

Around 2.4 million new cases of cancer (excluding non-melanoma skin cancers) were diagnosed in EU countries in 2008 (Ferlay *et al.*, 2010), with 55% occurring among males and 45% among females. The most common forms of the disease were prostate, colorectal, breast and lung cancer. The risk of getting cancer before the age of 75 years is 26.5%, or around one in four. However, because the population of Europe is ageing, the rate of new cases of cancer is also expected to increase (European Commission, 2008b).

Large regional inequalities exist in cancer incidence across the European Union. In 2008, the incidence rate for all cancers combined was highest in Northern and Western Europe – Denmark, Ireland, Belgium, France, Norway and Iceland – at over 290 per 100 000 population, but was lower in some Mediterranean countries such as Turkey, Greece, Cyprus and Malta, at less than 220. Rates in Italy were above the EU average of 255 new cases per 100 000 population. Rates in central and eastern European countries varied, being highest in the Czech Republic and Hungary (around 290), similar to the EU average in Slovenia and the Slovak Republic (260), and below average in Romania, Bulgaria, Poland and other countries.

Cancer incidence rates are higher for men than for women in all EU countries (Figure 1.13.1). Here too there is great variation between countries; in Spain and Turkey, male incidence rates are 60% higher than female rates, whereas in Denmark and Cyprus they are less than 10% higher. The average all cancer incidence rate among EU member states was 298 per 100 000 males and 226 per 100 000 females.

In 2008, lung cancer was one of the most common cancers in EU countries, being responsible for around 12% of all new cancer diagnoses, 16% for males and 7% for females. Ten of the fifteen countries with male rates higher than the EU average were located in Central and Eastern Europe (Figure 1.13.2). Rates in Hungary, Poland and Slovenia were higher than 60 per 100 000 population. Male lung cancer incidence rates in Northern Europe (Sweden, Iceland, Finland, Norway) and some southern European countries (Cyprus, Portugal, Malta) were less than 40 per 100 000 population. Among females, lung cancer incidence was especially high in Denmark, but also Hungary, Iceland and the Netherlands, at over 25.

Thirty per cent of all new cancer cases among women diagnosed in 2008 were cancers of the breast – the most common form of cancer among women. Incidence rates were high in western European

countries such as Belgium, France, the Netherlands and Ireland, at over 90 cases per 100 000 population (Figure 1.13.3). Rates in Central, Eastern and Southern Europe were lower, with Turkey, Greece, Romania, Lithuania, Latvia and Poland all reporting less than 50 new cases per 100 000 population. There has been an increase in measured incidence rates of breast cancer over the past decade, although death rates have declined or remained stable. Survival rates have also increased, due to earlier diagnosis and/or better treatment (see Indicator 3.13).

Prostate cancer is the most common form among men in the European Union, particularly for those aged over 65 years of age, comprising one quarter (25%) of all new diagnoses in 2008. Rates were highest in Ireland, France, Belgium and northern European countries (Norway, Sweden, Iceland and Finland). Rates were lower in a range of central, eastern and southern European countries, including Turkey, Greece, Romania and Bulgaria. At least part of the five-fold difference between countries with the highest and lowest incidence rates is due to under-registration of prostate cancer in some countries, as well as the use of sensitive diagnostic tests for early detection in others (Ferlay *et al.*, 2007).

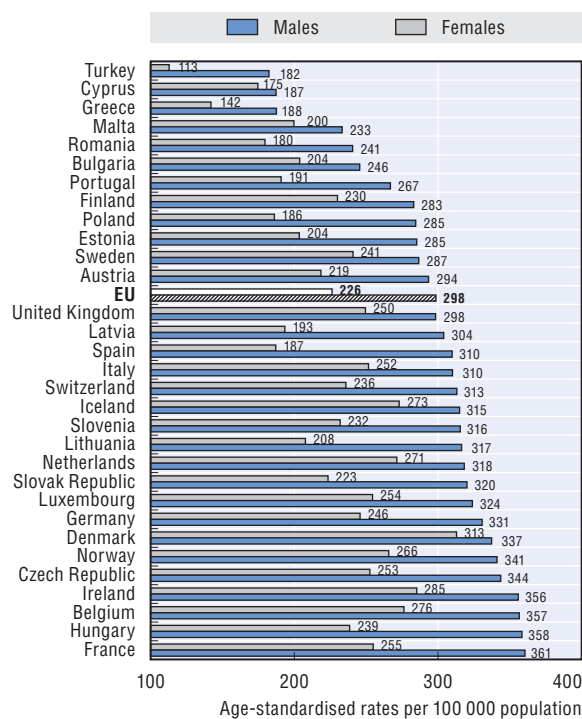
### Definition and deviations

Cancer incidence rates are based on numbers of new cases of cancer registered in a country in a year divided by the size of the corresponding population. The rates have been directly age-standardised to the WHO World standard population to remove variations arising from differences in age structures across countries and over time. The source is GLOBOCAN 2008, at <http://globocan.iarc.fr>.

Cancer registration is well established in a majority of European Union member states, although the quality and completeness of cancer registry data may vary. In some countries, cancer registries only cover subnational areas. The international comparability of cancer incidence data can also be affected by differences in medical training and practice.

The incidence of all cancers is classified to ICD-10 codes C00-C97, lung cancer to C33-C34, breast cancer to C50 and prostate cancer to C61.

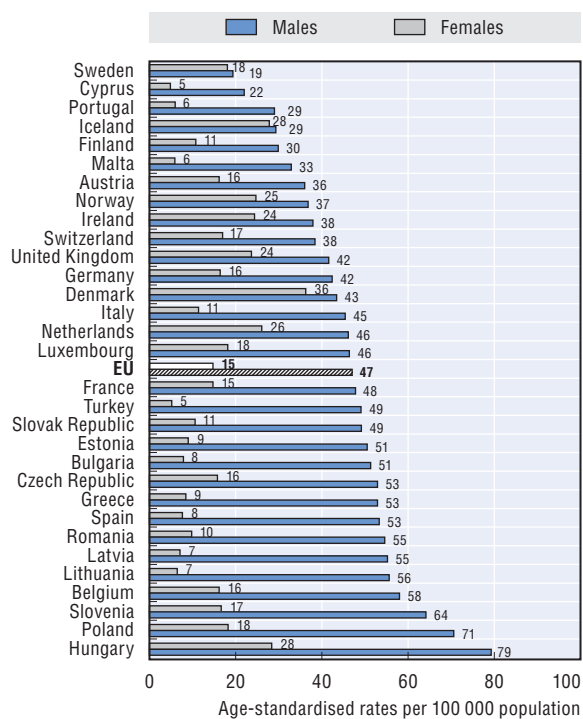
### 1.13.1. All cancers incidence rates, males and females, 2008



Source: OECD Health Data 2010; Ferlay et al. (2010).

StatLink <http://dx.doi.org/10.1787/888932336046>

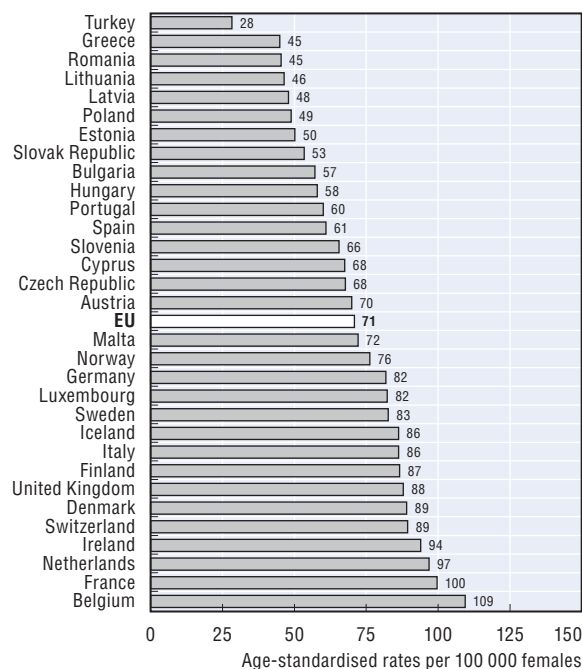
### 1.13.2. Lung cancer incidence rates, males and females, 2008



Source: OECD Health Data 2010; Ferlay et al. (2010).

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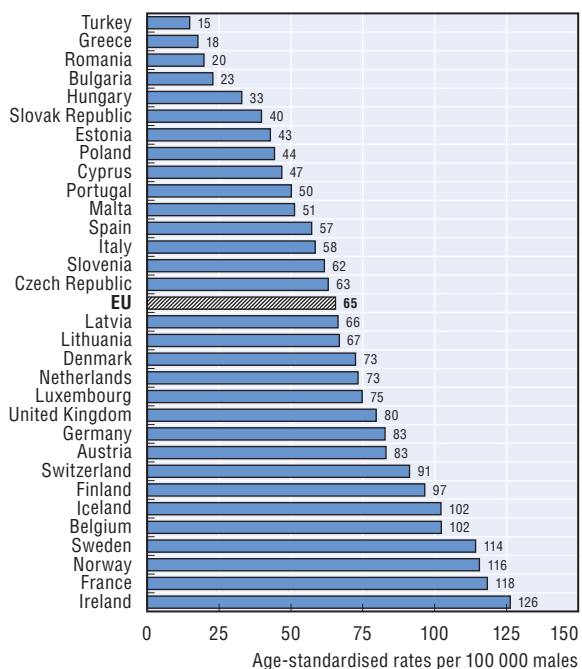
### 1.13.3. Breast cancer incidence rates, females, 2008



Source: OECD Health Data 2010; Ferlay et al. (2010).

StatLink <http://dx.doi.org/10.1787/888932336084>

### 1.13.4. Prostate cancer incidence rates, males, 2008



Source: OECD Health Data 2010; Ferlay et al. (2010).

StatLink <http://dx.doi.org/10.1787/888932336103>



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