents who seek treatment interstate or who move interstate at some time after cancer diagnosis.

Data handling

Paper copies of all data are retained and a file is maintained for each cancer case. Paper records for persons deceased are archived two years after death. Data are entered into software provided by the South Australian Cancer Registry. Only one tumour per ICD-9 site can be recorded and updated as new data are supplied.

Registration of cancers of the cervix, breast, lung, and melanoma were fast-tracked to assist cervical cancer and breast cancer screening programs and to help with research projects on melanoma and lung cancer. The Tasmanian Cancer Registry still collects all pathology reports of non-melanoma skin cancers (NMSC) and stores them annually in alphabetic order. NMSC is not routinely entered onto the database and incidence is no longer regularly reported due to resource considerations. Deaths from NMSC are reported annually.

Most reports are prepared with software provided by the computer consultant or the South Australian Cancer Registry. The SAS statistical package is used for further data analysis.

Data collection and coding practices

Data collected by the Registry include demographic data for the cancer patient, cancer site and morphology, date of diagnosis, date and cause of death, and the names of the providers of medical care (see Appendix F). Additional tumour data are collected for melanoma, breast and haematological cancers.

Complete registration details are recorded for the first primary cancer for each 3-digit topography site. In situ cancers and second primary cancers with the same three-digit site code are also recorded but are not included in this report. Multiple primary cancers are counted according to the rules set out by the International Association of Cancer Registries.

The primary site of cancer is coded according to IARC International Classification of Diseases, ninth edition (ICD-9) and morphology according to SNOMED-II and ICD-O-2. Coding practices specific to the Tasmanian Cancer Registry are detailed in Appendix A.

Data control and quality assurance

A case flagging system is used to identify data that are entered in error. Data matching programs are used to identify incorrect spellings, name changes upon marriage and date of birth inconsistencies. Before any analyses, a duplicate-checking program is run to identify and delete double entries. In addition, the National Cancer Statistics Clearing House collates all State and Territory data and checks for duplicate registrations across two or more States.

Data are obtained from multiple sources. Most case registrations will include data from both a pathology laboratory and a hospital service (either as an inpatient or at the radiotherapy clinics). Data quality is high because there is verification from more than one source.

Where insufficient information is received to enable complete registration, active follow-up is undertaken. Information is sought from treating doctors and from public hospital medical records.

Tissue examination (histology, cytology, and haematology) is considered to be the most accurate diagnostic method. The percentage of cases with tissue examination is an indicator of the quality of the data. For 1998, 93% of all registered cases had a diagnosis on the basis of tissue examination.

In some circumstances, the only cancer notification received by the Tasmanian Cancer Registry is a death certificate, often occurring where neither pathology nor hospitalisation were appropriate for the care of the individual. Cases are not accepted by the Registry on the basis of death certificate only. Each death certificate notification is actively followed up until the time and place of diagnosis are ascertained and the diagnosis verified. If the diagnostic details cannot be confirmed, the case is not registered.

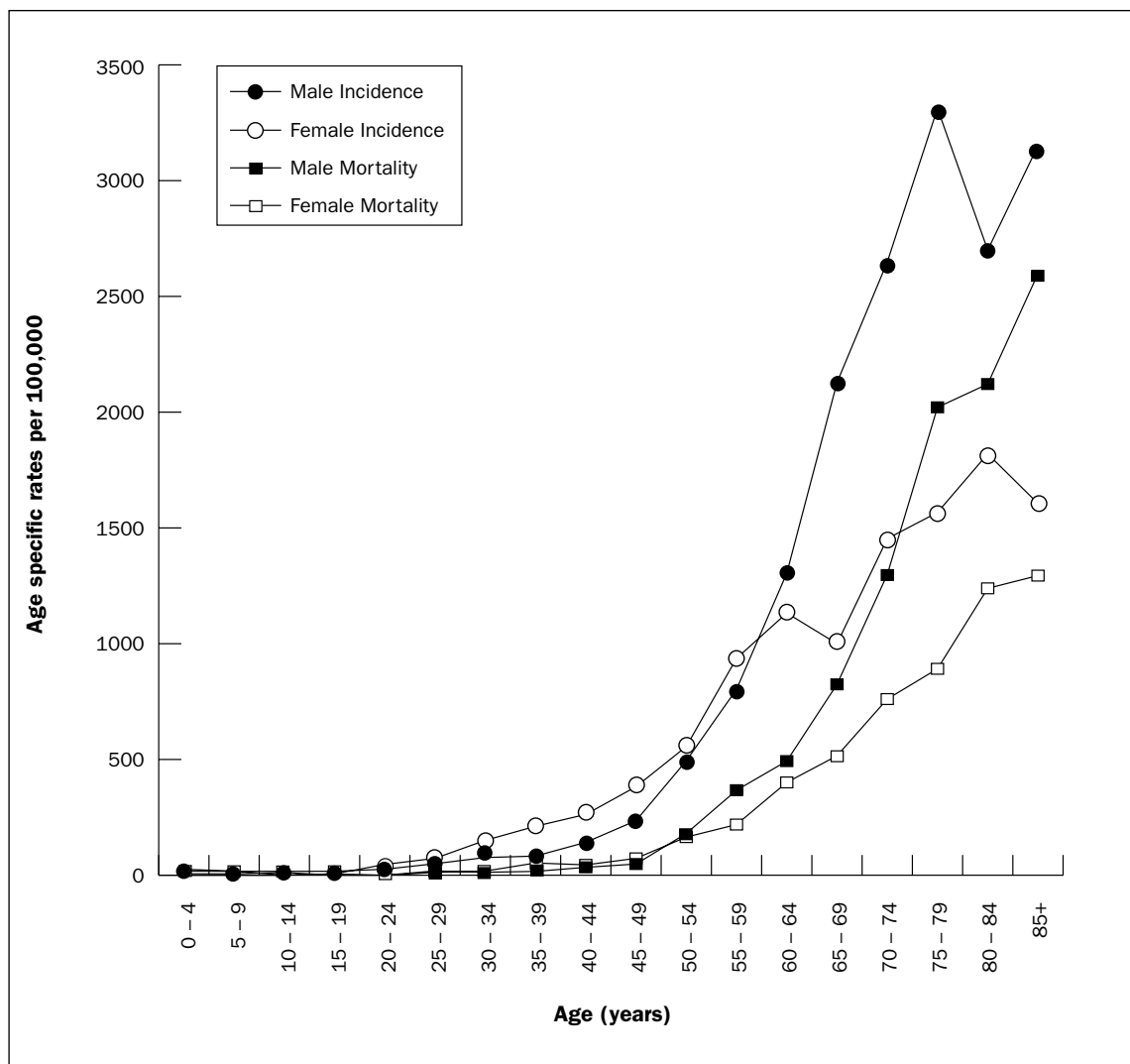
All cancers combined, incidence and mortality, 1998

There were 2,126 new cases of cancer (excluding non-melanocytic skin cancers) diagnosed among Tasmanian residents during 1998 (1,123 males and 1,003 females). The overall age standardised incidence was 333 per 100,000 in males and 278 per 100,000 in females.

The risk of developing any cancer by the age of 75 years was approximately 1 in 3. This risk estimate does not include the risk of developing non-melanocytic skin cancer.

Cancer incidence generally increased with age (Figure 1). Male rates exceeded female rates for Tasmanians aged 60 years or over. Prostate cancer and lung cancer were responsible for the greater male cancer incidence at these ages. Breast cancer accounted for the slightly higher female rates among younger women.

Figure 1: Age-specific incidence and mortality for all cancers (excluding non-melanocytic skin cancers), 1998



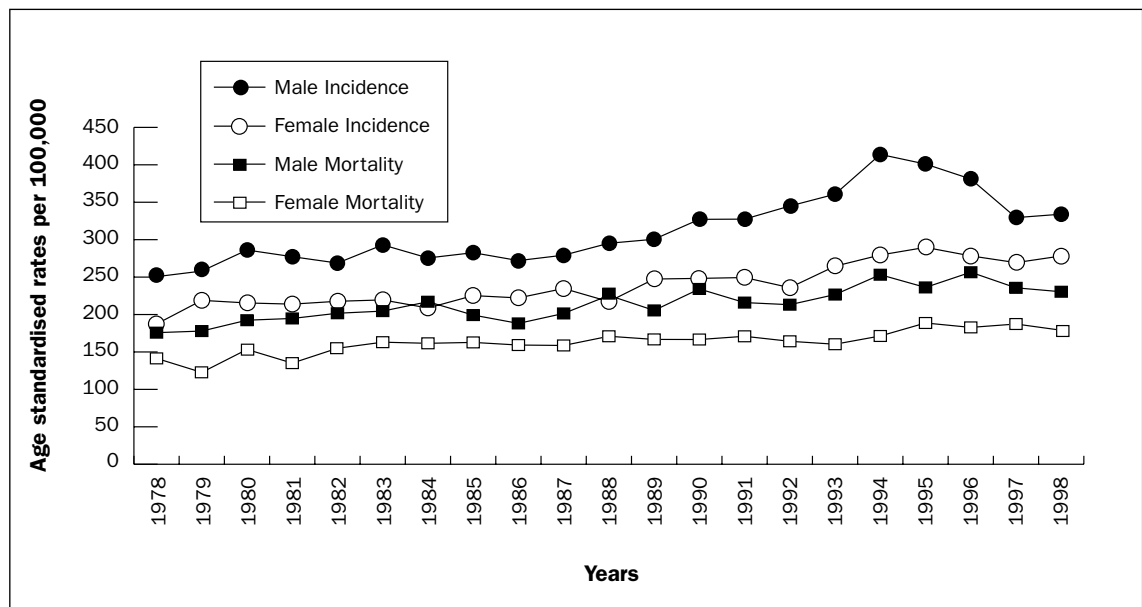
Among Tasmanian residents there were 971 cancer related deaths in 1998 (542 males and 429 females). The overall age standardised mortality was 148 per 100,000 for males and 100 per 100,000 for females. The risk of dying of cancer by age 75 years was 1 in 6 for males and 1 in 9 for females.

All cancers combined, time trends, 1978 – 98

The incidence of all cancers combined (excluding non-melanocytic skin cancers) increased by more than 30% during the 21-year period 1978 – 98 (comparing 1997 – 98 with 1978 – 79, the increase was 30.4% for males and 34.7% for females). Some of the largest increases were observed for prostate cancer in men and breast cancer in women. Those increases in incidence coincided with the greater use of PSA testing for prostate cancer in men and the introduction of mammography screening for breast cancer in women

Whilst incidence has been increasing, mortality rates have remained relatively stable. As can be seen from Figure 2, the difference between incidence and death rates has widened in consequence.

Figure 2: Trends in age standardised incidence and mortality of all cancers (excluding non-melanocytic skin cancers), 1978 – 98

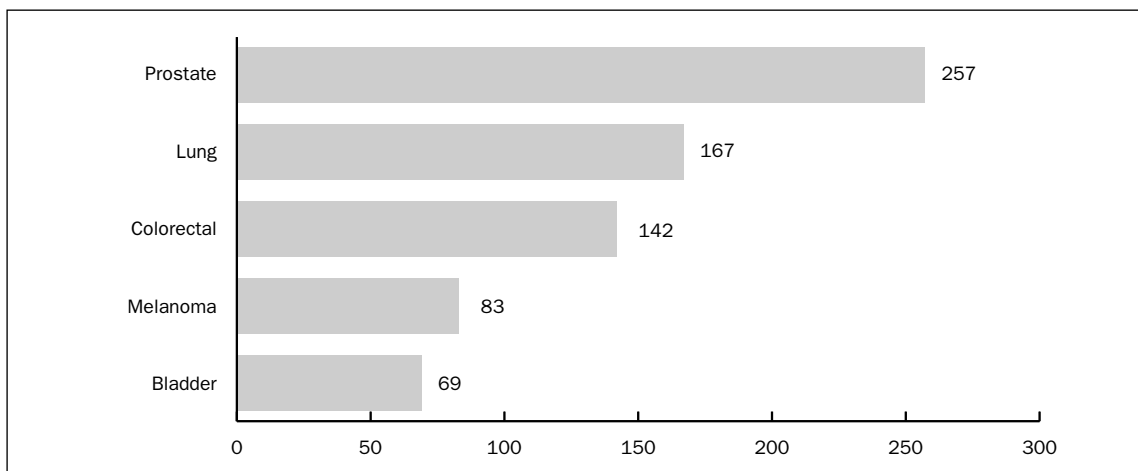


The five most common cancers diagnosed in 1998 accounted for 64% of all cancers in males and 63% of all cancers in females. Cancers of unknown primary site accounted for 5% of all cancers.

Common cancers diagnosed in males, 1998

The most common cancer in males was prostate cancer (23%), followed by lung cancer (15%), colorectal cancer (13%), melanoma skin cancer (7%) and bladder cancer (6%). While the number of prostate cancer cases was much greater than any other cancer, prostate cancer numbers have continued to decline since the peak in 1994 when 420 new prostate cancer cases were reported.

Figure 3: Common cancers, 1998: males

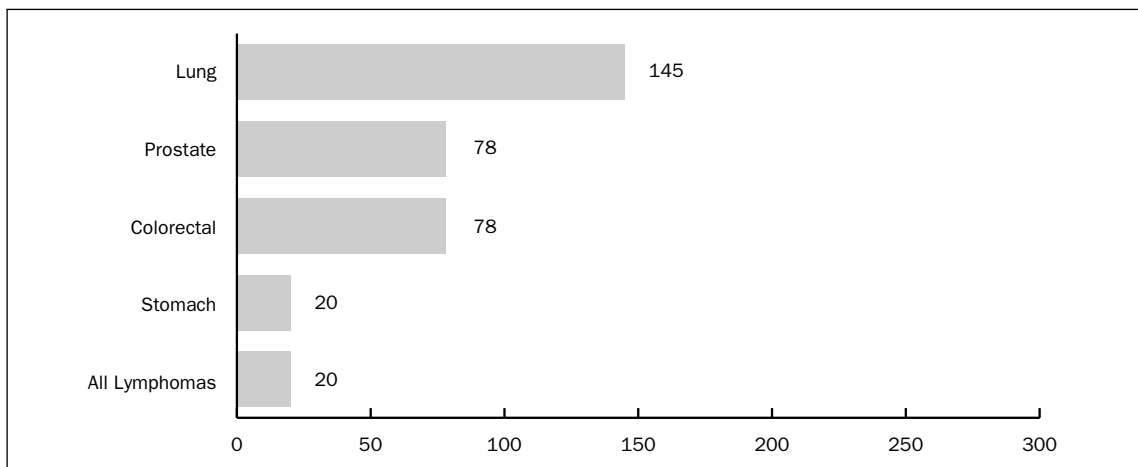


Common cancer-related deaths in males, 1998

Lung cancer accounted for 27% of all cancer-related deaths in male Tasmanian residents in 1998, followed by prostate cancer (14%) and colorectal cancer (14%).

The next most common causes of cancer deaths were stomach cancer (4%) and lymphomas (4%).

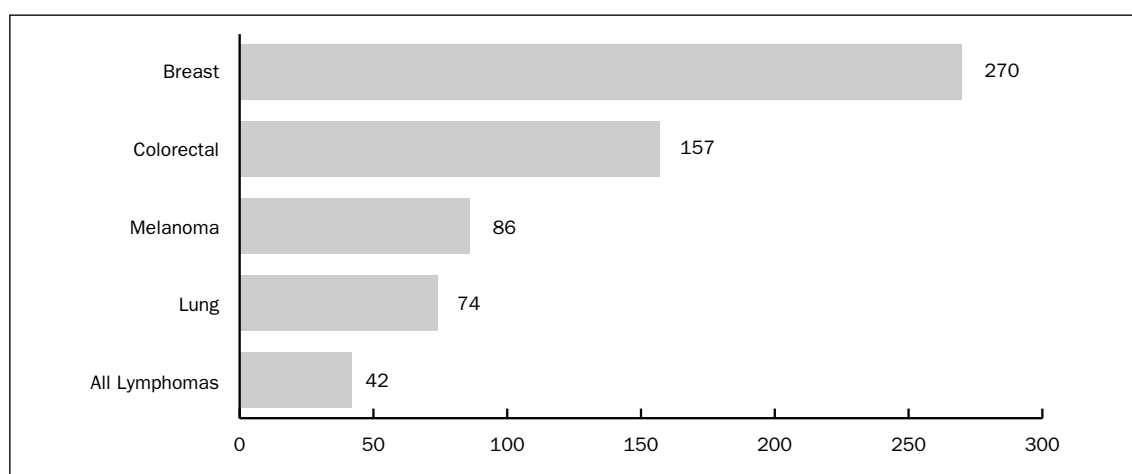
Figure 4: Common causes of cancer-related deaths, 1998: males



Common cancers diagnosed in females, 1998

The most common cancer in females was breast cancer, accounting for 27% of all cancer in females, followed by colorectal cancer (16%), melanoma skin cancer (9%), lung cancer (7%) and lymphomas (4%).

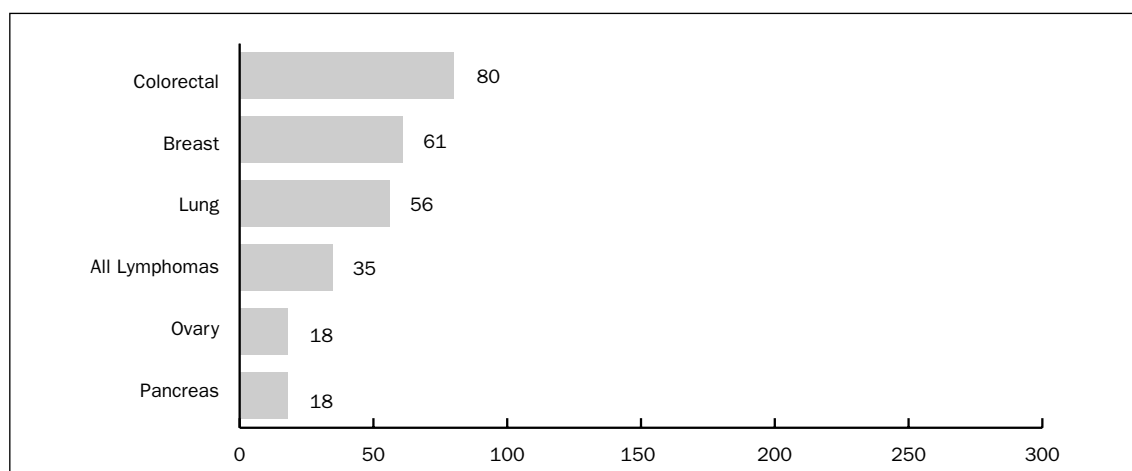
Figure 5: Common cancers, 1998: females



Common cancer-related deaths in females, 1998

The most common causes of cancer-related deaths in female Tasmania residents in 1998 were colorectal cancer (19%), breast cancer (14%), lung cancer (13%), lymphomas (8%) and pancreatic cancer (4%).

Figure 6: Common causes of cancer related deaths, 1998: females



The regional distribution for each cancer site is shown as the number of cases and the percentage of cases for each cancer site in each statistical division (Table 1). This information is based on recorded postcode of residence.

On the basis of population numbers in each of the statistical divisions, the distribution of cancers would be expected to be 49% in the south, 28% in the north and 23% in the Mersey-Lyell division. Variation around that distribution can be expected due to chance occurrences and differences in the age distribution between the regional populations.

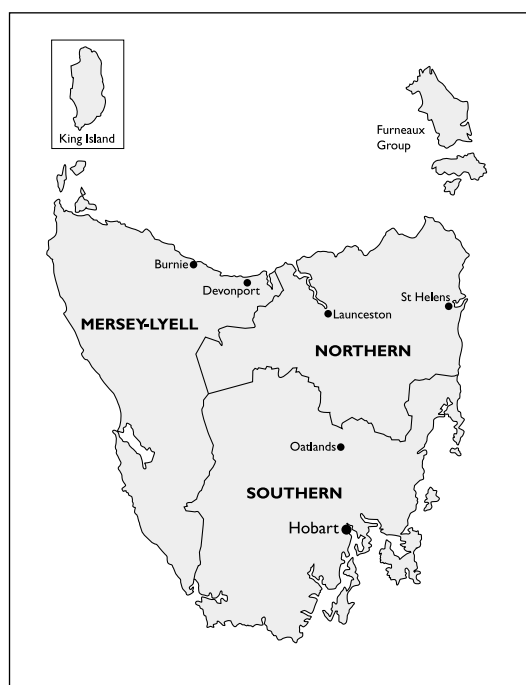


Table 1: Regional distribution of cancer incidence for all sites with a minimum of 50 new cases, 1998

ICD-9	Site	Southern 229,502 (49%)	Northern 133,177 (28%)	Mersey-Lyell 109,021 (23%)	Total 471,700* (100%)
153-4	Colorectal	132 (44%)	82 (28%)	85 (28%)	299
174-5	Breast (male & female)	155 (57%)	70 (26%)	46 (17%)	271
185	Prostate	138 (54%)	77 (30%)	42 (16%)	257
162	Lung	131 (54%)	65 (27%)	45 (19%)	241
172	Melanoma	88 (52%)	41 (24%)	40 (24%)	169
199	Unspecified site	54 (54%)	25 (25%)	21 (21%)	100
200-2	All lymphomas	49 (52%)	20 (21%)	26 (27%)	95
188	Bladder	41 (44%)	31 (34%)	20 (22%)	92
189	Kidney	37 (53%)	20 (28%)	13 (19%)	70

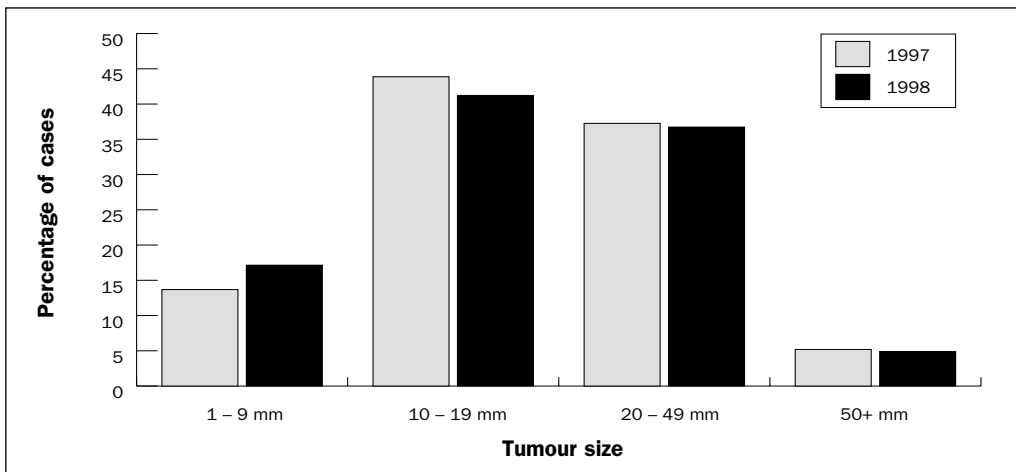
* Estimated Resident Population at June 1998 (ABS)

In Tasmania, tumour size and lymph node involvement, in relation to breast cancer, were first recorded by the Registry in 1997 when funding was provided to all Australian cancer registries for this purpose.

Tumour size

In 1998, all 270 primary breast cancer cases (female) were histologically examined. Information about tumour size was available for 245 (91%) of these cases. For these tumours, 42 (17%) were less than 10mm in diameter, 101 (41%) were between 10 and 19mm, 90 (37%) were between 20 and 49mm, and 12 (5%) were greater than 50mm in diameter. Figure 7 compares categories of tumour size in 1997 and 1998.

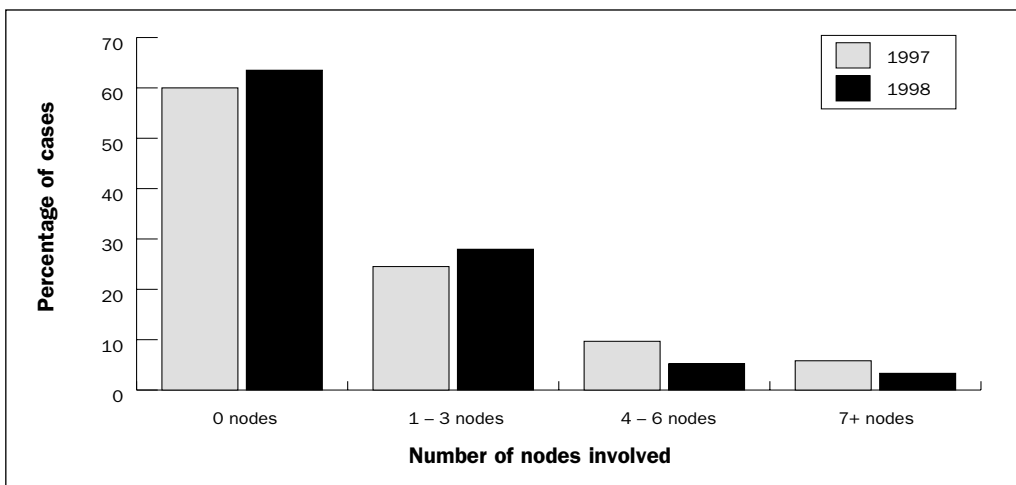
Figure 7: Breast cancer, 1997 – 98: size of histologically-confirmed tumours



Lymph node involvement

Of the 245 tumours that were histologically examined and tumour size determined, lymph nodes were investigated in 211 (86%) of cases. Where nodal status was examined, 134 (64%) cases were classified as lymph node negative. Figure 8 compares categories of lymph node involvement in 1997 and 1998.

Figure 8: Breast cancer, 1997 – 98: lymph node involvement



Incidence and Mortality, 1998

Ovarian cancer was the eighth most common cancer in Tasmanian female residents in 1998, with 32 new cases of ovarian cancer recorded, representing 3% of all new cancers. Ovarian cancer is the principal cause of death from gynaecological malignancies. There were 18 ovarian cancer related deaths in 1998 in Tasmania, representing 4% of all cancer-related deaths.

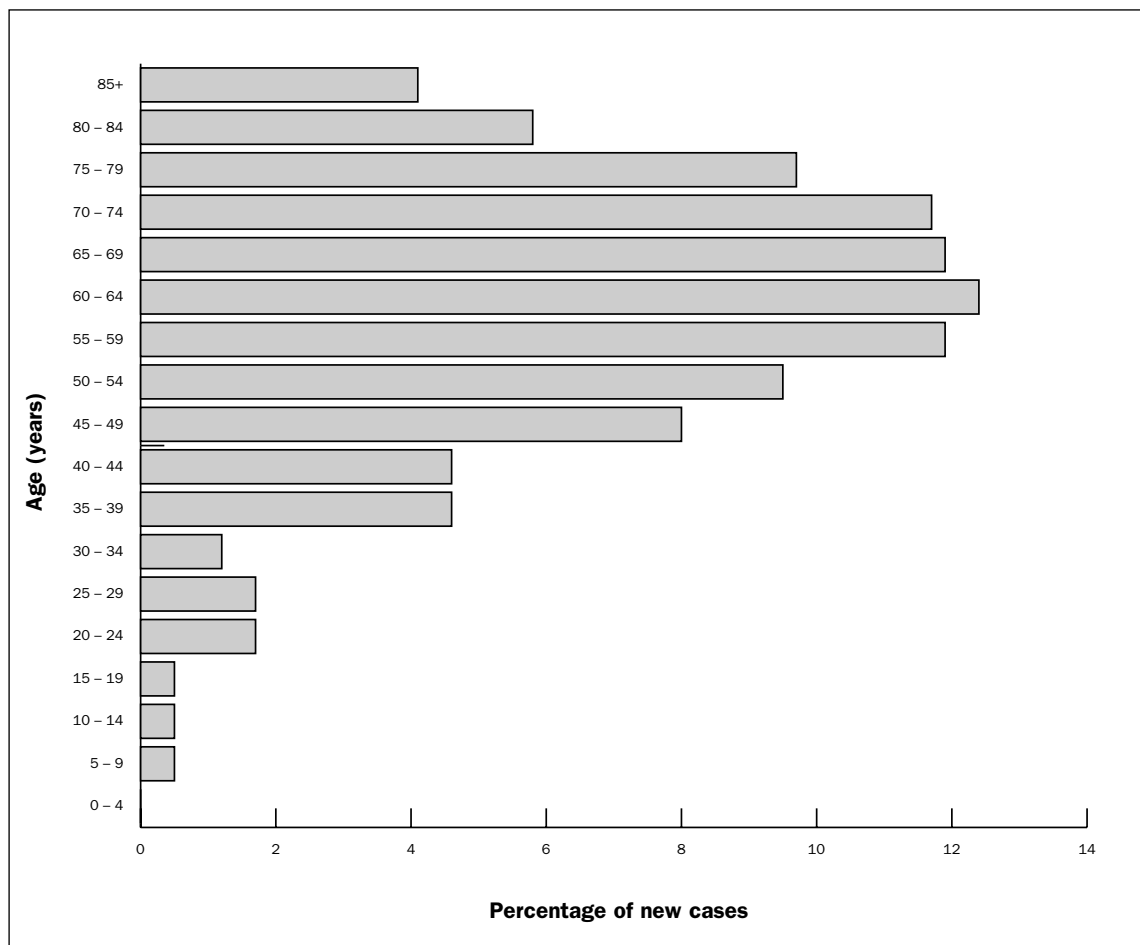
In 1998, the age standardised incidence of ovarian cancer was 10 per 100,000. At the age-specific rates that year, the lifetime risk of a woman developing ovarian cancer by the age of 75 was 1 in 77. The age standardised mortality rate of ovarian cancer was 4.3 per 100,000.

Incidence and Mortality, 1978 – 98

The age distribution of women with ovarian cancer in 1978 – 98 is shown in Figure 9.

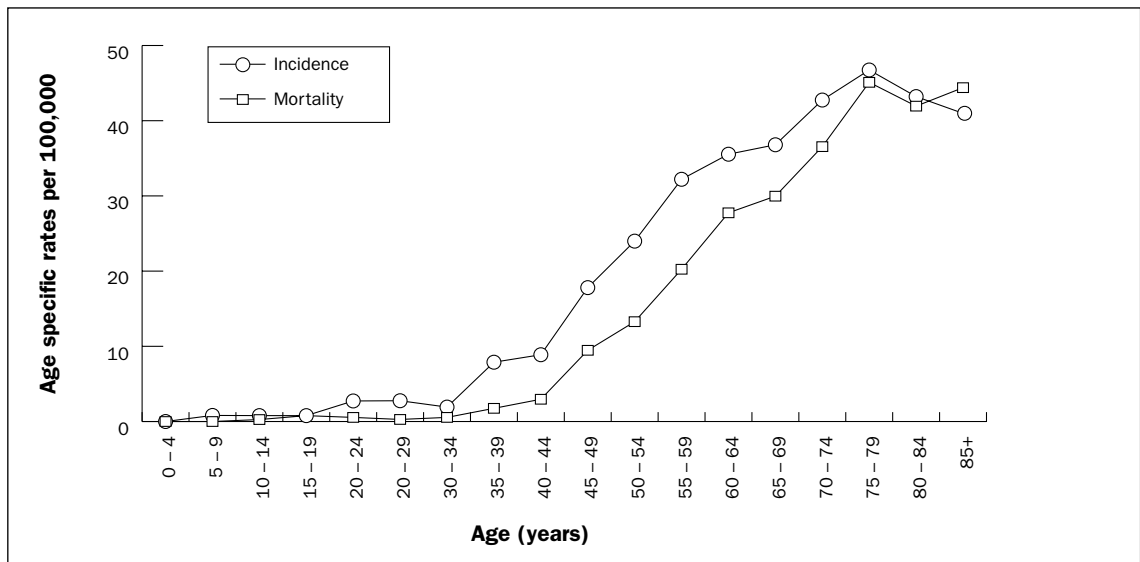
The median age at diagnosis was 62 years.

Figure 9: Percentage of new cases of ovarian cancer, 1978 – 98



Ovarian cancer incidence and mortality rates increase with age as shown in Figure 10.

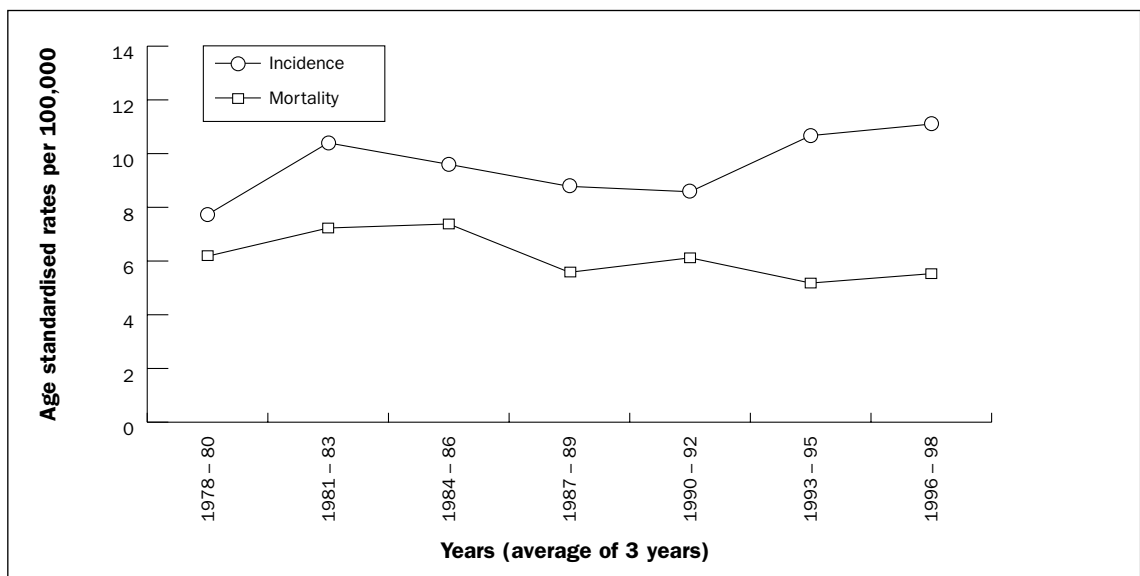
Figure 10: Age specific incidence and mortality rates of ovarian cancer, 1978 – 98



Ovarian cancer, time trends, 1978 – 98

Overall, ovarian cancer incidence and mortality rates have been relatively stable over the 21 years as shown in Figure 11. The difference between incidence and mortality rates is relatively small, reflecting the generally poor prognosis for women with ovarian cancer.

Figure 11: Trends in age standardised incidence and mortality rates of ovarian cancer, 1978 – 98



Risk Factors

The risk of ovarian cancer is increased in women who have not had children, and in women who have a family history of the disease. Risk is reduced in women who have used the oral contraceptive pill.

Incidence and Mortality, 1998

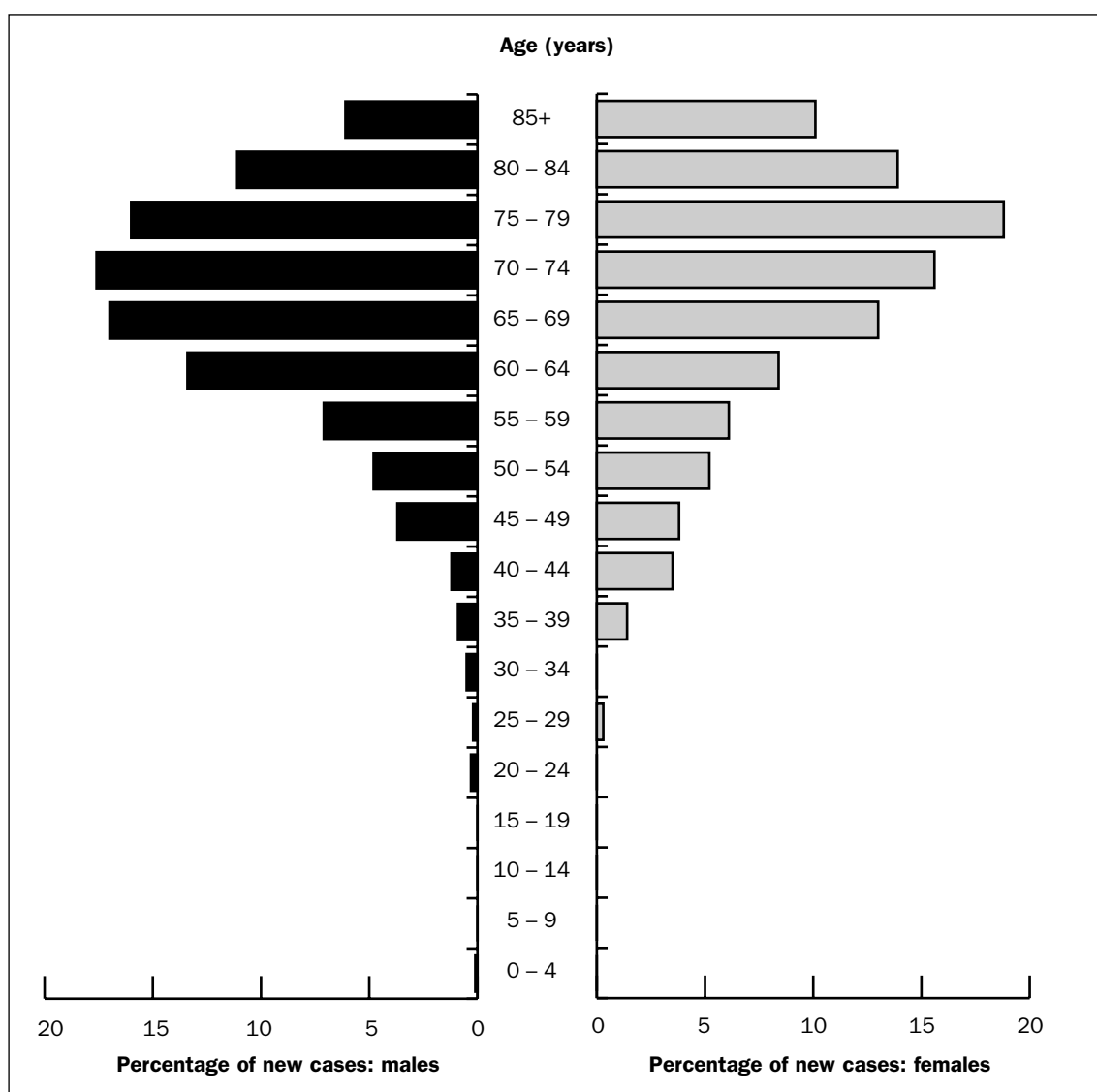
Bladder cancer is the fifth most common cancer in men and the 11th most common cancer in women, with 69 new cases of bladder cancer recorded in men and 23 new cases of bladder cancer recorded in women resident in Tasmania in 1998. There were 21 bladder cancer related deaths in 1998 in Tasmania (12 men and 9 women).

In 1998, the age standardised incidence of bladder cancer was 20 per 100,000 men and 5 per 100,000 women. At the age-specific rates that year, the lifetime risk of a man developing bladder cancer by the age of 75 was 1 in 53, and 1 in 250 for a woman. The age standardised mortality of bladder cancer was 3 per 100,000 for men and 1 per 100,000 for women in 1998.

Incidence and Mortality, 1978 – 98

The age distribution of males and females with bladder cancer in 1978 – 98 is shown in Figure 12. The median age at diagnosis was 70 years for males and 72 years for females.

Figure 12: Percentage of new cases of bladder cancer, 1978 – 98



Bladder cancer incidence and mortality rates increase with age as shown in Figure 13.

Figure 13: Age specific incidence and mortality rates for bladder cancer, 1978 – 98

Males



Females

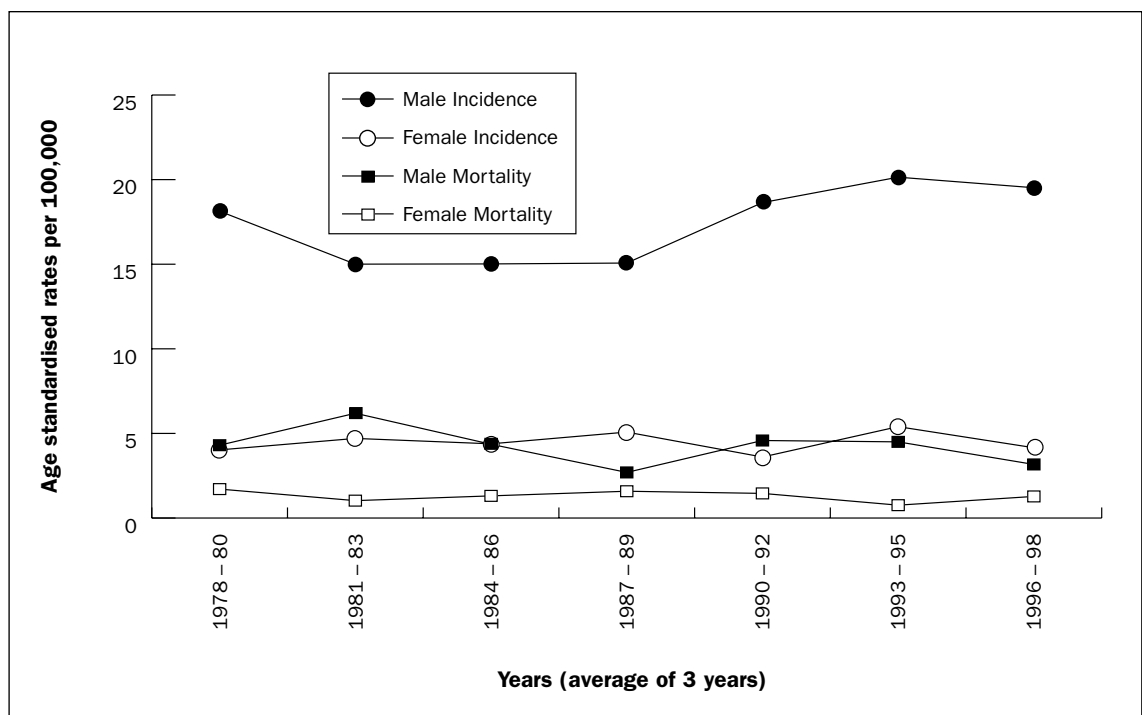


Bladder cancer, time trends, 1978 – 98

In 1994, there was a change in the Registry's coding rules for bladder cancers of uncertain behaviour. This contributed to a small increase in the incidence of bladder cancer reported by the Registry after this time.

Overall, bladder cancer incidence and mortality rates for Tasmanian women have been relatively stable over the 21 years. The increase in bladder cancer incidence in Tasmanian men in the 1990s, which coincides with national trends, is possibly explained by the increase in screening for prostate cancer. Some bladder cancers are found in the course of diagnostic work-up for prostate cancer.

Figure 14: Bladder cancer, 1978 – 98: 21 year trends



Risk Factors

Smoking is the most important risk factor for bladder cancer in Australia.

J A N U A R Y 1 9 9 8 - D E C E M B E R 1 9 9 8

CANCER IN TASMANIA INCIDENCE AND MORTALITY 1998

- Numbers of new cases and deaths
- Age-specific rates per 100,000
- Cumulative rates
- Crude and age standardised rates per 100,000

CANCER INCIDENCE AND MORTALITY (January 1998 - December 1998)

ICD 9: New Cases, Deaths, Crude, Cumulative and Age Standardised Rates by Site, Sex, and Age Group.

Ages	0-4	5-9	10-14	15-19	20-24	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69	70-74	75-79	80-84	85+	Total	Crude Rate	Cumul Rate	Stand Rate
143. GUM																						
Cases																						
M	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
F	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Incidence per 100,000																						
M	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
F	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Deaths																						
M	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
F	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Mortality Rate per 100,000																						
M	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
F	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
144. FLOOR OF MOUTH																						
Cases																						
M	-	-	-	-	-	-	-	-	-	-	2	2	-	-	-	-	-	-	1	5	-	-
F	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	1	-	-
Incidence per 100,000																						
M	-	-	-	-	-	-	-	-	-	-	13.4	17.1	-	-	-	-	-	-	55.3	2.1	0.2	1.6
F	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	24.0	0.4	-	0.1
Deaths																						
M	-	-	-	-	-	-	-	-	-	-	1	-	1	-	-	-	-	-	-	2	-	-
F	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Mortality Rate per 100,000																						
M	-	-	-	-	-	-	-	-	-	-	6.7	-	10.3	-	-	-	-	-	-	0.9	0.1	0.7
F	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
145. OTHER MOUTH																						
Cases																						
M	-	-	-	-	-	-	-	-	-	-	1	-	1	1	-	-	-	-	-	3	-	-
F	-	-	-	-	-	-	-	-	-	-	2	1	1	-	-	-	-	-	1	5	-	-
Incidence per 100,000																						
M	-	-	-	-	-	-	-	-	-	-	6.7	-	10.3	11.1	-	-	-	-	-	1.3	0.1	1.1
F	-	-	-	-	-	-	-	-	-	-	13.7	8.8	10.0	-	-	-	-	-	24.0	2.1	0.2	1.5
Deaths																						
M	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-	1	-	-
F	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	1	-	-
Mortality Rate per 100,000																						
M	-	-	-	-	-	-	-	-	-	-	-	-	-	-	13.0	-	-	-	-	0.4	0.1	0.3
F	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	13.5	-	-	-	0.4	-	0.1

CANCER INCIDENCE AND MORTALITY (January 1998 - December 1998)

ICD 9: New Cases, Deaths, Crude, Cumulative and Age Standardised Rates by Site, Sex, and Age Group.

Ages	0-4	5-9	10-14	15-19	20-24	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69	70-74	75-79	80-84	85+	Total	Crude Rate	Cumul Rate	Stand Rate
149. OTHER PHARYNX																						
Cases																						
M	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-	1			
F	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	1	-	-	2			
Incidence per 100,000																						
M	-	-	-	-	-	-	-	-	-	-	-	-	-	11.1	-	-	-	-		0.4	0.1	0.3
F	-	-	-	-	-	-	-	-	-	-	-	-	-	10.5	-	13.5	-	-		0.8	0.1	0.5
Deaths																						
M	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-			
F	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	1			
Mortality Rate per 100,000																						
M	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-			
F	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	13.5	-	-		0.4	-	0.1
150. OESOPHAGUS																						
Cases																						
M	-	-	-	-	-	-	-	-	1	1	2	2	4	1	3	-	-	3	17			
F	-	-	-	-	-	-	-	-	-	-	-	-	-	1	1	1	1	2	6			
Incidence per 100,000																						
M	-	-	-	-	-	-	-	-	5.7	6.0	13.4	17.1	41.1	11.1	38.9	-	-	165.8		7.3	0.7	5.4
F	-	-	-	-	-	-	-	-	-	-	-	-	-	10.5	11.4	13.5	19.4	47.9		2.5	0.1	1.0
Deaths																						
M	-	-	-	-	-	-	-	-	2	-	2	1	2	1	3	1	1	5	18			
F	-	-	-	-	-	-	-	-	-	-	-	1	2	-	-	1	-	3	7			
Mortality Rate per 100,000																						
M	-	-	-	-	-	-	-	-	11.4	-	13.4	8.5	20.5	11.1	38.9	18.7	32.1	276.4		7.7	0.5	5.0
F	-	-	-	-	-	-	-	-	-	-	-	8.8	20.0	-	-	13.5	-	71.9		2.9	0.1	1.6
151. STOMACH																						
Cases																						
M	-	-	-	-	-	-	-	-	-	-	3	-	3	5	10	4	2	2	29			
F	-	-	-	-	-	-	-	-	1	1	-	2	3	1	2	5	1	-	16			
Incidence per 100,000																						
M	-	-	-	-	-	-	-	-	-	-	20.0	-	30.8	55.7	129.8	74.9	64.3	110.6		12.5	1.2	8.1
F	-	-	-	-	-	-	-	-	5.6	6.1	-	17.5	30.1	10.5	22.7	67.5	19.4	-		6.7	0.5	4.2
Deaths																						
M	-	-	-	-	-	-	-	-	1	-	1	-	5	2	4	2	3	2	20			
F	-	-	-	-	-	-	-	-	1	-	-	1	3	-	4	2	3	-	14			
Mortality Rate per 100,000																						
M	-	-	-	-	-	-	-	-	5.7	-	6.7	-	51.3	22.3	51.9	37.4	96.4	110.6		8.6	0.7	5.8
F	-	-	-	-	-	-	6.0	-	-	-	-	8.8	30.1	-	45.4	27.0	58.1	-		5.9	0.5	3.4

CANCER INCIDENCE AND MORTALITY (January 1998 - December 1998)
 ICD 9: New Cases, Deaths, Crude, Cumulative and Age Standardised Rates by Site, Sex, and Age Group.

Ages	0-4	5-9	10-14	15-19	20-24	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69	70-74	75-79	80-84	85+	Total	Crude Rate	Cumul Rate	Stand Rate	
152. SMALL INTESTINE																							
Cases																							
M	-	-	-	-	-	-	-	-	-	1	1	-	-	1	1	-	-	-	4				
F	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	1				
Incidence per 100,000																							
M	-	-	-	-	-	-	-	-	-	6.0	6.7	-	-	11.1	13.0	-	-	-		1.7	0.2	1.3	
F	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	19.4	-		0.4	-	0.1	
Deaths																							
M	-	-	-	-	-	1	-	-	-	-	-	-	-	-	1	-	-	-	2				
F	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-	1				
Mortality Rate per 100,000																							
M	-	-	-	-	-	6.2	-	-	-	-	-	-	-	-	13.0	-	-	-		0.9	0.1	0.8	
F	-	-	-	-	-	-	-	-	-	-	-	-	-	10.5	-	-	-	-		0.4	0.1	0.3	
153. COLON																							
Cases																							
M	-	-	-	-	-	-	-	1	2	4	4	7	9	19	19	11	5	3	84				
F	-	-	-	-	-	1	2	-	-	4	4	10	14	10	21	20	14	12	112				
Incidence per 100,000																							
M	-	-	-	-	-	-	-	5.5	11.4	24.2	26.7	59.8	92.4	211.7	246.7	205.8	160.7	165.8		36.1	3.4	24.9	
F	-	-	-	-	-	6.1	12.0	-	-	24.3	27.4	87.5	140.3	105.3	238.5	270.2	271.1	287.6		46.8	3.2	26.6	
Deaths																							
M	-	-	-	-	-	-	-	-	1	2	2	7	3	5	18	5	5	3	51				
F	-	-	-	-	-	-	-	-	-	2	1	1	3	6	8	9	9	10	49				
Mortality Rate per 100,000																							
M	-	-	-	-	-	-	-	-	5.7	12.1	13.4	59.8	30.8	55.7	233.7	93.6	160.7	165.8		21.9	2.1	14.3	
F	-	-	-	-	-	-	-	-	-	12.1	6.9	8.8	30.1	63.2	90.8	121.6	174.2	239.6		20.5	1.1	9.6	
154. RECTUM																							
Cases																							
M	-	-	-	-	-	-	-	-	-	1	4	4	7	14	14	4	7	3	58				
F	-	-	-	-	-	-	-	-	-	1	5	3	7	5	6	5	8	5	45				
Incidence per 100,000																							
M	-	-	-	-	-	-	-	-	-	6.0	26.7	34.2	71.9	156.0	181.7	74.9	225.0	165.8		24.9	2.4	17.0	
F	-	-	-	-	-	-	-	-	-	6.1	34.3	26.3	70.1	52.6	68.1	67.5	154.9	119.8		18.8	1.3	10.9	
Deaths																							
M	-	-	-	-	-	-	-	-	-	1	2	3	2	3	1	6	7	2	27				
F	-	-	-	-	-	-	-	-	1	1	-	3	1	2	4	7	2	6	4	31			
Mortality Rate per 100,000																							
M	-	-	-	-	-	-	-	-	-	6.0	13.4	25.6	20.5	33.4	13.0	112.3	225.0	110.6		11.6	0.6	7.1	
F	-	-	-	-	-	-	-	-	5.3	5.6	-	20.6	8.8	20.0	42.1	79.5	27.0	116.2	95.9		13.0	0.9	7.0

CANCER INCIDENCE AND MORTALITY (January 1998 - December 1998)

ICD 9: New Cases, Deaths, Crude, Cumulative and Age Standardised Rates by Site, Sex, and Age Group.

Ages	0-4	5-9	10-14	15-19	20-24	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69	70-74	75-79	80-84	85+	Total	Crude Rate	Cumul Rate	Stand Rate	
155. LIVER																							
Cases																							
M	2	-	-	-	-	-	-	-	-	1	-	-	1	1	1	1	-	-	-	7			
F	-	-	-	-	-	-	-	1	-	-	-	1	-	-	1	-	-	-	-	3			
Incidence per 100,000																							
M	12.0	-	-	-	-	-	-	-	-	6.0	-	-	10.3	11.1	13.0	18.7	-	-	-	3.0	0.3	3.0	
F	-	-	-	-	-	-	-	5.3	-	-	-	8.8	-	-	11.4	-	-	-	-	1.3	0.1	0.9	
Deaths																							
M	-	-	-	-	-	-	-	-	-	1	-	1	1	2	2	-	2	-	-	9			
F	-	-	-	-	-	-	-	1	-	-	-	-	-	-	-	-	-	-	-	1			
Mortality Rate per 100,000																							
M	-	-	-	-	-	-	-	-	-	6.0	-	8.5	10.3	22.3	26.0	-	64.3	-	-	3.9	0.4	2.7	
F	-	-	-	-	-	-	-	5.3	-	-	-	-	-	-	-	-	-	-	-	0.4	-	0.3	
156. GALL BLADDER																							
Cases																							
M	-	-	-	-	-	-	-	-	-	-	-	2	-	1	-	-	1	-	-	4			
F	-	-	-	-	-	-	-	-	-	-	-	1	-	3	2	-	2	-	-	8			
Incidence per 100,000																							
M	-	-	-	-	-	-	-	-	-	-	-	17.1	-	11.1	-	-	32.1	-	-	1.7	0.1	1.2	
F	-	-	-	-	-	-	-	-	-	-	-	8.8	-	31.6	22.7	-	38.7	-	-	3.3	0.3	2.0	
Deaths																							
M	-	-	-	-	-	-	-	-	-	-	-	1	-	-	1	2	2	-	-	6			
F	-	-	-	-	-	-	-	-	-	-	-	-	1	3	2	1	2	-	-	9			
Mortality Rate per 100,000																							
M	-	-	-	-	-	-	-	-	-	-	-	8.5	-	-	13.0	37.4	64.3	-	-	2.6	0.1	1.4	
F	-	-	-	-	-	-	-	-	-	-	-	-	10.0	31.6	22.7	13.5	38.7	-	-	3.8	0.3	2.2	
157. PANCREAS																							
Cases																							
M	-	-	-	-	-	-	-	-	-	-	2	-	1	4	-	7	2	1	-	17			
F	-	-	-	-	-	-	-	-	-	2	2	2	3	4	2	3	3	2	-	23			
Incidence per 100,000																							
M	-	-	-	-	-	-	-	-	-	-	13.4	-	10.3	44.6	-	131.0	64.3	55.3	-	7.3	0.3	4.3	
F	-	-	-	-	-	-	-	-	-	12.1	13.7	17.5	30.1	42.1	22.7	40.5	58.1	47.9	-	9.6	0.7	6.0	
Deaths																							
M	-	-	-	-	-	-	-	-	1	-	2	-	1	5	1	4	1	3	-	18			
F	-	-	-	-	-	-	-	-	-	2	2	2	3	-	2	3	2	2	-	18			
Mortality Rate per 100,000																							
M	-	-	-	-	-	-	-	-	5.7	-	13.4	-	10.3	55.7	13.0	74.9	32.1	165.8	-	7.7	0.5	4.9	
F	-	-	-	-	-	-	-	-	-	12.1	13.7	17.5	30.1	-	22.7	40.5	38.7	47.9	-	7.5	0.5	4.6	

CANCER INCIDENCE AND MORTALITY (January 1998 - December 1998)

ICD 9: New Cases, Deaths, Crude, Cumulative and Age Standardised Rates by Site, Sex, and Age Group.

Ages	0-4	5-9	10-14	15-19	20-24	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69	70-74	75-79	80-84	85+	Total	Crude Rate	Cumul Rate	Stand Rate
160. NASAL CAVITIES																						
Cases																						
M	-	-	-	-	-	-	-	-	-	-	2	-	1	-	-	-	-	-	3			
F	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-	-	1			
Incidence per 100,000																						
M	-	-	-	-	-	-	-	-	-	-	13.4	-	10.3	-	-	-	-	-		1.3	0.1	1.1
F	-	-	-	-	-	-	-	-	-	-	-	-	10.0	-	-	-	-	-		0.4	0.1	0.4
Deaths																						
M	-	-	-	-	-	-	-	-	-	-	1	-	1	1	-	-	-	-	3			
F	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-			
Mortality Rate per 100,000																						
M	-	-	-	-	-	-	-	-	-	-	6.7	-	10.3	11.1	-	-	-	-		1.3	0.1	1.1
F	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-		-	-	-
161. LARYNX																						
Cases																						
M	-	-	-	-	-	-	-	-	1	1	2	1	1	2	4	-	2	1	15			
F	-	-	-	-	-	-	-	-	-	-	-	-	1	-	1	-	-	-	2			
Incidence per 100,000																						
M	-	-	-	-	-	-	-	-	5.7	6.0	13.4	8.5	10.3	22.3	51.9	-	64.3	55.3		6.4	0.6	4.4
F	-	-	-	-	-	-	-	-	-	-	-	-	10.0	-	11.4	-	-	-		0.8	0.1	0.6
Deaths																						
M	-	-	-	-	-	-	-	-	-	-	-	-	1	-	1	1	-	-	3			
F	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-			
Mortality Rate per 100,000																						
M	-	-	-	-	-	-	-	-	-	-	-	-	10.3	-	13.0	18.7	-	-		1.3	0.1	0.9
F	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-		-	-	-
162. LUNG																						
Cases																						
M	-	-	-	-	-	-	-	-	-	3	9	17	22	34	42	26	12	2	167			
F	-	-	-	-	-	-	-	-	-	2	2	10	8	10	14	15	10	3	74			
Incidence per 100,000																						
M	-	-	-	-	-	-	-	-	18.1	60.1	145.2	225.9	378.8	545.2	486.5	385.7	110.6		71.8	6.9	48.9	
F	-	-	-	-	-	-	-	-	12.1	13.7	87.5	80.2	105.3	159.0	202.6	193.6	71.9		30.9	2.3	17.9	
Deaths																						
M	-	-	-	-	-	-	-	-	1	2	7	18	17	23	34	25	11	7	145			
F	-	-	-	-	-	-	-	-	-	5	5	4	8	8	11	10	5	5	56			
Mortality Rate per 100,000																						
M	-	-	-	-	-	-	-	-	5.7	12.1	46.8	153.7	174.6	256.2	441.4	467.8	353.6	387.0		62.3	5.5	41.4
F	-	-	-	-	-	-	-	-	-	34.3	43.8	40.1	84.2	90.8	148.6	193.6	119.8		23.4	1.5	12.5	

CANCER INCIDENCE AND MORTALITY (January 1998 - December 1998)

ICD 9: New Cases, Deaths, Crude, Cumulative and Age Standardised Rates by Site, Sex, and Age Group.

Ages	0-4	5-9	10-14	15-19	20-24	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69	70-74	75-79	80-84	85+	Total	Crude Rate	Cumul Rate	Stand Rate
163. PLEURA																						
Cases																						
M	-	-	-	-	-	-	-	-	-	-	-	-	1	2	2	-	-	-	5			
F	-	-	-	-	-	-	-	-	-	-	1	-	1	-	-	-	-	-	2			
Incidence per 100,000																						
M	-	-	-	-	-	-	-	-	-	-	-	-	10.3	22.3	26.0	-	-	-		2.1	0.3	1.6
F	-	-	-	-	-	-	-	-	-	-	6.9	-	10.0	-	-	-	-	-		0.8	0.1	0.7
Deaths																						
M	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	1	1	3			
F	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-			
Mortality Rate per 100,000																						
M	-	-	-	-	-	-	-	-	-	-	-	-	-	11.1	-	-	32.1	55.3		1.3	0.1	0.7
F	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-		-	-	-
164. THYMUS																						
Cases																						
M	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-			
F	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-			
Incidence per 100,000																						
M	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-			
F	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-			
Deaths																						
M	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-			
F	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-			
Mortality Rate per 100,000																						
M	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-			
F	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-			
170. BONE																						
Cases																						
M	-	-	-	-	-	-	-	-	1	-	-	1	-	-	-	-	-	-	2			
F	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-			
Incidence per 100,000																						
M	-	-	-	-	-	-	-	-	5.7	-	-	8.5	-	-	-	-	-	-		0.9	0.1	0.7
F	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-		-	-	-
Deaths																						
M	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	1			
F	-	-	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1			
Mortality Rate per 100,000																						
M	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	18.7	-	-		0.4	-	0.2
F	-	-	5.7	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-		0.4	-	0.5

CANCER INCIDENCE AND MORTALITY (January 1998 - December 1998)
 ICD 9: New Cases, Deaths, Crude, Cumulative and Age Standardised Rates by Site, Sex, and Age Group.

Ages	0-4	5-9	10-14	15-19	20-24	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69	70-74	75-79	80-84	85+	Total	Crude Rate	Cumul Rate	Stand Rate
171. SOFT TISSUES																						
Cases																						
M	-	-	-	-	-	-	-	1	-	2	1	1	2	-	1	2	1	-	11			
F	-	-	-	-	-	-	-	1	-	2	-	-	-	-	1	-	4	-	8			
Incidence per 100,000																						
M	-	-	-	-	-	-	-	5.5	-	12.1	6.7	8.5	20.5	-	13.0	37.4	32.1	-		4.7	0.3	3.4
F	-	-	-	-	-	-	-	5.3	-	12.1	-	-	-	-	11.4	-	77.4	-		3.3	0.1	1.7
Deaths																						
M	-	-	-	-	-	-	-	-	-	-	1	-	1	-	-	-	-	-	2			
F	-	-	-	-	-	-	-	1	-	-	-	-	-	1	-	-	1	-	3			
Mortality Rate per 100,000																						
M	-	-	-	-	-	-	-	-	-	-	6.7	-	10.3	-	-	-	-	-		0.9	0.1	0.7
F	-	-	-	-	-	-	-	5.3	-	-	-	-	-	10.5	-	-	19.4	-		1.3	0.1	0.7
172. MELANOMA OF SKIN																						
Cases																						
M	-	-	-	1	1	3	2	4	3	7	8	7	6	11	13	9	2	6	83			
F	-	-	-	1	3	5	4	11	10	7	3	11	10	6	5	2	3	5	86			
Incidence per 100,000																						
M	-	-	-	5.7	6.5	18.7	12.7	22.0	17.0	42.3	53.4	59.8	61.6	122.5	168.8	168.4	64.3	331.7		35.7	3.0	26.1
F	-	-	-	6.0	20.0	30.4	24.1	58.1	55.9	42.5	20.6	96.3	100.2	63.2	56.8	27.0	58.1	119.8		36.0	2.9	28.4
Deaths																						
M	-	-	-	-	-	-	1	1	-	-	2	1	1	2	3	1	1	1	14			
F	-	-	-	-	-	-	1	-	-	-	1	-	1	-	-	1	-	-	4			
Mortality Rate per 100,000																						
M	-	-	-	-	-	-	6.4	5.5	-	-	13.4	8.5	10.3	22.3	38.9	18.7	32.1	55.3		6.0	0.5	4.2
F	-	-	-	-	-	-	6.0	-	-	-	6.9	-	10.0	-	-	13.5	-	-		1.7	0.1	1.2
173. SKIN																						
Cases																						
M	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-			
F	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-			
Incidence per 100,000																						
M	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-			
F	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-			
Deaths																						
M	-	-	-	-	-	-	-	-	-	-	-	-	-	2	2	-	-	2	6			
F	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	1			
Mortality Rate per 100,000																						
M	-	-	-	-	-	-	-	-	-	-	-	-	-	22.3	26.0	-	-	110.6		2.6	0.2	1.6
F	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	24.0		0.4	-	0.1

CANCER INCIDENCE AND MORTALITY (January 1998 - December 1998)
 ICD 9: New Cases, Deaths, Crude, Cumulative and Age Standardised Rates by Site, Sex, and Age Group.

Ages	0-4	5-9	10-14	15-19	20-24	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69	70-74	75-79	80-84	85+	Total	Crude Rate	Cumul Rate	Stand Rate
174-5. BREAST																						
Cases																						
M	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-	1			
F	-	-	-	-	-	1	8	7	25	23	47	33	33	23	25	24	8	13	270			
Incidence per 100,000																						
M	-	-	-	-	-	-	-	-	-	-	-	-	-	11.1	-	-	-	-		0.4	0.1	0.3
F	-	-	-	-	-	6.1	48.2	37.0	139.7	139.6	322.5	288.9	330.7	242.1	283.9	324.2	154.9	311.5		112.9	9.2	81.7
Deaths																						
M	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-			
F	-	-	-	-	-	-	-	3	6	4	7	4	7	6	8	7	3	6	61			
Mortality Rate per 100,000																						
M	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-			
F	-	-	-	-	-	-	-	15.9	33.5	24.3	48.0	35.0	70.1	63.2	90.8	94.6	58.1	143.8		25.5	1.9	16.6
180. CERVIX UTERI																						
Cases																						
M	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-			
F	-	-	-	-	1	3	5	10	2	2	1	1	2	2	1	1	-	-	31			
Incidence per 100,000																						
M	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-			
F	-	-	-	-	6.7	18.2	30.1	52.8	11.2	12.1	6.9	8.8	20.0	21.1	11.4	13.5	-	-		13.0	1.0	10.9
Deaths																						
M	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-			
F	-	-	-	-	-	-	-	2	-	-	1	1	1	1	1	3	-	-	10			
Mortality Rate per 100,000																						
M	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-			
F	-	-	-	-	-	-	-	10.6	-	-	6.9	8.8	10.0	10.5	11.4	40.5	-	-		4.2	0.3	2.7
181. PLACENTA																						
Cases																						
M	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-			
F	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-			
Incidence per 100,000																						
M	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-			
F	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-			
Deaths																						
M	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-			
F	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-			
Mortality Rate per 100,000																						
M	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-			
F	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-			

CANCER INCIDENCE AND MORTALITY (January 1998 - December 1998)
 ICD 9: New Cases, Deaths, Crude, Cumulative and Age Standardised Rates by Site, Sex, and Age Group.

Ages	0-4	5-9	10-14	15-19	20-24	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69	70-74	75-79	80-84	85+	Total	Crude Rate	Cumul Rate	Stand Rate
182. CORPUS UTERI																						
Cases																						
M	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
F	-	-	-	-	-	-	1	-	-	2	2	9	4	5	6	5	3	1	38			
Incidence per 100,000																						
M	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
F	-	-	-	-	-	-	6.0	-	-	12.1	13.7	78.8	40.1	52.6	68.1	67.5	58.1	24.0	15.9	1.4	10.6	
Deaths																						
M	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
F	-	-	-	-	-	-	-	-	-	-	-	1	-	3	1	1	1	-	7			
Mortality Rate per 100,000																						
M	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
F	-	-	-	-	-	-	-	-	-	-	-	8.8	-	31.6	11.4	13.5	19.4	-	2.9	0.3	1.8	
183. OVARY																						
Cases																						
M	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
F	-	-	-	-	2	-	-	1	-	2	2	6	4	6	5	1	-	3	32			
Incidence per 100,000																						
M	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
F	-	-	-	-	13.3	-	-	5.3	-	12.1	13.7	52.5	40.1	63.2	56.8	13.5	-	71.9	13.4	1.3	10.0	
Deaths																						
M	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
F	-	-	-	-	-	1	-	-	-	-	2	-	2	2	4	2	3	2	18			
Mortality Rate per 100,000																						
M	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
F	-	-	-	-	-	6.1	-	-	-	-	13.7	-	20.0	21.1	45.4	27.0	58.1	47.9	7.5	0.5	4.3	
184. VAGINA																						
Cases																						
M	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
F	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	1			
Incidence per 100,000																						
M	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
F	-	-	-	-	-	-	-	-	-	-	-	-	-	-	11.4	-	-	-	0.4	0.1	0.2	
Deaths																						
M	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
F	-	-	-	-	-	-	-	1	-	-	-	-	-	-	-	-	1	-	2			
Mortality Rate per 100,000																						
M	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
F	-	-	-	-	-	-	-	5.3	-	-	-	-	-	-	-	-	19.4	-	0.8	-	0.4	

CANCER INCIDENCE AND MORTALITY (January 1998 - December 1998)

ICD 9: New Cases, Deaths, Crude, Cumulative and Age Standardised Rates by Site, Sex, and Age Group.

Ages	0-4	5-9	10-14	15-19	20-24	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69	70-74	75-79	80-84	85+	Total	Crude Rate	Cumul Rate	Stand Rate
187. PENIS																						
Cases																						
M	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
F	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Incidence per 100,000																						
M	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
F	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Deaths																						
M	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
F	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Mortality Rate per 100,000																						
M	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
F	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
188. BLADDER																						
Cases																						
M	-	-	-	-	1	-	1	1	3	3	2	3	12	7	6	13	11	6	69			
F	-	-	-	-	-	-	-	-	-	1	-	2	6	-	-	4	4	6	23			
Incidence per 100,000																						
M	-	-	-	-	6.5	-	6.4	5.5	17.0	18.1	13.4	25.6	123.2	78.0	77.9	243.3	353.6	331.7	29.7	1.9	19.7	
F	-	-	-	-	-	-	-	-	-	6.1	-	17.5	60.1	-	-	54.0	77.4	143.8	9.6	0.4	5.1	
Deaths																						
M	-	-	-	-	-	-	-	-	-	-	-	1	-	1	2	2	1	5	12			
F	-	-	-	-	-	-	-	-	-	-	-	-	-	-	3	1	1	4	9			
Mortality Rate per 100,000																						
M	-	-	-	-	-	-	-	-	-	-	-	8.5	-	11.1	26.0	37.4	32.1	276.4	5.2	0.2	2.8	
F	-	-	-	-	-	-	-	-	-	-	-	-	-	-	34.1	13.5	19.4	95.9	3.8	0.2	1.4	
189. KIDNEY																						
Cases																						
M	-	-	-	-	-	-	-	-	-	3	7	7	3	7	6	9	-	2	44			
F	-	-	-	-	-	-	-	2	3	1	-	2	2	5	5	1	4	1	26			
Incidence per 100,000																						
M	-	-	-	-	-	-	-	-	18.1	46.8	59.8	30.8	78.0	77.9	168.4	-	110.6	18.9	1.6	13.0		
F	-	-	-	-	-	-	-	10.6	16.8	6.1	-	17.5	20.0	52.6	56.8	13.5	77.4	24.0	10.9	0.9	6.9	
Deaths																						
M	-	-	-	-	-	-	-	-	-	2	2	1	1	4	7	-	-	17				
F	-	-	-	-	-	-	-	-	-	-	-	-	2	1	1	1	1	5				
Mortality Rate per 100,000																						
M	-	-	-	-	-	-	-	-	-	13.4	17.1	10.3	11.1	51.9	131.0	-	-	7.3	0.5	4.4		
F	-	-	-	-	-	-	-	-	-	-	-	-	21.1	11.4	13.5	19.4	-	2.1	0.2	1.1		

CANCER INCIDENCE AND MORTALITY (January 1998 - December 1998)
 ICD 9: New Cases, Deaths, Crude, Cumulative and Age Standardised Rates by Site, Sex, and Age Group.

Ages	0-4	5-9	10-14	15-19	20-24	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69	70-74	75-79	80-84	85+	Total	Crude Rate	Cumul Rate	Stand Rate
190. EYE																						
Cases																						
M	-	-	-	-	-	-	-	1	1	-	-	1	-	1	-	-	-	-	4			
F	-	-	-	-	-	1	-	-	-	-	-	-	-	-	-	-	1	-	2			
Incidence per 100,000																						
M	-	-	-	-	-	-	-	5.5	5.7	-	-	8.5	-	11.1	-	-	-	-		1.7	0.2	1.3
F	-	-	-	-	-	6.1	-	-	-	-	-	-	-	-	-	-	19.4	-		0.8	-	0.6
Deaths																						
M	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-			
F	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-	1			
Mortality Rate per 100,000																						
M	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-			
F	-	-	-	-	-	-	-	-	-	-	-	-	-	10.5	-	-	-	-	-	0.4	0.1	0.3
191. BRAIN																						
Cases																						
M	1	1	1	1	1	2	-	-	1	1	1	4	1	2	-	4	-	-	21			
F	2	1	-	-	-	-	-	-	-	2	1	-	-	1	3	1	-	-	11			
Incidence per 100,000																						
M	6.0	5.7	5.6	5.7	6.5	12.5	-	-	5.7	6.0	6.7	34.2	10.3	22.3	-	74.9	-	-		9.0	0.6	8.0
F	12.8	5.9	-	-	-	-	-	-	-	12.1	6.9	-	-	10.5	34.1	13.5	-	-		4.6	0.4	4.3
Deaths																						
M	-	-	-	1	-	1	-	2	-	-	2	1	3	2	-	3	1	-	16			
F	1	-	-	-	-	-	-	-	1	-	1	-	-	-	3	-	-	-	6			
Mortality Rate per 100,000																						
M	-	-	-	5.7	-	6.2	-	11.0	-	-	13.4	8.5	30.8	22.3	-	56.1	32.1	-		6.9	0.5	5.3
F	6.4	-	-	-	-	-	-	-	5.6	-	6.9	-	-	-	34.1	-	-	-		2.5	0.3	2.1
192. OTHER CNS																						
Cases																						
M	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-			
F	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-			
Incidence per 100,000																						
M	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-			
F	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-			
Deaths																						
M	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-			
F	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-			
Mortality Rate per 100,000																						
M	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-			
F	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-			

CANCER INCIDENCE AND MORTALITY (January 1998 - December 1998)
 ICD 9: New Cases, Deaths, Crude, Cumulative and Age Standardised Rates by Site, Sex, and Age Group.

Ages	0-4	5-9	10-14	15-19	20-24	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69	70-74	75-79	80-84	85+	Total	Crude Rate	Cumul Rate	Stand Rate	
193. THYROID																							
Cases																							
M	-	-	-	-	-	1	1	-	-	2	1	1	-	-	1	1	-	-	8				
F	-	-	-	-	-	1	3	4	3	3	2	-	-	1	-	1	-	-	18				
Incidence per 100,000																							
M	-	-	-	-	-	6.2	6.4	-	-	12.1	6.7	8.5	-	-	13.0	18.7	-	-		3.4	0.3	2.7	
F	-	-	-	-	-	6.1	18.1	21.1	16.8	18.2	13.7	-	-	10.5	-	13.5	-	-		7.5	0.5	6.1	
Deaths																							
M	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-				
F	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-	-		1		
Mortality Rate per 100,000																							
M	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-		-	-	-
F	-	-	-	-	-	-	-	-	-	-	-	-	-	10.5	-	-	-	-	-		0.4	0.1	0.3
194. OTHER ENDOCRINE																							
Cases																							
M	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-				
F	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-				
Incidence per 100,000																							
M	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-		-	-	-
F	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-		-	-	-
Deaths																							
M	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-				
F	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-				
Mortality Rate per 100,000																							
M	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-		-	-	-
F	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-		-	-	-
199. UNSPECIFIED SITE																							
Cases																							
M	-	-	-	-	-	-	-	-	1	2	2	2	5	6	5	12	5	6	46				
F	-	-	-	-	-	-	-	-	-	4	1	6	5	1	9	12	12	4	54				
Incidence per 100,000																							
M	-	-	-	-	-	-	-	-	5.7	12.1	13.4	17.1	51.3	66.8	64.9	224.6	160.7	331.7		19.8	1.2	12.3	
F	-	-	-	-	-	-	-	-	-	24.3	6.9	52.5	50.1	10.5	102.2	162.1	232.3	95.9		22.6	1.2	11.6	
Deaths																							
M	-	-	-	-	-	-	-	-	-	1	1	2	3	5	5	9	4	4	34				
F	-	-	-	-	-	-	-	-	-	1	-	6	5	3	8	9	13	6	51				
Mortality Rate per 100,000																							
M	-	-	-	-	-	-	-	-	-	6.0	6.7	17.1	30.8	55.7	64.9	168.4	128.6	221.1		14.6	0.9	8.9	
F	-	-	-	-	-	-	-	-	-	6.1	-	52.5	50.1	31.6	90.8	121.6	251.7	143.8		21.3	1.2	10.5	

CANCER INCIDENCE AND MORTALITY (January 1998 - December 1998)

ICD 9: New Cases, Deaths, Crude, Cumulative and Age Standardised Rates by Site, Sex, and Age Group.

Ages	0-4	5-9	10-14	15-19	20-24	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69	70-74	75-79	80-84	85+	Total	Crude Rate	Cumul Rate	Stand Rate
200. 201. 202.0 202.1 202.2 202.8. 202.9 ALL LYMPHOMAS																						
Cases																						
M	-	-	1	-	-	1	2	1	1	3	2	4	7	7	7	13	4	-	53			
F	-	-	-	-	-	-	2	1	1	2	4	2	4	5	8	5	5	3	42			
Incidence per 100,000																						
M	-	-	5.6	-	-	6.2	12.7	5.5	5.7	18.1	13.4	34.2	71.9	78.0	90.9	243.3	128.6	-	22.8	1.7	15.8	
F	-	-	-	-	-	-	12.0	5.3	5.6	12.1	27.4	17.5	40.1	52.6	90.8	67.5	96.8	71.9	17.6	1.3	10.7	
Deaths																						
M	-	-	-	-	-	1	-	-	-	1	-	1	-	5	2	6	3	1	20			
F	-	-	-	-	-	-	1	1	-	3	1	-	4	6	5	4	5	5	35			
Mortality Rate per 100,000																						
M	-	-	-	-	-	6.2	-	-	-	6.0	-	8.5	-	55.7	26.0	112.3	96.4	55.3	8.6	0.5	5.3	
F	-	-	-	-	-	-	6.0	5.3	-	18.2	6.9	-	40.1	63.2	56.8	54.0	96.8	119.8	14.6	1.0	8.4	
200. DIFFUSE NON-HODGKIN'S LYMPHOMAS																						
Cases																						
M	-	-	-	-	-	-	-	-	1	1	1	3	5	2	5	10	2	-	30			
F	-	-	-	-	-	-	-	1	-	1	1	1	2	5	5	4	2	3	25			
Incidence per 100,000																						
M	-	-	-	-	-	-	-	-	5.7	6.0	6.7	25.6	51.3	22.3	64.9	187.1	64.3	-	12.9	0.9	8.4	
F	-	-	-	-	-	-	-	5.3	-	6.1	6.9	8.8	20.0	52.6	56.8	54.0	38.7	71.9	10.5	0.8	6.0	
Deaths																						
M	-	-	-	-	-	-	-	-	-	1	-	1	-	2	1	4	1	1	11			
F	-	-	-	-	-	-	1	-	-	2	-	-	3	4	2	4	1	5	22			
Mortality Rate per 100,000																						
M	-	-	-	-	-	-	-	-	6.0	-	8.5	-	22.3	13.0	74.9	32.1	55.3	-	4.7	0.2	2.8	
F	-	-	-	-	-	-	6.0	-	-	12.1	-	-	30.1	42.1	22.7	54.0	19.4	119.8	9.2	0.6	5.2	
201. HODGKINS DISEASE																						
Cases																						
M	-	-	1	-	-	-	1	1	-	-	-	-	-	1	-	-	-	-	4			
F	-	-	-	-	-	-	1	-	-	-	1	-	-	-	2	-	-	-	4			
Incidence per 100,000																						
M	-	-	5.6	-	-	-	6.4	5.5	-	-	-	-	-	11.1	-	-	-	-	1.7	0.1	1.6	
F	-	-	-	-	-	-	6.0	-	-	-	6.9	-	-	-	22.7	-	-	-	1.7	0.2	1.2	
Deaths																						
M	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-	1			
F	-	-	-	-	-	-	-	1	-	-	-	-	-	-	-	-	-	-	1			
Mortality Rate per 100,000																						
M	-	-	-	-	-	-	-	-	-	-	-	-	-	11.1	-	-	-	-	0.4	0.1	0.3	
F	-	-	-	-	-	-	-	5.3	-	-	-	-	-	-	-	-	-	-	0.4	-	0.3	

CANCER INCIDENCE AND MORTALITY (January 1998 - December 1998)

ICD 9: New Cases, Deaths, Crude, Cumulative and Age Standardised Rates by Site, Sex, and Age Group.

Ages	0-4	5-9	10-14	15-19	20-24	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69	70-74	75-79	80-84	85+	Total	Crude Rate	Cumul Rate	Stand Rate
202.0 NODULAR LYMPHOMAS																						
Cases																						
M	-	-	-	-	-	-	-	-	-	2	-	-	1	2	1	1	1	-	8			
F	-	-	-	-	-	-	1	-	1	-	2	1	1	-	-	-	1	-	7			
Incidence per 100,000																						
M	-	-	-	-	-	-	-	-	-	12.1	-	-	10.3	22.3	13.0	18.7	32.1	-		3.4	0.3	2.5
F	-	-	-	-	-	-	6.0	-	5.6	-	13.7	8.8	10.0	-	-	-	19.4	-		2.9	0.2	2.2
Deaths																						
M	-	-	-	-	-	-	-	-	-	-	-	-	-	1	1	-	-	-	2			
F	-	-	-	-	-	-	-	-	-	1	-	-	-	1	2	-	-	-	4			
Mortality Rate per 100,000																						
M	-	-	-	-	-	-	-	-	-	-	-	-	-	11.1	13.0	-	-	-		0.9	0.1	0.6
F	-	-	-	-	-	-	-	-	6.1	-	-	-	-	10.5	22.7	-	-	-		1.7	0.2	1.1
202.1 202.2 202.8 202.9 OTHER LYMPHOMAS																						
Cases																						
M	-	-	-	-	-	1	1	-	-	-	1	1	1	2	1	2	1	-	11			
F	-	-	-	-	-	-	-	-	-	1	-	-	1	-	1	1	2	-	6			
Incidence per 100,000																						
M	-	-	-	-	-	6.2	6.4	-	-	-	6.7	8.5	10.3	22.3	13.0	37.4	32.1	-		4.7	0.4	3.5
F	-	-	-	-	-	-	-	-	-	6.1	-	-	10.0	-	11.4	13.5	38.7	-		2.5	0.1	1.3
Deaths																						
M	-	-	-	-	-	1	-	-	-	-	-	-	-	1	-	2	2	-	6			
F	-	-	-	-	-	-	-	-	-	-	1	-	1	1	1	-	4	-	8			
Mortality Rate per 100,000																						
M	-	-	-	-	-	6.2	-	-	-	-	-	-	-	11.1	-	37.4	64.3	-		2.6	0.1	1.6
F	-	-	-	-	-	-	-	-	-	-	6.9	-	10.0	10.5	11.4	-	77.4	-		3.3	0.2	1.7
202.3 202.5 202.6 TUMORS OF HISTIOCYTIC TISSUE																						
Cases																						
M	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-			
F	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-			
Incidence per 100,000																						
M	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-			
F	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-			
Deaths																						
M	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-			
F	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-			
Mortality Rate per 100,000																						
M	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-			
F	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-			

CANCER INCIDENCE AND MORTALITY (January 1998 - December 1998)

ICD 9: New Cases, Deaths, Crude, Cumulative and Age Standardised Rates by Site, Sex, and Age Group.

Ages	0-4	5-9	10-14	15-19	20-24	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69	70-74	75-79	80-84	85+	Total	Crude Rate	Cumul Rate	Stand Rate
203. MULTIPLE MYELOMA																						
Cases																						
M	-	-	-	-	-	-	-	1	-	-	-	1	2	2	5	2	1	1	15			
F	-	-	-	-	-	-	-	-	-	1	2	1	2	-	2	3	4	1	16			
Incidence per 100,000																						
M	-	-	-	-	-	-	-	5.5	-	-	-	8.5	20.5	22.3	64.9	37.4	32.1	55.3		6.4	0.6	4.2
F	-	-	-	-	-	-	-	-	-	6.1	13.7	8.8	20.0	-	22.7	40.5	77.4	24.0		6.7	0.4	3.6
Deaths																						
M	-	-	-	-	-	-	-	-	-	-	-	3	-	2	1	2	4	1	13			
F	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	3	-	1	5			
Mortality Rate per 100,000																						
M	-	-	-	-	-	-	-	-	-	-	-	25.6	-	22.3	13.0	37.4	128.6	55.3		5.6	0.3	3.3
F	-	-	-	-	-	-	-	-	-	-	-	-	10.0	-	-	40.5	-	24.0		2.1	0.1	0.9
204. 205. 206.1 207. 208. ALL LEUKAEMIAS																						
Cases																						
M	-	2	1	1	-	-	-	-	-	-	3	1	-	4	3	1	1	2	19			
F	2	2	-	-	1	-	-	-	-	-	-	1	-	3	4	3	2	2	20			
Incidence per 100,000																						
M	-	11.4	5.6	5.7	-	-	-	-	-	-	20.0	8.5	-	44.6	38.9	18.7	32.1	110.6		8.2	0.7	6.4
F	12.8	11.8	-	-	6.7	-	-	-	-	-	-	8.8	-	31.6	45.4	40.5	38.7	47.9		8.4	0.6	6.3
Deaths																						
M	-	-	-	-	-	-	1	-	-	-	-	1	-	4	4	4	2	2	18			
F	-	1	1	-	-	1	-	-	-	-	-	2	-	2	1	2	2	3	15			
Mortality Rate per 100,000																						
M	-	-	-	-	-	-	6.4	-	-	-	-	8.5	-	44.6	51.9	74.9	64.3	110.6		7.7	0.6	4.7
F	-	5.9	5.7	-	-	6.1	-	-	-	-	-	17.5	-	21.1	11.4	27.0	38.7	71.9		6.3	0.3	4.0
204.0 ACUTE LYMPHATIC LEUKAEMIA																						
Cases																						
M	-	1	1	-	-	-	-	-	-	-	-	-	-	1	1	-	-	-	4			
F	2	2	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	5			
Incidence per 100,000																						
M	-	5.7	5.6	-	-	-	-	-	-	-	-	-	-	11.1	13.0	-	-	-		1.7	0.2	1.7
F	12.8	11.8	-	-	-	-	-	-	-	-	-	-	-	-	-	-	19.4	-		2.1	0.1	2.8
Deaths																						
M	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	1			
F	-	-	1	-	-	-	-	-	-	-	-	-	-	-	-	-	1	1	3			
Mortality Rate per 100,000																						
M	-	-	-	-	-	-	-	-	-	-	-	-	-	-	13.0	-	-	-		0.4	0.1	0.3
F	-	-	5.7	-	-	-	-	-	-	-	-	-	-	-	-	-	19.4	24.0		1.3	-	0.7

CANCER INCIDENCE AND MORTALITY (January 1998 - December 1998)

ICD 9: New Cases, Deaths, Crude, Cumulative and Age Standardised Rates by Site, Sex, and Age Group.

Ages	0-4	5-9	10-14	15-19	20-24	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69	70-74	75-79	80-84	85+	Total	Crude Rate	Cumul Rate	Stand Rate
204.1 CHRONIC LYMPHATIC LEUKAEMIA																						
Cases																						
M	-	-	-	-	-	-	-	-	-	-	1	-	-	-	1	1	-	-	3			
F	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	1			
Incidence per 100,000																						
M	-	-	-	-	-	-	-	-	-	-	6.7	-	-	-	13.0	18.7	-	-		1.3	0.1	0.8
F	-	-	-	-	-	-	-	-	-	-	-	-	-	-	11.4	-	-	-		0.4	0.1	0.2
Deaths																						
M	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	1			
F	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	1			
Mortality Rate per 100,000																						
M	-	-	-	-	-	-	-	-	-	-	-	-	-	-	13.0	-	-	-		0.4	0.1	0.3
F	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	13.5	-	-		0.4	-	0.1
205.0 ACUTE MYELOID LEUKAEMIA																						
Cases																						
M	-	1	-	1	-	-	-	-	-	-	-	1	-	1	1	-	1	2	8			
F	-	-	-	-	1	-	-	-	-	-	-	1	-	3	2	1	1	1	10			
Incidence per 100,000																						
M	-	5.7	-	5.7	-	-	-	-	-	-	-	8.5	-	11.1	13.0	-	32.1	110.6		3.4	0.2	2.6
F	-	-	-	-	6.7	-	-	-	-	-	-	8.8	-	31.6	22.7	13.5	19.4	24.0		4.2	0.3	2.6
Deaths																						
M	-	-	-	-	-	-	1	-	-	-	-	1	-	1	2	-	2	2	9			
F	-	1	-	-	-	1	-	-	-	-	-	1	-	1	1	1	1	1	8			
Mortality Rate per 100,000																						
M	-	-	-	-	-	-	6.4	-	-	-	-	8.5	-	11.1	26.0	-	64.3	110.6		3.9	0.3	2.4
F	-	5.9	-	-	-	6.1	-	-	-	-	-	8.8	-	10.5	11.4	13.5	19.4	24.0		3.3	0.2	2.3
205.1 CHRONIC MYELOID LEUKAEMIA																						
Cases																						
M	-	-	-	-	-	-	-	-	-	-	-	-	-	2	-	-	-	-	2			
F	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	1			
Incidence per 100,000																						
M	-	-	-	-	-	-	-	-	-	-	-	-	-	22.3	-	-	-	-		0.9	0.1	0.7
F	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	13.5	-	-		0.4	-	0.1
Deaths																						
M	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	2	-	-	3			
F	-	-	-	-	-	-	-	-	-	-	-	1	-	1	-	-	-	-	2			
Mortality Rate per 100,000																						
M	-	-	-	-	-	-	-	-	-	-	-	-	-	11.1	-	37.4	-	-		1.3	0.1	0.7
F	-	-	-	-	-	-	-	-	-	-	-	8.8	-	10.5	-	-	-	-		0.8	0.1	0.7

CANCER INCIDENCE AND MORTALITY (January 1998 - December 1998)

ICD 9: New Cases, Deaths, Crude, Cumulative and Age Standardised Rates by Site, Sex, and Age Group.

Ages	0-4	5-9	10-14	15-19	20-24	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69	70-74	75-79	80-84	85+	Total	Crude Rate	Cumul Rate	Stand Rate
206.1 CHRONIC MONOCYTIC LEUKAEMIA																						
Cases																						
M	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
F	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Incidence per 100,000																						
M	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
F	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Deaths																						
M	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
F	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Mortality Rate per 100,000																						
M	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
F	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
207. OTHER SPECIFIED LEUKAEMIAS																						
Cases																						
M	-	-	-	-	-	-	-	-	-	-	2	-	-	-	-	-	-	-	2	-	-	-
F	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	1	-	-	2	-	-	-
Incidence per 100,000																						
M	-	-	-	-	-	-	-	-	-	-	13.4	-	-	-	-	-	-	-	0.9	0.1	0.7	-
F	-	-	-	-	-	-	-	-	-	-	-	-	-	11.4	13.5	-	-	-	0.8	0.1	0.4	-
Deaths																						
M	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	1	-	-	2	-	-	-
F	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Mortality Rate per 100,000																						
M	-	-	-	-	-	-	-	-	-	-	-	-	-	11.1	-	18.7	-	-	0.9	0.1	0.5	-
F	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
208. UNSPECIFIED CELL LEUKAEMIAS																						
Cases																						
M	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
F	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	1	-	-	-
Incidence per 100,000																						
M	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
F	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	24.0	0.4	-	0.1	-
Deaths																						
M	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	1	-	-	2	-	-	-
F	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	1	-	-	-
Mortality Rate per 100,000																						
M	-	-	-	-	-	-	-	-	-	-	-	-	-	11.1	-	18.7	-	-	0.9	0.1	0.5	-
F	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	24.0	0.4	-	0.1	-

CANCER INCIDENCE AND MORTALITY (January 1998 - December 1998)

ICD 9: New Cases, Deaths, Crude, Cumulative and Age Standardised Rates by Site, Sex, and Age Group.

Ages	0-4	5-9	10-14	15-19	20-24	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69	70-74	75-79	80-84	85+	Total	Crude Rate	Cumul Rate	Stand Rate
140-208 TOTAL																						
Cases																						
M	3	3	3	3	4	8	12	15	25	39	74	94	127	191	204	177	84	57	1123			
F	4	3	-	1	7	12	25	40	47	63	81	107	113	95	128	116	94	67	1003			
Incidence per 100,000																						
M	18.0	17.1	16.8	17.0	25.9	49.8	76.4	82.7	142.0	235.8	494.3	802.7	1304.2	2127.9	2648.3	3312.1	2700.1	3150.9		482.8	40.3	332.8
F	25.7	17.8	-	6.0	46.6	72.9	150.6	211.4	262.6	382.4	555.8	936.6	1132.3	1000.0	1453.6	1566.9	1819.9	1605.6		419.5	31.3	277.9
Deaths																						
M	-	-	-	1	-	3	2	3	6	8	27	43	47	77	102	107	67	49	542			
F	1	1	2	-	-	2	3	10	8	12	24	25	39	50	67	65	65	55	429			
Mortality Rate per 100,000																						
M	-	-	-	5.7	-	18.7	12.7	16.5	34.1	48.4	180.3	367.2	482.6	857.8	1324.2	2002.2	2153.6	2708.7		233.0	16.7	147.5
F	6.4	5.9	11.5	-	-	12.1	18.1	52.8	44.7	72.8	164.7	218.8	390.8	526.3	760.8	878.0	1258.5	1318.0		179.4	11.4	99.9

APPENDICES

Appendix A: Cancer Codes and Specific Coding Practices

Appendix B: Statistical Methods and Calculations

Appendix C: Demography of Tasmania

Appendix D: Use of Cancer Registry Data

Appendix E: Guidelines for Cancer Data Release

Appendix F: Cancer Notification Legislation
and Confidentiality of Information

Appendix G: Cancer Registry Staff, Volunteers
and Committee Members

Appendix H: Incidence and Mortality Summary, 1998

Buccal Cavity and Pharynx – 140 – 149

- 140. Lip
- 141. Tongue
- 142. Salivary Gland
- 143. Gum
- 144. Floor of Mouth
- 145. Other and Unspecified Parts of the Mouth
- 146. Oropharynx
- 147. Nasopharynx
- 148. Hypopharynx
- 149. Other and Ill-defined Sites within the Lip, Oral Cavity and Pharynx

Digestive Organs and Peritoneum – 150 – 159

- 150. Oesophagus
- 151. Stomach
- 152. Small Intestine
- 153. Colon
- 154. Rectum, Rectosigmoid Junction and Anal Canal
- 155. Liver and Intrahepatic Bile Ducts specified as Primary
- 156. Gall Bladder and Extrahepatic Bile Ducts
- 157. Pancreas
- 158. Peritoneum and Retroperitoneal Tissue
- 159. Unspecified Digestive Organs

Respiratory System – 160 – 164

- 160. Nasal Cavities, Middle Ear and Accessory Sinuses
- 161. Larynx
- 162. Trachea, Bronchus and Lung
- 163. Pleura
- 164. Thymus, Heart and Mediastinum

Bone, Connective Tissue, Skin and Breast – 170 – 175

- 170. Bone and Articular Cartilage
- 171. Connective and Other Soft Tissue
- 172. Skin – Malignant Melanoma
- 173. Skin other than Melanoma
- 174. Female Breast
- 175. Male Breast

Genito-Urinary Organs – 180 – 189

- 180. Cervix Uteri (invasive)
- 181. Placenta
- 182. Body of Uterus
- 183. Ovary and other Uterine Adnexa
- 184. Other and Unspecified Female Genital Organs
- 185. Prostate
- 186. Testis
- 187. Penis and Other Male Genital Organs
- 188. Bladder
- 189. Kidney and Other and Unspecified Urinary Organs

Other and Unspecified Sites – 190 – 199

- 190. Eye
- 191. Brain
- 192. Cranial Nerves, Spinal Cord, Meninges and Other Unspecified Parts
- 193. Thyroid Gland
- 194. Other Endocrine Glands
- 195. Other and Ill-defined Sites
- 199. Unspecified Site

Lymphatic and Hematopoietic Tissue – 200 – 208

- 200. Diffuse Non-Hodgkin's Lymphoma
- 201. Hodgkin's Disease
- 202. Other Lymphomas
- 203. Multiple Myeloma and Immunoproliferative Neoplasms
- 204. Lymphoid Leukaemia
- 205. Myeloid Leukaemia
- 206. Monocytic Leukaemia
- 207. Erythroleukaemias and Other Specified Leukaemias
- 208. Unspecified Cell Leukaemias

**Comments on the use of ICD-9 code
in this report**

140. Lip: applies to squamous cell carcinomas arising from the mucosa or muco-epidermal junction.
152. Small intestine: includes sarcomas and carcinomas but lymphomas are coded to 200 or 202.
155. Liver: only those tumours proved by histological examination or special tests are included, others regarded as metastatic.
158. Peritoneum and Retroperitoneal tissue: on the advice of an authority of soft tissue tumours, primaries are being coded to 171.
162. Bronchus and Lung: includes only tumours considered to be primary.
171. Bone: includes only primary bone tumours.
172. Cutaneous melanoma: invasive lesions only included.
173. Non-melanoma skin: mortality rates are only in this report.
180. Cervix Uteri: includes microinvasive lesions but not in-situ cancers
188. Bladder: includes invasive tumours only.
- 196-199. Secondary sites: all coded under 199 if primary site unknown
200. Lymphosarcoma and reticulosarcoma: only diffuse non-Hodgkin's lymphomas are included under this code number.
- 204-208. Leukaemias: certain changes have been made to 2060, 2070 and 2072 to incorporate them in the Acute Myeloid (AML) 2050 FAB Classification (M1-M7)

Please note that none of the 3 digit ICD-9 codes have been changed (140 – 208). However, it must be pointed out that some of the 4-digit codes of ICD-9 have been expanded or condensed to concur with changes in pathology classifications and where numbers warrant this practice. As the International Agency for Research in Cancer (IARC) scientific publication Cancer in Five Continents is based on 3-digit codes, this modification does not affect international comparisons.

The 1998 report contains numbers of new cases and deaths, and crude, cumulative, and age standardised incidence and mortality rates of Tasmanian residents diagnosed with cancer. They are based on registrations completed by 20 October 2000.

Incidence

Cancer incidence is defined as the number of new cases of cancer in a population during a specific period. The incidence data in this report relate to cancer cases first diagnosed between January 1998 and December 1998 in persons who were residents of Tasmania at the time of diagnosis.

Mortality

The mortality data in this report relate to deaths from cancer, of people who were first diagnosed as having cancer while they were residents of Tasmania. Tasmanian cancer patients who die elsewhere in many instances are notified to the Tasmanian cancer registry by other State or Territory cancer registries. Details of patients diagnosed interstate who die in Tasmania are forwarded to the relevant cancer registry. Deaths from other causes are also recorded so that survival rates can be calculated.

Crude rates (CR)

The crude incidence (rate) is calculated as the number of new cases of cancer divided by the population at risk in a specified time period. The crude mortality rate substitutes deaths for new cases in this calculation. Both are conventionally expressed as annual rates per 100,000 population. They are referred to as crude rates because there is no adjustment for age. The estimated Tasmanian population by age and sex for 1998 was supplied by the Australian Bureau of Statistics (ABS), Cat No. 3311.6.

Age specific rates

Age specific rates are calculated by dividing the number of cases occurring in each specified age group by the corresponding population in the same age group and are expressed as an annual rate per 100,000 population.

Age standardised rates (ASR)

Rates are adjusted for age to facilitate comparisons between populations that have different age structures, eg between youthful and aging communities. In this publication we use direct standardisation in which age specific rates are used to calculate the number of cases that would have occurred if the population had the same age distribution as the World Standard Population. This effectively removes the influence of age structure on the summary rate, which is described as the age standardised rate. The method may be used for both incidence and mortality calculations.

Cumulative rates

The cumulative rate is a directly standardised rate calculated by summing the age specific rate for each year of life prior to age 75. Cumulative risk to age 75 can be calculated from the cumulative rate.

Estimated Resident Population of Tasmania by Age Group as at 30 June 1998¹

Years	Males	Females	Persons
0 – 4	16,662	15,566	32,228
5 – 9	17,592	16,882	34,474
10 – 14	17,880	17,415	35,295
15 – 19	17,607	16,804	34,411
20 – 24	15,442	15,037	30,479
25 – 29	16,064	16,466	32,530
30 – 34	15,708	16,601	32,309
35 – 39	18,141	18,924	37,065
40 – 44	17,604	17,901	35,505
45 – 49	16,542	16,475	33,017
50 – 54	14,971	14,574	29,545
55 – 59	11,710	11,424	23,134
60 – 64	9,738	9,980	19,718
65 – 69	8,976	9,500	18,476
70 – 74	7,703	8,806	16,509
75 – 79	5,344	7,403	12,747
80 – 84	3,111	5,165	8,276
85 & over	1,809	4,173	5,982
All ages	232,604	239,096	471,700

At the 1996 census, 75% of Tasmanian were found to live in urban localities with 1000 or more persons. At this time there were 13,873 Aboriginal or Torres Strait Islanders in Tasmania. A total of 86% of the population were born in Australia and migrants born in English speaking countries combined, comprised another 6% of the population. The Tasmanian population is considered to be relatively stable and has declined marginally in recent years.

Life expectancy in Tasmania 1996 – 98

	At birth	At age 60	At age 80
Males	75.1	19.4	7.0
Females	80.4	23.4	8.8

Life expectancy in Australia 1996 – 98

	At birth	At age 60	At age 80
Males	75.9	20.2	7.3
Females	81.5	24.3	9.1

¹ Australian Bureau of Statistics (Cat no. 3311.6), 1998, 14

Requests for non-identifying data

Non-identifying cancer data are available upon request. Data are usually released as incidence or mortality rates or number of cases or deaths for specific cancers, cancer morphologies, time periods or age groups. Requests that can be compiled using existing reporting systems have a turnaround of approximately 48 hours. Requests needing input from the biostatistician require more notice. Such data are provided to epidemiological and clinical researchers, the Department of Health and Human Services, students and the public. In addition to data requests, the Registry receives personal enquiries regarding cancer. When appropriate, these enquiries are referred to other agencies or to specific doctors.

Requests for named data

The release of named data is strictly controlled. Named data may be released only after approval of a formal application submitted to the Tasmanian Cancer Registry data release committee and with subsequent approval by the Director of Public Health. Applications for research purposes need the approval of the researchers' institutional ethics committee.

Published data

Annual reports from the Registry provide data on cancer numbers and incidence and mortality. Additional information is provided on selected cancer sites. It should be recognised that active follow-up is necessary for 20% of cases each year.

In addition the Tasmanian Cancer Registry supplies data to the National Cancer Statistics Clearing House (NCSCH) and to the International Association of Cancer Registries (IACR).

Provisions for the release of data containing patient identification

- 1.1 Information required from the **Cancer Registry** by a researcher about cancer patients treated in the institution to which the researcher is attached, will be supplied on the request of the administrator or the medical superintendent of that institution, after approval has been given by that hospital's **Ethics or Research Review Committee**.
- 1.2 If in addition to data of patients in the researchers own institution, the medical researcher requires information from other institutions having their own research review committee, a nominal roll of cases relevant to the project will be given after the researcher has obtained approval from each and every relevant Research Review Committee.
- 1.3 Information relating to patients in institutions without Research Review Committees and patients in private care may be released to medical researchers only after consideration of the request by the **Cancer Data Release Committee** to ensure that the strict confidentiality rules of cancer registry data are followed.
- 1.4 **The Cancer Data Release Committee** will have four members, each appointed for a period of two years. The members of the current **Committee** are:
 - Dr Roger Kimber
 - Dr Stan Gauden
 - Dr Margaret Baikie
 - Dr Robert Kelsall
- 1.5 Before releasing any information to any researcher, the latter must sign a declaration that he or she will not approach the patient either in writing or verbally for information relating to the research project without first getting the permission of the medical practitioner in charge of the patient.
- 1.6 Following approval and subject to 1.5, the researcher may be given any information held at the registry at the discretion of the **Committee**. This implies that the researcher would be given a list of doctors to approach. It would be up to the researcher to approach each doctor in charge of the case should the researcher need further details from the doctor or wish to approach the patient.
- 1.7 For research projects of a clinical nature, the **Committee** will require any non-medical researcher to have a medical resource person as a collaborator. For non-medical research projects, a paramedical resource person could act as collaborator.
- 1.8 The **Committee** may seek outside advice regarding the value of the proposed project and the ability of the researcher to undertake it.

Cancer notification legislation

In 1992, the Tasmanian Government legislated to amend the *Public Health (Notifiable Diseases) Regulations 1989*, by adding 'cancer' to the list of notifiable diseases.

Under this legislation, healthcare practitioners are obliged to report diagnoses of cancer.

Confidentiality of information

Confidentiality of data is legislated in the *Public Health Act 1997* in which data identifying an individual cannot be released by the Registry unless authorised by the Director of Public Health. The relevant sections of this Act are described below.

Public Health Act 1997

Disclosure of information relating to a notifiable disease.

Section 61: 'A person, unless authorised to do so under section 147, must not disclose any information in relation to –

- (a) Any notification relating to a notifiable disease; or
- (b) Any investigation or inquiry into a notifiable disease; or
- (c) The identity of any person to whom any notification, investigation or inquiry relates.

Disclosure of information

Section 147: A person must not disclose any information obtained for the purpose of this Act relating to a person except in accordance with any relevant guidelines and -

- (a) With the written consent of the person or parent or guardian of a child or person to whom the information relates; or
- (b) To a registered medical practitioner who is directly involved in the treatment of that person; or
- (c) To a person apparently in charge of any institution or facility which is involved in the diagnosis or treatment of that person; or

- (d) To a person authorised by the Director; or
- (e) For the purpose of notifying a notifiable disease; or
- (f) For the purpose of an epidemiological study or research authorised by the Director; or
- (g) For the purpose of legal proceedings arising out of this Act; or
- (h) For a purpose authorised or required by this Act or another Act; or
- (i) For the purposes of study or research approved by the Director.

Information on the Tasmanian Cancer Registry Database

The Tasmanian Cancer Registry records the following fields of information:

- Name of Patient:
- Address:
- Sex:
- Date of Birth:
- Occupation:
- Country of Birth:
- Race:
- Hospital:
- Hospital UR number:
- Date of Admission:
- Treating doctor:
- Date of Diagnosis of Cancer:
- Primary Site of Cancer (if known):
- Morphological Subtype of Cancer (where known):
- Method of Diagnosis:
- Laboratory:
- Date of Death:
- Place of Death:
- Underlying Cause of Death:

Cancer Registry Staff and Volunteers, 2000

Professor T Dwyer	Medical Director
Dr A Venn	Acting Director (September 2000 – February 2001)
Ms R Ashbolt	Acting Registrar (to November 2000)
Mrs S Pavlides	Database Manager (from November 2000)
Mrs V Webb	Administrative Officer
Mrs K Jackman	Medical Coder
Mrs S Browne	Clerical Assistant
Mrs P Whelan	Volunteer
Mr B Duffy	Volunteer
Dr L Blizzard	Biostatistician, Menzies Centre
ComputerLand	Computing Consultant
Dr C Shugg	Data Systems Consultant
Mrs D Shugg	Honorary Research Associate
Mrs P Vallance	Library

Members of the Advisory Committee, 2000

Professor Terry Dwyer	Menzies Centre for Population Health Research
Dr Alison Venn	Menzies Centre for Population Health Research
Ms Rosie Ashbolt	Tasmanian Cancer Registry
Mrs Shevaun Pavlides	Tasmanian Cancer Registry
Dr Mark Jacobs	Department of Health and Human Services
Ms Valerie Gardner	Department of Health and Human Services
Professor Peter Stanton	School of Medicine, Department of Surgery
Dr Rosemary Young	School of Medicine, Department of Clinical Sciences
Mrs Maureen Ramsden	Cancer Council of Tasmania

Members of the Data Release Committee, 2000

Dr Roger Kimber	Royal Hobart Hospital
Dr Margaret Baikie	Royal Hobart Hospital (retired)
Dr Stan Gauden	WP Holman Clinic
Dr Robert Kelsall	Forensic Pathology

ICD-9 SITE	MALES			FEMALES			TOTAL	
	*N	CR	ASR	N	CR	ASR	N	
140	Lip	40	17.2	12.9	9	3.8	2.4	49
141	Tongue	7	3.0	2.2	2	0.8	0.5	9
142	Salivary Gland	1	0.4	0.2	5	2.1	1.1	6
143	Gum	0	0.0	0.0	0	0.0	0.0	0
144	Floor Of Mouth	5	2.1	1.6	1	0.4	0.1	6
145	Other Mouth	3	1.3	1.1	5	2.1	1.5	8
146	Oropharynx	6	2.6	2.0	2	0.8	0.6	8
147	Nasopharynx	2	0.9	0.7	1	0.4	0.1	3
148	Hypopharynx	2	0.9	0.6	0	0.0	0.0	2
149	Other Pharynx	1	0.4	0.3	2	0.8	0.5	3
150	Oesophagus	17	7.3	5.4	6	2.5	1.0	23
151	Stomach	29	12.5	8.1	16	6.7	4.2	45
152	Small Intestine	4	1.7	1.3	1	0.4	0.1	5
153	Colon	84	36.1	24.9	112	46.8	26.6	196
154	Rectum	58	24.9	17.0	45	18.8	10.9	103
155	Liver	7	3.0	3.0	3	1.3	0.9	10
156	Gall Bladder	4	1.7	1.2	8	3.3	2.0	12
157	Pancreas	17	7.3	4.3	23	9.6	6.0	40
160	Nasal Cavities	3	1.3	1.1	1	0.4	0.4	4
161	Larynx	15	6.4	4.4	2	0.8	0.6	17
162	Lung	167	71.8	48.9	74	30.9	17.9	241
163	Pleura	5	2.1	1.6	2	0.8	0.7	7
164	Thymus	0	0.0	0.0	0	0.0	0.0	0
170	Bone	2	0.9	0.7	0	0.0	0.0	2
171	Soft Tissues	11	4.7	3.4	8	3.3	1.7	19
172	Melanoma Of Skin	83	35.7	26.1	86	36.0	28.4	169
173	Skin	Incidence of non-melanocytic skin cancer is not reported						
174-5	Breast	1	0.4	0.3	270	112.9	81.7	271
180	Cervix Uteri	0	0.0	0.0	31	13.0	10.9	31
181	Placenta	0	0.0	0.0	0	0.0	0.0	0
182	Corpus Uteri	0	0.0	0.0	38	15.9	10.6	38
183	Ovary	0	0.0	0.0	32	13.4	10.0	32
184	Vagina	0	0.0	0.0	1	0.4	0.2	1
184.1	Vulva	0	0.0	0.0	5	2.1	1.2	5
185	Prostate	257	110.5	71.2	0	0.0	0.0	257
186	Testis	12	5.2	4.3	0	0.0	0.0	12
187	Penis	0	0.0	0.0	0	0.0	0.0	0
188	Bladder	69	29.7	19.7	23	9.6	5.1	92
189	Kidney	44	18.9	13.0	26	10.9	6.9	70
190	Eye	4	1.7	1.3	2	0.8	0.6	6
191	Brain	21	9.0	8.0	11	4.6	4.3	32
192	Other CNS	0	0.0	0.0	0	0.0	0.0	0
193	Thyroid	8	3.4	2.7	18	7.5	6.1	26
194	Other Endocrine	0	0.0	0.0	0	0.0	0.0	0
199	Unspecified Site	46	19.8	12.3	54	22.6	11.6	100
200-2	All Lymphomas	53	22.8	15.8	42	17.6	10.7	95
202.3-6	Histiocytic Tissue	0	0.0	0.0	0	0.0	0.0	0
203	Multiple Myeloma	15	6.4	4.2	16	6.7	3.6	31
204-8	All Leukaemias	19	8.2	6.4	20	8.4	6.3	39
140-208	Total New Cases	1123	482.8	332.8	1003	419.5	277.9	2126

* N = Number CR = Crude Rate ASR = Age Standardised Rate

ICD-9 SITE	MALES			FEMALES			TOTAL	
	*N	CR	ASR	N	CR	ASR	N	
140	Lip	1	0.4	0.2	2	0.8	0.2	3
141	Tongue	1	0.4	0.2	0	0.0	0.0	1
142	Salivary gland	0	0.0	0.0	0	0.0	0.0	0
143	Gum	0	0.0	0.0	0	0.0	0.0	0
144	Floor of mouth	2	0.9	0.7	0	0.0	0.0	2
145	Other mouth	1	0.4	0.3	1	0.4	0.1	2
146	Oropharynx	0	0.0	0.0	1	0.4	0.2	1
147	Nasopharynx	0	0.0	0.0	1	0.4	0.1	1
148	Hypopharynx	1	0.4	0.3	0	0.0	0.0	1
149	Other pharynx	0	0.0	0.0	1	0.4	0.1	1
150	Oesophagus	18	7.7	5.0	7	2.9	1.6	25
151	Stomach	20	8.6	5.8	14	5.9	3.4	34
152	Small intestine	2	0.9	0.8	1	0.4	0.3	3
153	Colon	51	21.9	14.3	49	20.5	9.6	100
154	Rectum	27	11.6	7.1	31	13.0	7.0	58
155	Liver	9	3.9	2.7	1	0.4	0.3	10
156	Gall bladder	6	2.6	1.4	9	3.8	2.2	15
157	Pancreas	18	7.7	4.9	18	7.5	4.6	36
160	Nasal cavities	3	1.3	1.1	0	0.0	0.0	3
161	Larynx	3	1.3	0.9	0	0.0	0.0	3
162	Lung	145	62.3	41.4	56	23.4	12.5	201
163	Pleura	3	1.3	0.7	0	0.0	0.0	3
164	Thymus	0	0.0	0.0	0	0.0	0.0	0
170	Bone	1	0.4	0.2	1	0.4	0.5	2
171	Soft tissues	2	0.9	0.7	3	1.3	0.7	5
172	Melanoma of skin	14	6.0	4.2	4	1.7	1.2	18
173	Skin	6	2.6	1.6	1	0.4	0.1	7
174-5	Breast	0	0.0	0.0	61	25.5	16.6	61
180	Cervix uteri	0	0.0	0.0	10	4.2	2.7	10
181	Placenta	0	0.0	0.0	0	0.0	0.0	0
182	Corpus uteri	0	0.0	0.0	7	2.9	1.8	7
183	Ovary	0	0.0	0.0	18	7.5	4.3	18
184	Vagina	0	0.0	0.0	2	0.8	0.4	2
184.1	Vulva	0	0.0	0.0	2	0.8	0.2	2
185	Prostate	78	33.5	18.3	0	0.0	0.0	78
186	Testis	0	0.0	0.0	0	0.0	0.0	0
187	Penis	0	0.0	0.0	0	0.0	0.0	0
188	Bladder	12	5.2	2.8	9	3.8	1.4	21
189	Kidney	17	7.3	4.4	5	2.1	1.1	22
190	Eye	0	0.0	0.0	1	0.4	0.3	1
191	Brain	16	6.9	5.3	6	2.5	2.1	22
192	Other CNS	0	0.0	0.0	0	0.0	0.0	0
193	Thyroid	0	0.0	0.0	1	0.4	0.3	1
194	Other endocrine	0	0.0	0.0	0	0.0	0.0	0
199	Unspecified site	34	14.6	8.9	51	21.3	10.5	85
200-2	All lymphomas	20	8.6	5.3	35	14.6	8.4	55
202.3-6	Histiocytic tissue	0	0.0	0.0	0	0.0	0.0	0
203	Multiple myeloma	13	5.6	3.3	5	2.1	0.9	18
204-8	All leukaemias	18	7.7	4.7	15	6.3	4.0	33
140-208	Total deaths	542	233.0	147.5	429	179.4	99.9	971

* N = Number CR = Crude Rate ASR = Age Standardised Rate