Munich Cancer Registry



- Survival
- Selection Matrix
- ▶ Homepage

Munich Cancer Registry at Munich Cancer Center Marchioninistr. 15 Munich, 81377 Germany

http://www.tumorregister-muenchen.de/en

Cancer statistics: Baseline statistics

C66: Ureteral cancer

Year of diagnosis	1998-2011
Patients	389
Diseases	392
Creation date	04/02/2013
Export date	01/03/2013
Population	4.5 m



http://www.tumorregister-muenchen.de/en/facts/base/base_C66__E.pdf

Global Statements about the statistics on the Internet -

Baseline Statistics (grey button ___), Survival (red button ___)

In these analyses, the clinics and physicians of Upper Bavaria and the city and county of Landshut[#], with a total of 4.5 million inhabitants, account for the frequency of cancer diseases^{##} and the achieved long term results. Additionally, the long term survival evaluated by the Munich Cancer Registry (MCR) is compared with the results of the population-based registry in the USA (SEER), which is useful for checking the consistency of the data on an international level.

In comparing several tables, inconsistent figures may be detected. This is based on the fact that different patient cohorts are included in the base calculation, for example when proportions of multiple tumors or DCO-cases^{###} are concerned. In other cases the individual tumor diagnosis is the basis for calculation, for example with incidence.

The foot notes describe the currentness of the data. The baseline statistics and survival data are updated annually. This yearly analysis comprises the Annual Report of the MCR. The time-delayed acquisition of data and the occasionally high DCO-rates indicate optimizing reserves, among others, because of current financial and legal conditions that hinder the analyses.

Clinics and physicians have access to essentially more detailed data, with which they can check, compare and in the best case optimize their own data and results.

We would be pleased to receive corrections, critique and useful suggestions. Just send an e-mail to tumor@ibe.med.uni-muenchen.de.

Munich Cancer Registry, April 2013

- [#] Base data has been collected since 1998. An increase in new diseases is apparent, which is an effect of two extensions in the MCR catchment area (from a base population of 2.51 million to 3.96 in 2002, and to 4.52 million in 2007). Death certificates from 2011 are incorporated into these analyses.
- ^{##} Due to the high frequency and good prognosis of non-malignant skin cancer (C44), no systematic ascertainment is performed for this diagnosis. C44 is not designated as a primary, but rather as a secondary tumor.
- ### DCO (death certificate only) identifies a cancer case that first becomes available to the MCR through the death certificate. A high proportion of DCO cases (≥5%) in particular cancer types indicate insufficient participation of specific cancer specializations.

INCIDENCE

Table 1

Patient cohorts by year of diagnosis including DCO cases and multiple primaries, and with proportion of deaths and active follow-up

		DCO	Brop	Prop. mult.	Prop.	Prop. actively	
Year of	Cases #	cases	Prop. DCO	primaries	deaths	followed	
			DCO %	primaries %	veatins %	20110wed %	
diagnosis	n	n	6	6	6	6	
1998	20			75.0	85.0	100.0	
1999	11			72.7	81.8	100.0	
2000	12			66.7	58.3	100.0	
2001	24			62.5	95.8	100.0	
2002	30			56.7	76.7	100.0	
2003	18			61.1	44.4	100.0	
2004	24			66.7	62.5	91.7	
2005	38			63.2	65.8	94.7	
2006	36			72.2	63.9	94.4	
2007	34			67.6	47.1	73.5 ##	
2008	37			62.2	45.9	78.4	
2009	37			64.9	51.4	73.0	
2010	37	1	2.7	73.0	48.6	86.5	
2011	34			64.7	14.7	76.5 ###	
1998-2011	392	1	0.3	66.1	57.4	88.3	

The increases of incident cases in 2002 and 2007 reflect the expansion to additional registry areas.

- ## Since 2007 the percentage of actively followed patients sharply declined compared to the previous years. This is a consequence of ambiguous data protection rules that currently forbid cancer registries in Bavaria to obtain the essential life status informations from competent registration offices.
- ### Please be aware that data of recent annual patient cohorts may not yet be fully processed. Therefore, the presented figures and tables are potentially related to different time periods as pointed out in the respective headlines or legends.

Table 1a

Patient cohorts by year of diagnosis and gender including DCO cases

Year of	All	Males	Females	Prop. males	
diagnosis	n	n	n	00	
1998	20	13	7	65.0	
1999	11	7	4	63.6	
2000	12	7	5	58.3	
2001	24	13	11	54.2	
2002	30	17	13	56.7	
2003	18	9	9	50.0	
2004	24	15	9	62.5	
2005	38	27	11	71.1	
2006	36	23	13	63.9	
2007	34	26	8	76.5	
2008	37	19	18	51.4	
2009	37	25	12	67.6	
2010	37	26	11	70.3	
2011	34	21	13	61.8	
1998-2011	392	248	144	63.3	

Table 2

Incidence measures by year of diagnosis and gender including DCO cases (with respect to registry area expansion from 2.51 to 3.96 m as of 2002, and from 3.96 to 4.52 m as of 2007, respectively)

Year of diagnosis	Males n	Females n	Males Inc. raw	Fem. Inc. raw	Males Inc. WS	Fem. Inc. WS	Males Inc. ES	Fem. Inc. ES	Males Inc. BRD-S	Fem. Inc. BRD-S
uragilosis	11	11	Iaw	Iaw	MD	MD	CD CD	69	BKD-3	BKD-5
1998	13	7	1.2	0.6	0.8	0.3	1.1	0.4	1.5	0.5
1999	7	4	0.6	0.3	0.4	0.1	0.6	0.2	0.8	0.2
2000	7	5	0.6	0.4	0.4	0.2	0.6	0.2	0.8	0.4
2001	13	11	1.1	0.9	0.6	0.4	1.0	0.6	1.4	0.8
2002	17	13	0.9	0.7	0.5	0.3	0.8	0.5	1.0	0.6
2003	9	9	0.5	0.5	0.2	0.2	0.4	0.3	0.6	0.4
2004	15	9	0.8	0.5	0.4	0.2	0.6	0.3	0.9	0.4
2005	27	11	1.4	0.6	0.7	0.2	1.1	0.4	1.5	0.4
2006	23	13	1.2	0.6	0.6	0.2	0.9	0.4	1.2	0.5
2007	26	8	1.2	0.3	0.6	0.1	0.9	0.2	1.1	0.3
2008	19	18	0.9	0.8	0.5	0.3	0.7	0.4	0.9	0.6
2009	25	12	1.1	0.5	0.6	0.1	0.8	0.2	1.1	0.4
2010	26	11	1.2	0.5	0.5	0.2	0.7	0.3	1.1	0.4
2011	21	13	0.9	0.6	0.5	0.2	0.7	0.3	1.0	0.4
1998-2011	248	144	1.0	0.5	0.5	0.2	0.8	0.3	1.0	0.4

The computation of the incidence measures includes all primaries, irrespective of first or subsequent malignancy.

Table 3

Year of	Cases		Std.					Median		
diagnosis	n	Mean	dev.	Min.	Max.	10%	25%	50%	75%	90%
1998	20	70.4	9.0	49.0	83.3	57.1	66.9	70.0	78.3	81.1
1999	11	74.4	12.9	49.4	89.5	55.0	69.7	76.5	87.7	87.8
2000	12	71.2	10.4	45.2	81.7	62.8	66.7	73.1	79.8	80.6
2001	24	73.6	7.4	57.2	87.5	61.8	70.4	74.6	77.9	80.5
2002	30	70.0	9.9	51.7	91.1	56.6	62.3	71.5	75.3	82.7
2003	18	74.1	8.7	56.6	87.3	60.9	69.8	76.2	80.4	85.0
2004	24	72.8	11.4	46.3	94.6	54.9	69.6	74.2	79.8	84.2
2005	38	70.8	11.8	38.2	93.3	54.6	65.9	71.0	78.2	89.2
2006	36	72.7	9.4	50.5	88.7	59.2	66.4	72.7	80.3	84.6
2007	34	72.4	8.0	53.2	87.8	62.9	67.6	73.9	76.3	82.8
2008	37	72.0	9.4	49.3	87.2	61.2	64.6	73.5	79.2	84.9
2009	37	71.9	10.9	29.1	89.0	60.1	67.9	71.5	79.4	83.9
2010	37	73.4	8.7	52.4	85.6	59.4	70.3	73.8	80.4	84.4
2011	34	72.6	10.0	50.3	89.7	59.1	64.9	73.1	80.9	84.8
1998-2011	392	72.2	9.7	29.1	94.6	59.1	67.0	73.3	79.4	84.0

Age distribution parameters by year of diagnosis (All) (incl. DCO)

Table 3a

Age distribution parameters by year of diagnosis (MALES) (incl. DCO)

Year of	Cases		Std.					Median		
diagnosis	n	Mean	dev.	Min.	Max.	10%	25%	50%	75%	90%
-										
1998	13	69.5	9.1	49.0	81.7	55.6	67.8	69.9	74.9	80.4
1999	7	70.5	14.1	49.4	89.5	49.4	55.0	72.3	80.9	89.5
2000	7	68.9	11.5	45.2	80.3	45.2	66.2	73.0	76.6	80.3
2001	13	73.7	6.6	61.6	86.8	64.0	70.5	74.8	76.9	78.0
2002	17	69.2	9.9	52.0	91.1	55.1	62.3	70.9	74.4	80.3
2003	9	73.6	11.1	56.6	87.3	56.6	63.9	77.8	80.7	87.3
2004	15	73.4	9.8	54.9	86.9	55.9	69.8	74.9	80.1	84.2
2005	27	71.4	11.4	49.7	93.3	54.6	65.9	70.5	78.5	89.2
2006	23	71.4	8.0	50.5	84.3	64.0	65.8	71.2	79.7	80.5
2007	26	71.6	8.3	53.2	87.8	62.9	66.9	71.2	76.3	83.7
2008	19	69.2	10.7	49.3	87.2	51.3	61.7	67.8	78.3	85.9
2009	25	69.1	11.4	29.1	89.0	59.5	64.1	70.2	73.8	81.3
2010	26	75.8	6.9	60.0	85.6	67.4	70.4	75.3	80.9	85.1
2011	21	70.8	9.8	50.3	84.9	59.2	64.6	68.4	79.6	82.6
1998-2011	248	71.4	9.7	29.1	93.3	58.5	66.0	71.8	78.4	83.0

Table 3b

Age distribution parameters by year of diagnosis (FEMALES) (incl. DCO)

Year of	Cases		Std.					Median		
diagnosis	n	Mean	dev.	Min.	Max.	10%	25%	50%	75%	90%
aragnobib		nean	ucv.	11111.	max.	100	250	500	750	200
1998	7	72.2	9.1	58.5	83.3	58.5	64.7	72.4	80.2	83.3
1999	4	81.2	7.8	72.3	87.8	72.3	74.6	82.3	87.7	87.8
2000	5	74.3	8.7	62.8	81.7	62.8	67.3	79.2	80.6	81.7
2001	11	73.5	8.6	57.2	87.5	61.8	70.4	73.7	79.9	80.5
2002	13	71.1	10.1	51.7	87.0	58.6	65.3	72.7	76.0	85.0
2003	9	74.6	6.0	64.1	83.1	64.1	71.0	75.0	79.2	83.1
2004	9	71.8	14.3	46.3	94.6	46.3	69.4	73.5	79.4	94.6
2005	11	69.3	13.2	38.2	91.0	59.5	65.4	71.6	78.2	78.2
2006	13	74.9	11.5	52.1	88.7	58,1	71.9	75.1	84.6	87.4
2007	8	74.7	6.8	60.3	82.8	60.3	72.6	75.7	78.8	82.8
2008	18	75.0	7.0	63.6	85.7	64.5	68.6	74.5	80.0	84.9
2009	12	77.9	6.9	66.0	87.2	67.9	72.3	79.2	83.5	84.0
2010	11	67.7	10.0	52.4	79.8	54.6	55.5	72.2	75.6	75.9
2011	13	75.7	9.9	56.8	89.7	59.1	71.4	75.3	83.5	86.7
1998-2011	144	73.6	9.7	38.2	94.6	59.4	68.6	74.3	80.1	84.9

Age at diagnosis	Cases			Males			Females		
Years	n	00	Cum.%	n	olo	Cum.%	n	00	Cum.%
25-29	1	0.3	0.3	1	0.4	0.4			0.0
30-34	0	0.0	0.3			0.4			0.0
35-39	1	0.3	0.5			0.4	1	0.7	0.7
40-44	0	0.0	0.5			0.4			0.7
45-49	б	1.5	2.0	5	2.0	2.4	1	0.7	1.4
50-54	16	4.1	6.1	11	4.4	6.9	5	3.5	4.9
55-59	22	5.6	11.7	13	5.2	12.1	9	6.3	11.1
60-64	34	8.7	20.4	25	10.1	22.2	9	6.3	17.4
65-69	62	15.8	36.2	47	19.0	41.1	15	10.4	27.8
70-74	91	23.2	59.4	55	22.2	63.3	36	25.0	52.8
75-79	73	18.6	78.1	42	16.9	80.2	31	21.5	74.3
80-84	56	14.3	92.3	33	13.3	93.5	23	16.0	90.3
85+	30	7.7	100.0	16	6.5	100.0	14	9.7	100.0
All ages	392	100.0		248	100.0		144	100.0	

Age distribution by 5-year age group and gender for period 1998-2011 (incl. DCO)

Table 4

Included in the statistics are 121.6% multiple primaries in males and 86.8% in females.

Table 5

Males Females Males Females Males Females Prop.all Prop.all Age at DCO rate DCO rate cancers cancers Age- Agediagnosis Males Females n=0n=1 n=132509 n=129521 spec. spec. Years incid. incid. % n n % % % 0- 4 0.0 0.0 5-9 0.0 0.0 10 - 140.0 0.0 15-19 0.0 0.0 20-24 0.0 0.0 25-29 1 0.1 0.0 0.1 30-34 0.0 0.0 35-39 1 0.0 0.0 0.0 40 - 440.0 0.0 45-49 5 1 0.3 0.1 0.1 0.0 50-54 5 0.7 0.3 0.1 11 0.2 12 55-59 9 0.8 0.5 0.1 0.1 60-64 25 9 0.6 0.1 1.6 0.1 65-69 47 0.2 0.1 15 3.4 1.0 70-74 54 5.2 2.9 0.2 0.2 36 75-79 42 6.2 3.1 3.2 0.2 31 0.2 80-84 32 23 7.9 2.9 0.2 0.3 1.9 14 5.8 0.1 85+ 16 0.2 245 144 0.0 0.7 0.2 0.1 All ages Incidence 0.5 Raw 1.0 0.5 WS 0.2 ES 0.8 0.3 BRD-S 1.0 0.4

Age-specific incidence, DCO rate and proportion of all cancers for period 1998-2011

The age-specific incidence characterizes the disease risk in a particular age group. The age distribution depends on the patient population frequency in each age group and reflects the tangible clinical picture of everyday patients care (see following chart).

Table 6a

Standardized incidence ratio (SIR, with 95% confidence limits), excess absolute risk (EAR) and DCO rate of second primaries for period 1998-2011 MALES

		Observed	Expected		LCL	UCL		DCO
Diagnosis		n	'n	SIR	95%	95%	EAR	00
C15 Oesc	ophagus	3	0.2	16.7	3.4	48.7 #	50.4	33.3
C33-C34 Lung	g	6	1.4	4.4	1.6	9.5 #	82.8	16.7
C61 Pros	state	13	3.4	3.8	2.0	6.6 #	172.1	7.7
C64 Kidr	ney	6	0.4	15.8	5.8	34.5 #	100.6	66.7
C65 Rena	al pelvis	19	0.0	381.0	229.4	595.0 #	339.0	
C67 Blad	dder	27	0.6	48.9	32.2	71.2 #	473.1	
Other primar	ries	9	3.4	2.6	1.2	5.0 #	99.6	11.1
Not observed	d	0	2.3	0.0	0.0	1.6	-40.9	
All mult. pr	rimaries	83	11.6	7.1	5.7	8.8 #	1277	9.6
C61 Pros C64 Kidr C65 Rena C67 Blad Other primar Not observed	state ney al pelvis dder ries d	13 6 19 27 9 0	3.4 0.4 0.0 0.6 3.4 2.3	3.8 15.8 381.0 48.9 2.6 0.0	2.0 5.8 229.4 32.2 1.2 0.0	6.6 # 34.5 # 595.0 # 71.2 # 5.0 # 1.6	172.1 100.6 339.0 473.1 99.6 -40.9	7 66 11

The occurrence of second malignancy is statistically significant.

Mean age at second malignancy (years)

Mean observation time (years)

Median observation time (years)

Observed second primaries with count 1 are pooled in category "Other primaries".

Patients

Person-years

189 72.0

559

3.0

2.0

Table 6b

Standardized incidence ratio (SIR, with 95% confidence limits), excess absolute risk (EAR) and DCO rate of second primaries for period 1998-2011 FEMALES

		Observed	Expected		LCL	UCL		DCO
Diagnos	is	n	n	SIR	95%	95%	EAR	00
a22 a24	T	2	0.2	F 0	0 7	01 0	45 0	
C33-C34	Lung	2	0.3	5.9	0.7	21.2	45.9	
C50	Breast	3	1.3	2.3	0.5	6.6	46.1	
C64	Kidney	2	0.1	14.5	1.8	52.3 #	51.5	100.0
C65	Renal pelvis	5	0.0	289.1	93.9	674.7 #	137.7	
C67	Bladder	12	0.1	110.3	57.0	192.7 #	328.7	
Other p	rimaries	4	0.8	5.1	1.4	13.0 #	88.8	
Not obs	erved	0	2.4	0.0	0.0	1.6	-65.0	
All mul	t. primaries	28	5.1	5.5	3.7	8.0 #	633.8	7.1

Patients	110	
Mean age at second malignancy (years)	72.9	
Person-years	362	
Mean observation time (years)	3.3	
Median observation time (years)	2.2	

The occurrence of second malignancy is statistically significant.

Observed second malignancy with count 1 are pooled in category "Other primaries".

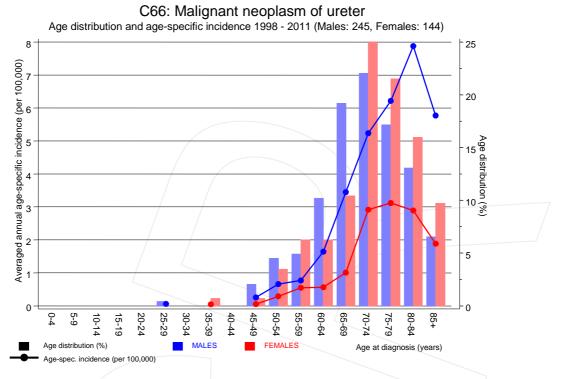


Figure 7. Age distribution and age-specific incidence



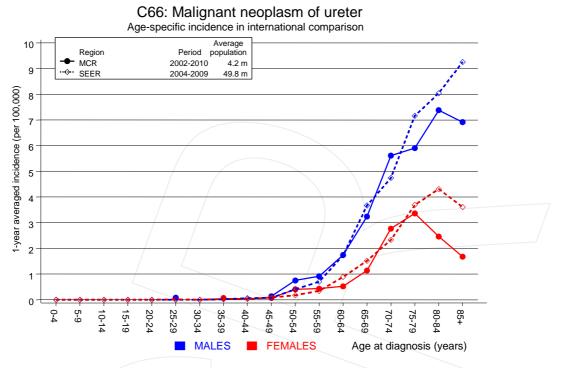
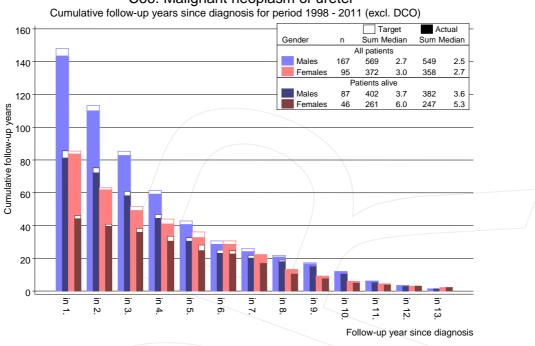


Figure 7a. Age-specific incidence in MCR registry areas compared to SEER (Surveillance, Epidemiology, and End Results, USA).



Surveillance, Epidemiology, and End Results (SEER) Program SEER*Stat Database: Incidence - SEER 18 Regs Research Data, released April 2012, based on the November 2011 submission. http://www.seer.cancer.gov.

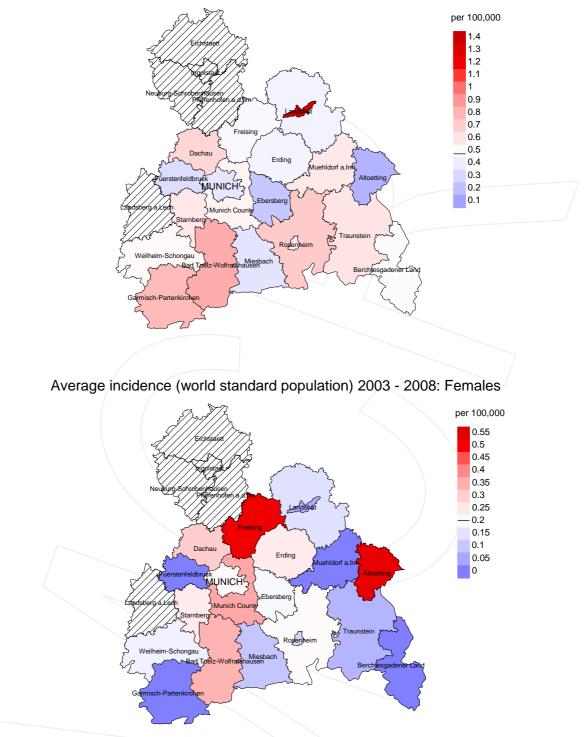


C66: Malignant neoplasm of ureter

Figure 8. Cumulative follow-up years depending on time since diagnosis

The increase of the lost to follow-up rate can be interpreted as a consequence of a declining number of survivors over time.

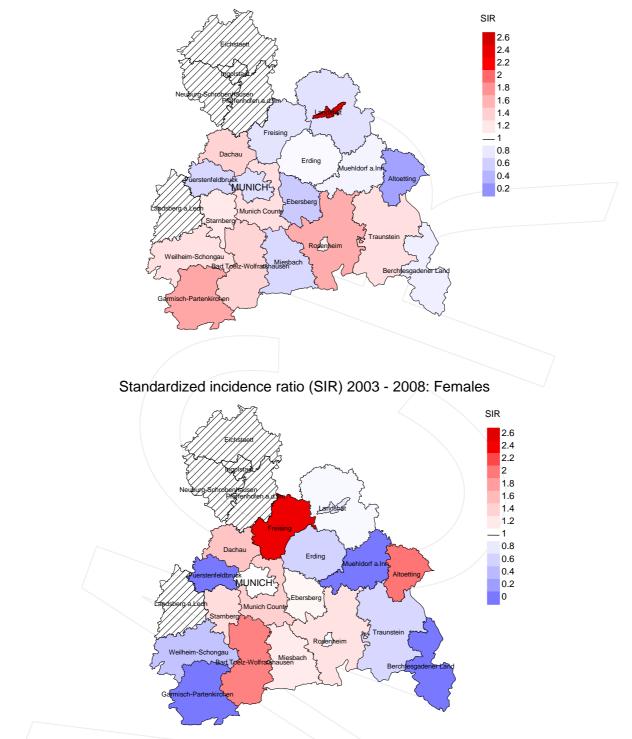




Average incidence (world standard population) 2003 - 2008: Males

Figure 9a. Map of cancer incidence (world standard population, incl. DCO cases) by county averaged for period 2003 to 2008. According to their individual incidence rates, the counties are displayed in different red and blue color temperatures where the fine white color indicates the population mean (males 0.5/100,000 WS N=112, females 0.2/100,000 WS N=64). Since cancer data are not available in some counties until 2007, the local incidence rates were not calculated, and the map tiles show as shaded.

The results should be interpreted with caution! E.g., in county Ebersberg with a population of 63,131 female residents (averaged) in the period from 2003 to 2008 a total of 2 women were identified with newly diagnosed ureteral cancer. Therefore, the mean incidence rate for this cancer type in this area can be calculated at 0.2/100,000 (world standard population). Though, the value of this parameter may vary with an underlying probability of 99% between 0.0 and 1.0/100,000.



Standardized incidence ratio (SIR) 2003 - 2008: Males

Figure 9b. Map of standardized incidence ratio (SIR, incl. DCO cases) by county averaged for period 2003 to 2008. According to their individual SIR values, the counties are displayed in different red and blue color temperatures where the fine white color indicates the population overall of 1.0 (males N=112, females N=64). Since cancer data are not available in some counties until 2007, the local SIR values were not calculated, and the map tiles show as shaded.

The results should be interpreted with caution! E.g., in county Ebersberg with a population of 63,131 female residents (averaged) in the period from 2003 to 2008 a total of 2 women were identified with newly diagnosed ureteral cancer. Therefore, the mean standardized incidence ratio (SIR) for this cancer type in this area can be calculated at 1.09. Though, the value of this parameter may vary with an underlying probability of 99% between 0.06 and 5.03, and is therefore not statistically striking.

MORTALITY

Table 10a

Patient cohorts of incident cancers by year of diagnosis, follow-up status, proportion of DCO, deaths among the annual cohorts, and proportion of available death certificates (with respect to registry area expansion from 2.51 to 3.96 m as of 2002, and from 3.96 to 4.52 m as of 2007, respectively)

		Prop.				Prop. deaths
	Incident	actively	Prop.		Prop.	with death
Year of	cases	followed	DCO	Deaths	deaths	certific.
diagnosis	n	00	00	n	00	00
1998	20	100.0		17	85.0	100.0
1999	11	100.0		9	81.8	100.0
2000	12	100.0		7	58.3	100.0
2001	24	100.0		23	95.8	100.0
2002	30	100.0		23	76.7	95.7
2003	18	100.0		8	44.4	100.0
2004	24	91.7		15	62.5	93.3
2005	38	94.7		25	65.8	96.0
2006	36	94.4		23	63.9	100.0
2007	34	73.5		16	47.1	100.0
2008	37	78.4		17	45.9	100.0
2009	37	73.0		19	51.4	100.0
2010	37	86.5	2.7	18	48.6	88.9
2011	34	76.5		5	14.7	100.0
1998-2011	392	88.3	0.3	225	57.4	97.8



Table 10b

Annual cohorts of incident cancers and deaths, proportion of death certificates and cases deceased the same year of cancer diagnosis (incl. DCO)

(with respect to registry area expansion from 2.51 to 3.96 m as of 2002, and from 3.96 to 4.52 m as of 2007, respectively)

			Prop.		
			deaths		Prop.
Year of	Incident		with death	Deaths in	deaths in
diagnosis/	cases	Deaths	certific.	same year	same year
death	n	n	%	n	20
1998	20	14	85.7	3	15.0
1999	11 /	8	100.0	1	9.1
2000	12	9	100.0	2	16.7
2001	24	12	100.0	3	12.5
2002	30	10	100.0	1	3.3
2003	18	25	96.0	4	22.2
2004	24	13	100.0	1	4.2
2005	38	16	100.0	4	10.5
2006	36	24	95.8	2	5.6
2007	34	20	95.0		
2008	37	33	100.0	2	5.4
2009	37	33	100.0	7	18.9
2010	37	27	100.0	3	8.1
2011	34	33	100.0	3	8.8
1998-2011	392	277	98.2	36	9.2

Table 10c

Annual cohorts of deaths, proportion of cancer-related and not cancerrelated deaths, and cancer recorded on death certificates (incl. DCO) (with respect to registry area expansion from 2.51 to 3.96 m as of 2002, and from 3.96 to 4.52 m as of 2007, respectively)

		Prop. cancer-	Prop. not cancer-	Prop. cancer recorded on death	
Year of	Deaths	related	related	certificate	
death	n	ୄୄୄ	8	8	
1998	14	64.3	35.7	83.3	
1999	8	75.0	25.0	87.5	
2000	9	77.8	22.2	88.9	
2001	12	75.0	25.0	83.3	
2002	10	80.0	20.0	100.0	
2003	25	84.0	16.0	87.5	
2004	13	69.2	30.8	69.2	
2005	16	81.3	18.8	81.3	
2006	24	75.0	25.0	82.6	
2007	20	85.0	15.0	94.7	
2008	33	69.7	30.3	72.7	
2009	33	84.8	15.2	90.9	
2010	27	81.5	18.5	88.9	
2011	33	75.8	24.2	87.9	
1998-2011	277	77.6	22.4	85.3	

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Year of death	Deaths n	Age at death (all causes) Years	Age at death (cancer- related) Years	Age at death (not cancer- related) Years	Age at death (according to death certificate) Years
1998	5	62.5	62.8	61.3	62.8
1999	5	72.6	73.5	69.1	72.6
2000	6	68.4	66.8	71.8	67.5
2001	8	75.6	75.6	75.6	75.6
2002	6	75.5	73.8	78.8	75.5
2003	17	75.7	74.3	82.3	74.9
2004	7	80.0	77.5	94.7	77.5
2005	б	77.8	74.4	84.5	77.9
2006	15	77.6	76.4	80.9	77.2
2007	17	72.3	70.8	79.2	71.4
2008	19	77.6	75.8	80.1	76.5
2009	24	75.6	75.5	75.8	75.3
2010	16	75.2	74.8	78.1	75.7
2011	23	79.0	78.1	82.4	78.3
1998-2011	174	75.6	74.6	79.2	75.1

Table 11a

Means of age at death according to the grouping in Table 10 MALES

Deaths of patients are considered to be cancer-related, in case that fact was recorded on the death certificate, or patients had suffered from metastasis or recurrence.

Year of death	Deaths n	Age at death (all causes) Years	Age at death (cancer- related) Years	Age at death (not cancer- related) Years	Age at death (according to death certificate) Years
1998	9	77.1	71.1	84.5	72.7
1999	3	78.7	79.5	77.2	79.5
2000	3	75.8	75.8		75.8
2001	4	76.7	69.6	83.7	69.6
2002	4	74.8	74.8		74.8
2003	8	79.0	77.6	89.2	79.0
2004	6	79.4	78.3	80.6	78.3
2005	10	77.6	77.6	77.2	76.1
2006	9	79.3	79.3	79.0	77.9
2007	3	77.1	77.1		77.1
2008	14	78.3	77.2	84.9	78.2
2009	9	76.0	77.4	65.0	76.0
2010	11	75.7	75.9	75.4	74.9
2011	10	81.0	80.6	81.8	81.4
1998-2011	103	77.8	77.0	80.6	76.9

Table 11b

Means of age at death according to the grouping in Table 10 FEMALES

By 2010, life expectancy for a newborn male in Germany is 77.5 years compared with 82.6 years for his female counterpart.

Deaths of patients are considered to be cancer-related, in case that fact was recorded on the death certificate, or patients had suffered from metastasis or recurrence.

Table 12a

Mortality measures (cancer-related death) and mortality-incidence-index by year of death MALES

Year of	Deaths	Mort.	MI-Index	Mort.	MI-Index	Mort.	MI-Index	Mort.	MI-Index
death	n	raw	raw	WS	WS	ES	ES	BRD-S	BRD-S
1998	4	0.4	0.31	0.3	0.35	0.3	0.30	0.4	0.26
1999	4	0.4	0.57	0.2	0.43	0.3	0.52	0.6	0.66
2000	4	0.4	0.57	0.2	0.46	0.3	0.54	0.4	0.54
2001	7	0.6	0.54	0.3	0.54	0.5	0.53	0.8	0.57
2002	4	0.2	0.24	0.1	0.23	0.2	0.23	0.2	0.23
2003	14	0.7	1.56	0.4	1.53	0.6	1.59	0.9	1.66
2004	6	0.3	0.40	0.2	0.40	0.3	0.42	0.4	0.41
2005	4	0.2	0.15	0.1	0.15	0.2	0.15	0.2	0.14
2006	11	0.6	0.50	0.2	0.44	0.5	0.53	0.7	0.61
2007	14	0.6	0.56	0.3	0.57	0.5	0.60	0.7	0.62
2008	11	0.5	0.58	0.2	0.44	0.4	0.51	0.6	0.64
2009	20	0.9	0.80	0.4	0.68	0.6	0.76	0.8	0.79
2010	14	0.6	0.54	0.3	0.61	0.4	0.60	0.6	0.57
2011	18	0.8	0.90	0.3	0.67	0.5	0.78	0.8	0.85
1998-2011	135	0.5	0.55	0.2	0.51	0.4	0.55	0.6	0.58

Table 12b

Mortality measures (cancer-related death) and mortality-incidence-index by year of death FEMALES

Year of	Deaths	Mort.	MI-Index	Mort.	MI-Index	Mort.	MI-Index	Mort.	MI-Index
death	n	raw	raw	WS	WS	ES	ES	BRD-S	BRD-S
1998	5	0.4	0.71	0.2	0.82	0.3	0.76	0.4	0.72
1999	2	0.2	0.50	0.1	0.66	0.1	0.62	0.2	0.72
2000	3	0.2	0.60	0.1	0.70	0.2	0.67	0.2	0.52
2001	2	0.2	0.18	0.1	0.18	0.1	0.17	0.1	0.18
2002	4	0.2	0.31	0.1	0.23	0.1	0.25	0.2	0.32
2003	7	0.4	0.78	0.1	0.67	0.2	0.67	0.2	0.64
2004	3	0.2	0.33	0.0	0.19	0.1	0.22	0.1	0.28
2005	9	0.5	0.82	0.2	0.62	0.3	0.68	0.3	0.73
2006	7	0.3	0.54	0.1	0.42	0.2	0.45	0.2	0.46
2007	3	0.1	0.38	0.0	0.37	0.1	0.33	0.1	0.33
2008	12	0.5	0.67	0.2	0.58	0.3	0.61	0.4	0.62
2009	8	0.3	0.67	0.1	0.75	0.2	0.74	0.2	0.60
2010	8	0.3	0.73	0.1	0.57	0.2	0.58	0.3	0.64
2011	7	0.3	0.54	0.1	0.40	0.1	0.46	0.2	0.57
1998-2011	80	0.3	0.56	0.1	0.48	0.2	0.49	0.2	0.51

Age at death	Cases			Males			Females		
Years	n	00	Cum.%	n	010	Cum.%	n	00	Cum.%
45-49	1	0.5	0.5	1	0.7	0.7			0.0
50-54	5	2.3	2.8	4	2.9	3.7	1	1.3	1.3
55-59	11	5.1	7.9	8	5.9	9.6	3	3.8	5.0
60-64	15	6.9	14.8	8	5.9	15.4	7	8.8	13.8
65-69	23	10.6	25.5	15	11.0	26.5	8	10.0	23.8
70-74	40	18.5	44.0	28	20.6	47.1	12	15.0	38.8
75-79	46	21.3	65.3	32	23.5	70.6	14	17.5	56.3
80-84	40	18.5	83.8	22	16.2	86.8	18	22.5	78.8
85+	35	16.2	100.0	18	13.2	100.0	17	21.3	100.0
All ages	216	100.0		136	100.0		80	100.0	

Age distribution of age at death (cancer-related) for period 1998-2011 (incl. multiple primaries)

Table 13

Included in the statistics are 121.6% multiple primaries in males and 86.8% in females.



Table 14

Age-specific mortality (cancer-related) and proportion of all cancers for period 1998-2011 (incl. multiple primaries)

Age at death Years	Males Female n n	- /	Females Age- spec. I-index mortal.	MI-index	Males Prop.all cancers %	Females Prop.all cancers %
$\begin{array}{r} 0-4\\ 5-9\\ 10-14\\ 15-19\\ 20-24\\ 25-29\\ 30-34 \end{array}$		0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0	0.0 0.0 0.0 0.0 0.0 0.0 0.0			
35-39 40-44 45-49 50-54 55-59 60-64 65-69 70-74 75-79	$ \begin{array}{cccccccccccccccccccccccccccccccccccc$	$\begin{array}{c} 0.0 \\ 0.0 \\ 0.1 \\ 0.2 \\ 0.5 \\ 0.5 \\ 1.1 \\ 2.7 \\ 4.7 \end{array}$	$\begin{array}{cccccccccccccccccccccccccccccccccccc$	0.20 0.33 0.78 0.53 0.33 0.45	0.1 0.2 0.1 0.1 0.1 0.3 0.3	0.0 0.1 0.1 0.1 0.1 0.1 0.2
80-84 85+ All ages	22 18 18 17 136 80	5.4 6.5	0.67 2.3 1.13 2.3	0.78 1.21	0.3 0.3 0.2	0.2 0.1
Mortality Raw WS ES BRD-S		0.5 0.3 0.4 0.6	0.550.30.510.10.550.20.580.2	0.56 0.48 0.49 0.51		
PYLL-70 per 100,000 ES AYLL-70		1.3 1.1 8.1	0.6 0.5 6.7			

The rates underestimate the prognosis if other synchronous cancers are prognostic unfavorable.



Table 15a

Multiple primaries in deaths in period 1998-2011 $${\rm MALES}$$

					Syn-	Syn-		
		T 1 1	-	-	chron	chron		
	Total	Total	Pre	Pre	±30d	±30d	Post	Post
Diagnosis	n	⁹ 0↓	n	↔→	n	00 01	n	%→
C12-C13 Hypopharynx	2	1.1	1	50.0			1	50.0
C15 Oesophagus	4	2.2	1	25.0			3	75.0
Cl6 Stomach	2	1.1					2	100.0
C17 Small intestine	1	0.5	1	100.0				
Cl8 Colon	6	3.3	3	50.0	1	16.7	2	33.3
C19-C20 Rectum	4	2.2	2	50.0	1	25.0	1	25.0
C25 Pancreas	1	0.5					1	100.0
C32 Larynx	3	1.6	1	33.3	1	33.3	1	33.3
C33-C34 Lung	8	4.4	1	12.5	1	12.5	6	75.0
C43 Malign. melanoma	3	1.6	2	66.7			1	33.3
C44 Skin others	б	3.3	6	100.0				
C46,C49 Soft tissue	1	0.5	1	100.0				
C61 Prostate	16	8.7	10	62.5	2	12.5	4	25.0
C62 Testis	1	0.5	1	100.0				
C64 Kidney	12	6.6	5	41.7	2	16.7	5	41.7
C65 Renal pelvis	22	12.0	3	13.6	13	59.1	6	27.3
C66 Ureter	4	2.2			2	50.0	2	50.0
C67 Bladder	71	38.8	31	43.7	10	14.1	30	42.3
C68 Urethra	2	1.1	1	50.0			1	50.0
C68 Urinary org.	6	3.3	1	16.7	2	33.3	3	50.0
C70-C72 CNS cancer	1	0.5					1	100.0
C76-C79 CUP	1	0.5	1	100.0				
C82-C85 NHL	2	1.1	2	100.0				
C90 Mult. myeloma	1	0.5					1	100.0
C91-C96 Leukaemia	3	1.6	1	33.3			2	66.7
All mult. primaries	183	100.0	75	41.0	35	19.1	73	39.9

Multiple primaries with number of cases n<1 are pooled in category "Other primaries".

ICD-10 C44 (Other malignant neoplasms of skin) is not systematically recorded by MCR and therefore not considered for evaluation as a particular primary but at least as a multiple malignancy.

Table 15b

Multiple primaries in deaths in period 1998-2011 FEMALES

					Syn- chron	Syn- chron		
	Total	Total	Pre	Pre	±30d	±30d	Post	Post
Diagnosis	n	8↓	n	6→	n	6 A	n	\$
C15 Oesophagus	1 /	1.3					1	100.0
C16 Stomach	2	2.5					2	100.0
C18 Colon	8	10.0	5	62.5	2	25.0	1	12.5
C19-C20 Rectum	1	1.3					1	100.0
C33-C34 Lung	3	3.8			1	33.3	2	66.7
C44 Skin others	/ 1	1.3					1	100.0
C48 Peritoneal	1	1.3			1	100.0		
C50 Breast	9	11.3	6	66.7			3	33.3
C53 Cervix uteri	3	3.8	3					
C54 Corpus uteri	2	2.5	2	100.0				
C56 Ovary	1	1.3	1	100.0				
C64 Kidney	4	5.0	1	25.0	1	25.0	2	50.0
C65 Renal pelvis	10	12.5	3	30.0	6	60.0	_ 1	10.0
C66 Ureter	1	1.3			1	100.0		
C67 Bladder	26	32.5	5	19.2	4	15.4	17	65.4
C68 Urinary org.	3	3.8	1	33.3	_1	33.3	1	33.3
C73 Thyroid	1	1.3	1	100.0				
C76-C79 CUP	1	1.3					1	100.0
C82-C85 NHL	1	1.3	1	100.0				
C90 Mult. myeloma	1	1.3					1	100.0
All mult. primaries	80	100.0	29	36.3	17	21.3	34	42.5

ICD-10 C44 (Other malignant neoplasms of skin) is not systematically recorded by MCR and therefore not considered for evaluation as a particular primary but at least as a multiple malignancy.

Table 16

Age-specific mortality (cancer-related) and proportion of all cancers for period 1998-2011 (Singular primaries only *)

Age at death Years	Males n	Females n	Males Age- spec. mortal.	MI-index	Females Age- spec. mortal.	MI-index	cancers	Females Prop.all cancers %
0- 4 5- 9			0.0		0.0			
10-14			0.0		0.0			
15-19 20-24			0.0		0.0			
25-29			0.0		0.0			
30-34			0.0		0.0			
35-39			0.0		0.0			
40-44			0.0		0.0			
45-49	1		0.1	0.33	0.0		0.1	
50-54	2	1	0.1	0.22	0.1	0.50	0.1	0.0
55-59	5	1	0.3		0.1	0.20	0.1	0.0
60-64	4	3	0.3		0.2	0.75	0.1	0.1
65-69	9	6	0.7		0.4	0.60	0.1	0.1
70-74	9	6	0.9	0.43	0.5	0.24	0.1	0.1
75-79	13	9	1.9		0.9	0.50	0.2	0.1
80-84	7	11	1.7		1.4	0.92	0.1	0.1
85+	8	10	2.9	0.89	1.3	0.91	0.1	0.1
All ages	58	47					0.1	0.1
Mortality								
Raw			0.2	0.50	0.2	0.53		
WS			0.1	0.46	0.1	0.46		
ES			0.2	0.49	0.1	0.47		
BRD-S			0.3	0.52	0.1	0.50		
PYLL-70								
per 100,000			0.8		0.3			
ES			0.7		0.2			
AYLL-70			8.2		6.1			

* See corresponding tables with multiple primaries.



Table 17

Age-specific mortality (cancer-related) and proportion of all cancers for period 1998-2011 (Single primaries only *)

Age at death Years	Males n	Females n	Males Age- spec. mortal.	MI-index	Females Age- spec. mortal.	MI-index	cancers	Females Prop.all cancers %
0- 4 5- 9 10-14 15-19			0.0 0.0 0.0 0.0		0.0 0.0 0.0 0.0			
20-24 25-29 30-34 35-39			0.0 0.0 0.0 0.0		0.0 0.0 0.0 0.0 0.0			
40-44 45-49 50-54	1 2	1	0.0 0.1 0.1	0.50	0.0 0.0 0.1	1.00	0.1	0.1
55-59 60-64 65-69 70-74	1 3 4 4	2 5 3	0.1 0.2 0.3 0.4	0.38 0.25	0.0 0.1 0.3 0.2	1.00 0.63 0.17	0.0 0.1 0.1 0.1	0.0 0.1 0.1
75-79 80-84 85+	3 3 4	5 7 6	0.4 0.7 1.4	0.30 0.38	0.5 0.9 0.8	0.36 1.17 0.75	0.0 0.1 0.1	0.1 0.1 0.1
All ages	25	29					0.1	0.1
Mortality Raw WS ES BRD-S			0.1 0.1 0.1 0.1	0.35 0.34 0.35 0.36	0.1 0.0 0.1 0.1	0.47 0.41 0.41 0.44		
PYLL-70 per 100,000 ES AYLL-70			0.5 0.4 9.3		0.2 0.2 5.6			

* See corresponding tables with multiple primaries.



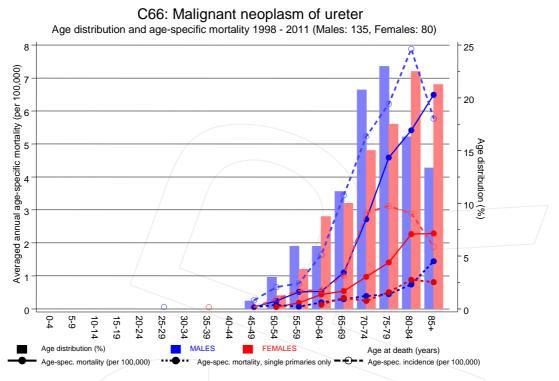
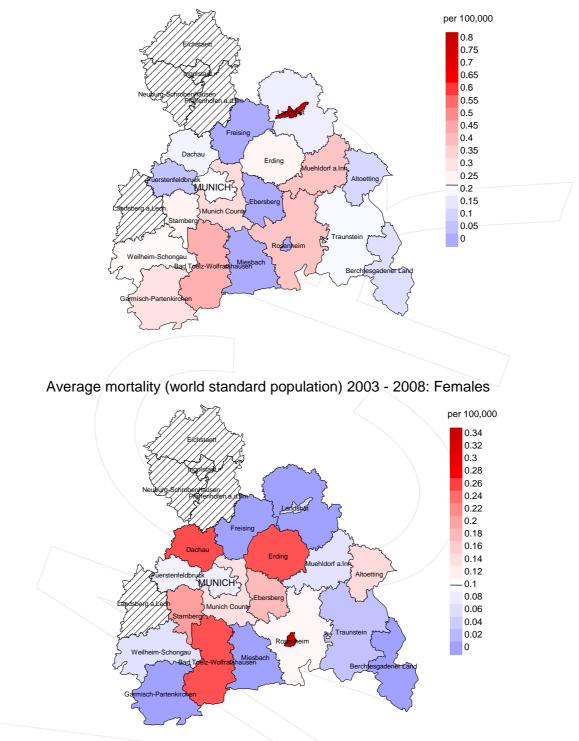


Figure 18. Distribution of age at death (bars) and age-specific mortality (all patients: solid line, patients with single primaries: dotted line). The age-specific incidence is additionally plotted for comparison (dashed line).

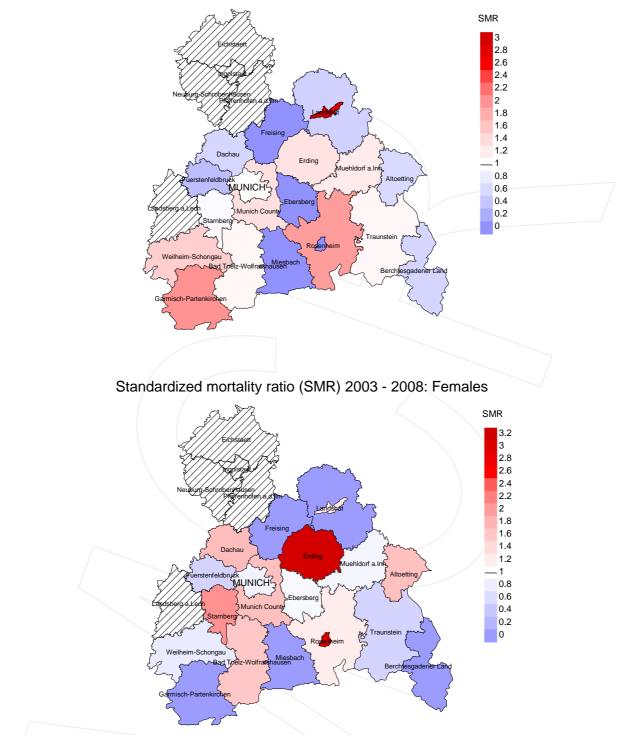
The difference between age at diagnosis (Table 3) and age at ureteral cancer-related death (see Table 10) should be considered.



Average mortality (world standard population) 2003 - 2008: Males

Figure 19a. Map of cancer mortality (world standard population) by county averaged for period 2003 to 2008. According to their individual mortality rates, the counties are displayed in different red and blue color temperatures where the fine white color indicates the population mean (males 0.2/100,000 WS N=55, females 0.1/100,000 WS N=39). Since cancer data are not available in some counties until 2007, the local mortality rates were not calculated, and the map tiles show as shaded.

The results should be interpreted with caution! E.g., in county Ebersberg with a population of 63,131 female residents (averaged) in the period from 2003 to 2008 a total of 1 women died from ureteral cancer. Therefore, the mean mortality rate for this cancer type in this area can be calculated at 0.2/100,000 (world standard population). Though, the value of this parameter may vary with an underlying probability of 99% between 0.0 and 1.3/100,000.



Standardized mortality ratio (SMR) 2003 - 2008: Males

Figure 19b. Map of standardized mortality ratio (SMR, incl. DCO cases) by county averaged for period 2003 to 2008. According to their individual SMR values, the counties are displayed in different red and blue color temperatures where the fine white color indicates the population overall of 1.0 (males N=55, females N=39). Since cancer data are not available in some counties until 2007, the local SMR values were not calculated, and the map tiles show as shaded.

The results should be interpreted with caution! E.g., in county Ebersberg with a population of 63,131 female residents (averaged) in the period from 2003 to 2008 a total of 1 women died from ureteral cancer. Therefore, the mean standardized mortality ratio (SMR) for this cancer type in this area can be calculated at 0.93. Though, the value of this parameter may vary with an underlying probability of 99% between 0.00 and 6.88, and is therefore not statistically striking.

Statistical Notes

In all tables and figures the respective reference values should be carefully considered. The incidence rates include diagnoses (with multiple primary), and death certificate only (DCO) cases. For mortality statistics patients, diagnoses and progressive course of disease are presented. In the calculations, all courses of disease are considered whereby progressions occurred and/or death certificate identified progressive cancers were ascertained. Additionally there are three groups of disease course to consider:

1. All multiple primaries included

The mortality statistic describes the tumor-specific death, independent of any malignancy. The patient perspective, induced secondary malignancies, and the problem of multiple malignancies from the same primary tumor all have reasons for their inclusion.

2. First singular primary (no information about other prior or synchronous malignancy)

The mortality statistic describes the tumor-related death for patients who have no therapeutic restrictions due to a previous or synchronous cancer. These statistics are comparable to studies that have exclusion criteria based on a second malignancy.

3. Single primary (no information about other prior, syn- or metachronous malignancy)

The mortality statistic describes the tumor-specific death that occurs without any impact through secondary primaries, earlier, synchronous, later or induced. Precisely the difference between disease group 1 and 2 highlight the magnitude of the problem of secondary malignancies.

For this reason differences appear concerning official mono-causal mortality statistics. To judge the maximum deviation, 2 further tables are presented. In the first table the distribution of secondary malignancies before, at or after the described cancer are shown, that could be an alternative cause of death. In the second table, the age-specific mortality rates for all courses of disease, without designation of secondary malignancies are shown.

A previously minimally acknowledged statistic is the **age at death**, which allows for a good assessment of the quality of classification of the apparent tumor-specific death. For assumed tumor-independent deaths, the age of death should be estimated from the age of diagnosis and the normal life expectancy, whereas tumor-dependent deaths can be estimated from the age of diagnosis plus the average tumor-specific life expectancy. The comparison of different tumors demonstrates this association, if the causes of cancer and the competing cause of death are independent of each other (e.g. breast and colon versus head/neck and lung).

The index from mortality and incidence (Mortality-Incidence ratio, **MI-index**) is a statistic that allows for the evaluation of the quality of data. For diseases with poor prognoses, comparable values are obtained from all age groups, because to a large extent, the numerator and denominator contain the same cases. For tumors with a good prognosis, increasing and decreasing incidence and age-specific differences in prognosis can more strongly alter the MI- index. Additionally, attention should be paid to the confidence intervals where fewer cases are reported.

The complexity of problems identified here emphasizes the importance of relative survival data for the appropriate analysis of long term results.

As a measurement of the burden of disease, the number of potential life years loss due to premature deaths in a cohort can be calculated (**PYLL**, potential years of life lost, standardized per 100,000 persons or per European standard) as well as the average loss of life years per individual (**AYLL**, average years of life lost). Depending upon the analytic aim (health economy, prevention, health care research) different methods exist for the generation of these measurements. In the results presented here, the age for a premature death is considered to be before 70 years, according to the guidelines of the OECD and the WHO (as seen in the abbreviation PYLL-70 or AYLL-70).

Shortcuts

AYLL-70 BRD-S DCO	Average years of life lost prior to age 70 given a person dies before that age German standard population Death certificate only
EAR	Excess absolute risk
	= excess cancer cases (O - E) per 10,000 person-years
ES	European standard population (old)
FRG	Federal Republic of Germany
GEKID	Association of Population-based Cancer Registries in Germany
	(Gesellschaft der epidemiologischen Krebsregister in Deutschland e.V.)
LCL	Lower confidence limit
MI-index	Ratio between mortality and incidence
MCR	Munich Cancer Registry (Tumorregister München)
PYLL-70	Potential years of life lost prior to age 70 given a person dies before that age
SEER	Surveillance, Epidemiology, and End Results (USA)
SIR	Standardized incidence ratio
SMR	Standardized mortality ratio
UCL	Upper confidence limit
WS	World standard population

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