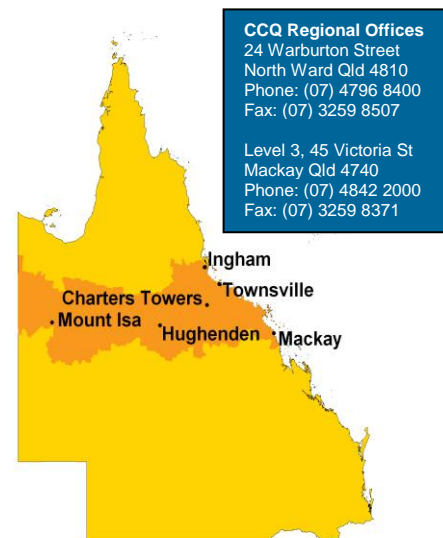


A snap shot of cancer in Northern Queensland

The CCQ Region of Northern Queensland covers nearly one fifth of Queensland (18% or 312,000 km²), stretching from the Townsville in the east to the Northern Territory border in the west. In 2007 it had a population of 384,545, which is 9% of Queensland's total population.

The major population centres are Townsville, Mount Isa, Ingham and Charters Towers, with significant industries of the region including tourism, mining, cattle grazing and sugar cane farming.

The nearest radiation treatment centre for cancer patients in North Queensland is Townsville. The CCQ Regional Office for North Queensland is also located in Townsville, with an additional office located in Mackay.

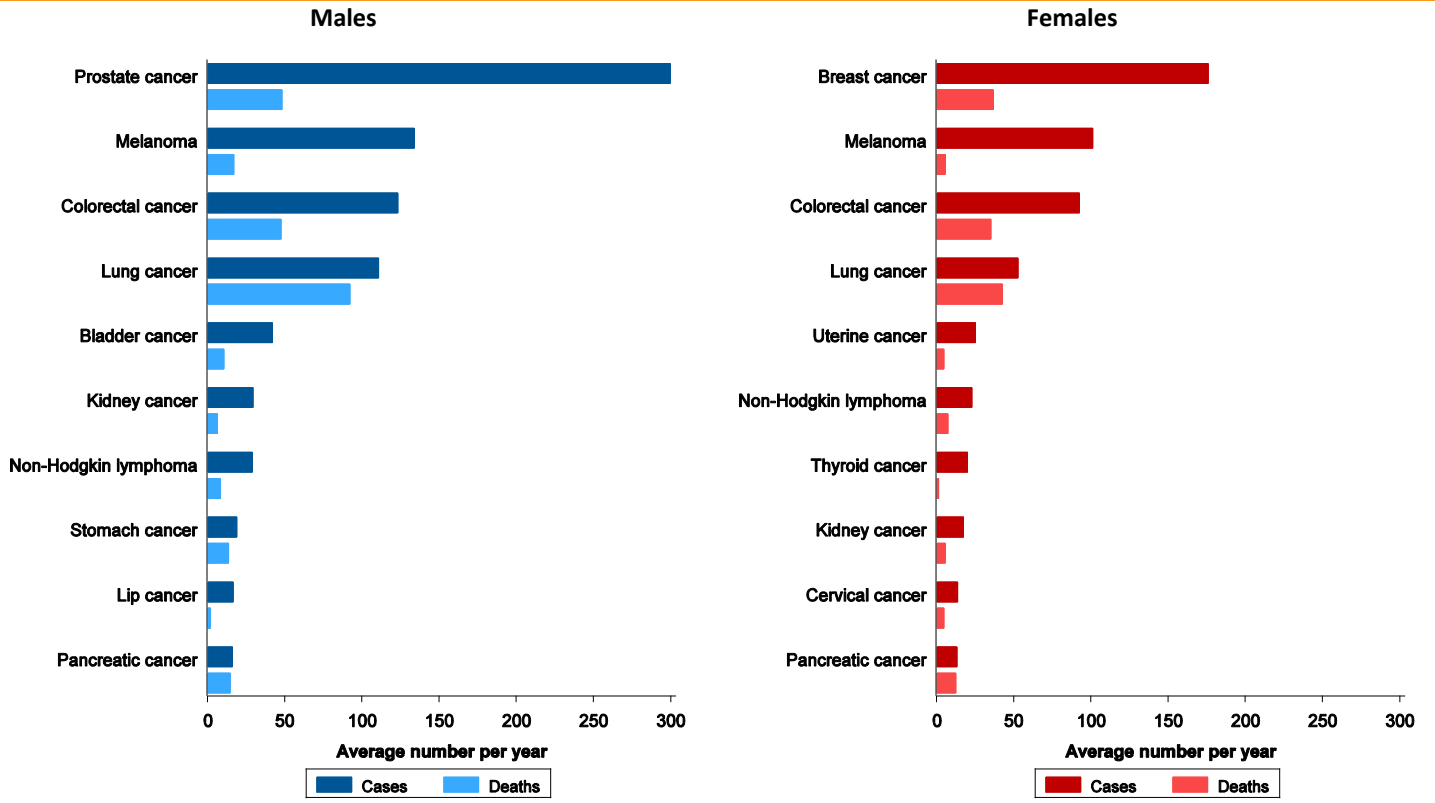


Region Characteristics (2007 data unless otherwise specified)	Northern Qld	Queensland
Per cent of population who ...		
... are female	48.7%	50.1%
... are Indigenous (2006 data)	6.1%	3.2%
... are aged 50 years and over	26.6%	29.5%
... live in remote areas	15.5%	5.1%
... live within 2 hours drive of radiation treatment	54.3%	78.0%
... live more than 6 hours drive from radiation treatment	7.4%	4.7%
... live in disadvantaged areas	11.2%	12.4%
... live in affluent areas	6.8%	16.1%
Life Expectancy at birth (2003-2007)		
Males	78.0 years	79.4 years
Females	83.2 years	84.1 years
Persons	80.5 years	81.7 years

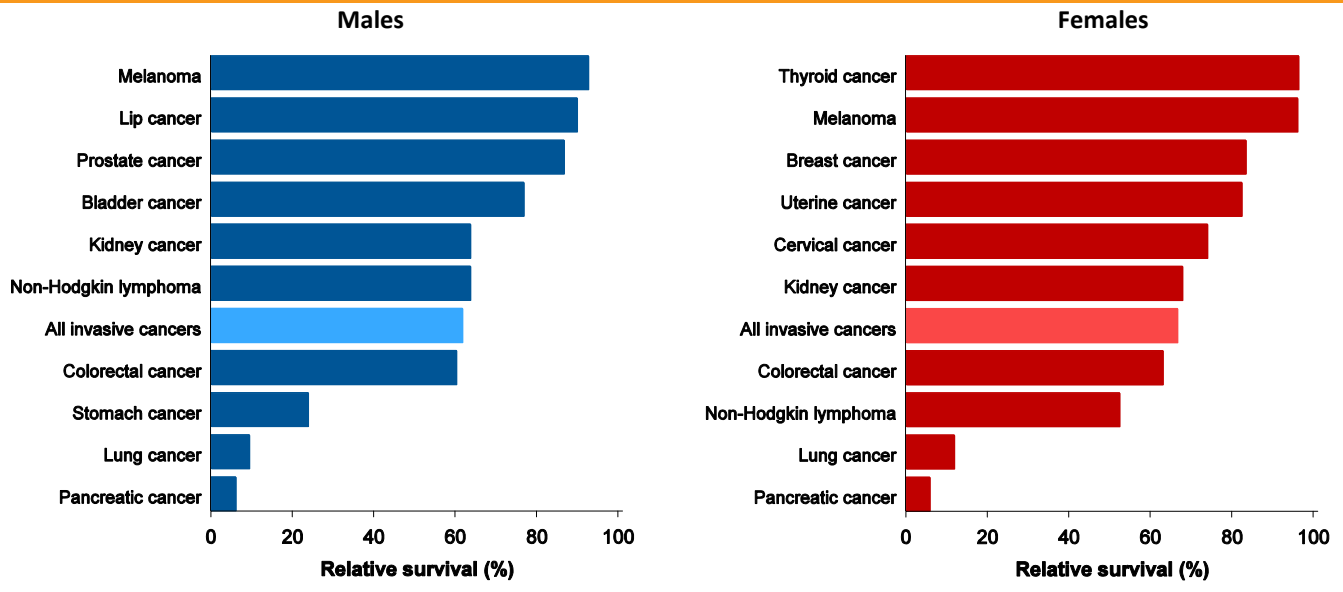
All Cancers*	Male	Female	Persons ¹	Number diagnosed by year
Number of new cases per year:	1046	682	1729	
Chance of diagnosis by age 80:	1 in 2.0	1 in 3.0	1 in 2.4	
Median age at diagnosis:	65 yrs	62 yrs	64 yrs	
Percent surviving for 5 years:	62%	66%	64%	
Number of deaths per year:	368	232	601	
Percent deaths before age 80:	76%	72%	74%	

*See notes on page 4 for more details.
 1. Persons data may not reflect sum of males and females due to rounding.
 Cancers with a lifetime risk above 1 in 5 have the value provided to one decimal point.

The 10 most common cancers diagnosed in Northern Queensland by sex, 2003-2007



Five-year relative survival in Northern Queensland by type of cancer and sex, 1998-2007



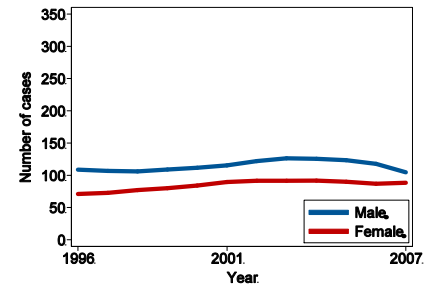
Note: Relative survival calculated using the period method, for persons aged 0-89 years at diagnosis. Data are for "at risk" cases in the period 1998-2007.

Facts about the most common cancers

Colorectal Cancer

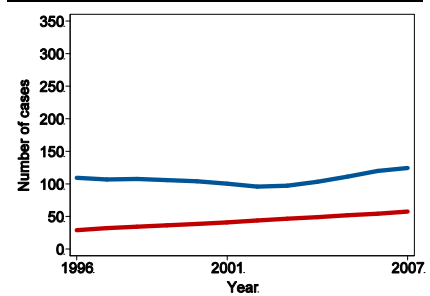
	Male	Female	Persons ¹
Number of new cases per year:	123	92	215
Chance of diagnosis by age 80:	1 in 13	1 in 18	1 in 15
Median age at diagnosis:	66 yrs	69 yrs	68 yrs
% surviving for 5 years:	60%	63%	61%
Number of deaths per year:	47	35	82
Percent deaths before age 80:	75%	66%	71%

Number diagnosed by year



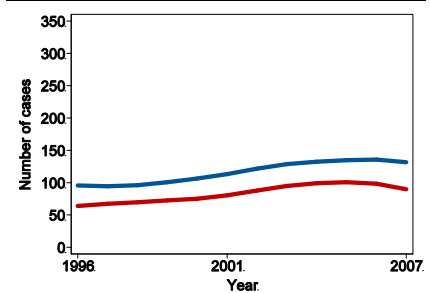
Lung Cancer

	Male	Female	Persons ¹
Number of new cases per year:	110	52	163
Chance of diagnosis by age 80:	1 in 13	1 in 30	1 in 18
Median age at diagnosis:	68 yrs	68 yrs	68 yrs
Percent surviving for 5 years:	9%	12%	10%
Number of deaths per year:	92	42	134
Percent deaths before age 80:	84%	76%	81%



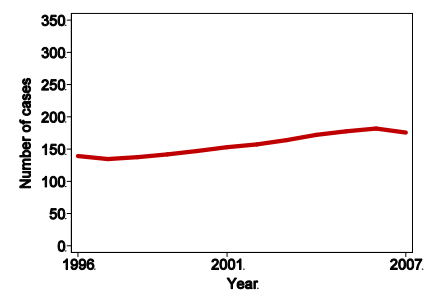
Melanoma

	Male	Female	Persons ¹
Number of new cases per year:	134	101	235
Chance of diagnosis by age 85:	1 in 13	1 in 20	1 in 16
Median age at diagnosis:	60 yrs	53 yrs	57 yrs
Percent surviving for 5 years:	93%	96%	94%
Number of deaths per year:	17	5	22
Percent deaths before age 80:	71%	81%	74%



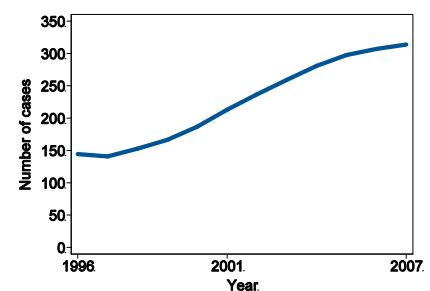
Female Breast Cancer

	Female
Number of new cases per year:	176
Chance of diagnosis by age 80:	1 in 11
Median age at diagnosis:	57 yrs
Percent surviving for 5 years:	83%
Number of deaths per year:	37
Percent deaths before age 80:	83%



Prostate Cancer

	Male
Number of new cases per year:	299
Chance of diagnosis by age 80:	1 in 5
Median age at diagnosis:	67 yrs
Percent surviving for 5 years:	87%
Number of deaths per year:	48
Percent deaths before age 80:	57%



See notes on page 4 for more details. Cancers with a lifetime risk above 1 in 5 have the value provided to one decimal point.
1. Persons data may not reflect sum of males and females due to rounding.

More information for those who like the details

Type of Cancer	Incidence ^a		Five-year relative survival ^c (%)	Mortality ^a	
	Average number per year	Annual rate ^b (per 100,000)		Average number per year	Annual rate ^b (per 100,000)
Males					
All invasive cancers	1046	666 [648,684]	62 [60,63]	368	258 [246,270]
Prostate cancer	299	194 [184,204]	87 [84,89]	48	39 [34,44]
Melanoma	134	81 [75,88]	93 [90,95]	17	12 [9,14]
Colorectal cancer	123	79 [73,86]	60 [57,64]	47	33 [29,37]
Lung cancer	110	72 [66,78]	9 [8,11]	92	62 [56,68]
Bladder cancer	42	29 [25,33]	76 [69,82]	10	8 [6,10]
Kidney cancer	29	18 [15,21]	63 [56,70]	6	4 [3,6]
Non-Hodgkin lymphoma	29	17 [15,20]	64 [56,71]	8	6 [4,8]
Stomach cancer	19	13 [10,16]	23 [16,31]	13	9 [7,12]
Lip cancer	16	10 [8,12]	90 [81,97]	**	**
Pancreatic cancer	16	11 [8,13]	6 [2,11]	14	10 [8,13]
Females					
All invasive cancers	682	408 [395,422]	66 [65,68]	232	142 [134,150]
Breast cancer	176	103 [97,111]	84 [81,86]	37	22 [19,25]
Melanoma	101	59 [54,64]	96 [94,98]	5	3 [2,5]
Colorectal cancer	92	56 [51,62]	63 [59,67]	35	21 [18,25]
Lung cancer	52	32 [28,36]	12 [9,15]	42	26 [23,30]
Uterine cancer	25	15 [12,18]	83 [76,88]	**	**
Non-Hodgkin lymphoma	23	14 [11,17]	52 [44,60]	7	4 [3,6]
Thyroid cancer	20	11 [9,14]	96 [90,99]	**	**
Kidney cancer	17	11 [9,13]	68 [58,76]	5	3 [2,5]
Cervical cancer	13	8 [6,10]	6 [2,11]	12	8 [6,10]
Pancreatic cancer	13	8 [6,10]	75 [67,81]	**	**
Persons^d					
All invasive cancers	1729	530 [519,541]	64 [63,64]	601	194 [187,201]
Prostate cancer	299	n.a.	87 [84,89]	48	n.a.
Melanoma	235	69 [65,73]	94 [92,96]	22	7 [6,8]
Colorectal cancer	215	68 [64,72]	61 [59,64]	82	27 [24,29]
Breast cancer (females only)	176	n.a.	84 [81,86]	37	n.a.
Lung cancer	163	51 [48,55]	10 [8,12]	134	43 [40,47]
Bladder cancer	52	17 [15,19]	76 [70,81]	14	5 [4,6]
Non-Hodgkin lymphoma	51	16 [14,18]	59 [53,64]	15	5 [4,6]
Kidney cancer	46	14 [13,16]	65 [59,70]	12	4 [3,5]
Pancreatic cancer	29	9 [8,11]	6 [3,9]	27	9 [7,10]
Thyroid cancer	29	8 [7,10]	95 [90,98]	**	**

- Notes:
- Incidence and mortality data are averaged over the 5 year period from 2003-2007.
 - Incidence and mortality rates have been directly age-standardised to the 2001 Australian Standard population, with 95% confidence intervals shown in brackets.
 - Five-year relative survival calculated using the period method, for persons aged 0-89 years at diagnosis, with 95% confidence intervals shown in brackets. Estimates are for "at risk" cases in the period 1998-2007.
 - Persons data may not reflect sum of males and females due to rounding.

Symbols: ** Incidence or mortality counts that averaged less than 5 per year (and the corresponding rates) have been suppressed to protect confidentiality. Counts and rates for persons have also been suppressed when necessary.
n.a. = not applicable (rates for persons not applicable for sex-specific cancers).

Notes:

- All data are sourced from the Queensland Cancer Registry. The access and use of these data for reporting purposes is subject to strict confidentiality and privacy constraints.
- Trend lines for incidence numbers have been smoothed using the "Lowess" method.
- Remote areas are defined by the ARIA+ classification (combines Remote and Very Remote).
- Travelling times to radiation treatment are calculated using spatial and road network software, and are approximate based on the shortest road distances at the recommended speed limits.
- "Affluent areas" are the 20% of most advantaged Statistical Local Areas (SLAs) and "Disadvantaged areas" are the 20% of most disadvantaged SLAs as defined by the SEIFA Index of Advantage and Disadvantage obtained from the Australian Bureau of Statistics.
- Census and population data obtained from the Australian Bureau of Statistics.
- "Percent survival" represents relative survival, which is the ratio of the time that cancer patients survive after being diagnosed with cancer to the expected survival of the general population, taking into account age, sex and year of diagnosis. This ratio is then multiplied by 100.



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

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