

# Munich Cancer Registry



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## ICD-10 C11: Nasopharynx cancer

### Incidence and Mortality

Year of diagnosis	1998-2014
Patients	247
Diseases	247
Creation date	04/13/2016
Export date	12/23/2015
Population	4.64 m



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

[http://www.tumorregister-muenchen.de/en/facts/base/bC11\\_\\_E-ICD-10-C11-Nasopharynx-cancer-incidence-and-mortality.pdf](http://www.tumorregister-muenchen.de/en/facts/base/bC11__E-ICD-10-C11-Nasopharynx-cancer-incidence-and-mortality.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<sup>#</sup>, with a total of 4.64 million inhabitants, account for the frequency of cancer diseases<sup>##</sup> 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<sup>###</sup> 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.

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](mailto:tumor@ibe.med.uni-muenchen.de).

Munich Cancer Registry, April 2016

<sup>#</sup> 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).

<sup>##</sup> 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.

<sup>###</sup> DCO (death certificate only) identifies a cancer case that first becomes available to the MCR through the death certificate.

### Some remarks regarding this cancer type

As a general rule, these few results from the TRM form the basis of sophisticated analyses. For head and neck tumors this is not the case. Therefore the results for head and neck tumors should be interpreted with caution. In part this is due to problems of classification because of limited specific details of locality. Additionally, with advanced tumors in a close topographic location it is often not possible to determine the exact ICD localization of a tumor.

### ICD-10 codes (ICD-10 2015) used for specifying cancer site

Code	Description
C11.-	Malignant neoplasm of nasopharynx
C11.0	Superior wall of nasopharynx
C11.1	Posterior wall of nasopharynx
C11.2	Lateral wall of nasopharynx
C11.3	Anterior wall of nasopharynx
C11.8	Overlapping lesion of nasopharynx
C11.9	Nasopharynx, unspecified

## INCIDENCE

Table 1

All patients with invasive cancer by year of diagnosis, proportions of DCO, multiple primaries, deaths, and active follow-up (incl. DCO)

Year of diagnosis	Cases n	DCO cases n	Prop. DCO %	Prop. mult. primaries %	Prop. deaths %	Prop. actively followed %
1998	10			40.0	50.0	100.0
1999	12			25.0	66.7	91.7
2000	7	1	14.3	28.6	57.1	71.4
2001	7				28.6	100.0
2002	14			21.4	78.6	92.9 #
2003	12			25.0	75.0	91.7
2004	10	1	10.0		50.0	100.0
2005	17	1	5.9	29.4	58.8	88.2
2006	16			37.5	56.3	93.8
2007	15	2	13.3	26.7	60.0	73.3 #
2008	23	1	4.3	13.0	43.5	60.9
2009	19	1	5.3	15.8	63.2	78.9
2010	24	1	4.2	29.2	50.0	83.3
2011	19	1	5.3	26.3	36.8	78.9
2012	19	1	5.3	36.8	42.1	78.9
2013	18			22.2	38.9	100.0
2014	5	2	40.0	40.0	80.0	100.0 ##
1998–2014	247	12	4.9	24.7	53.4	85.0

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

## Please be aware that data of recent annual patient cohorts may not yet be fully processed. The years under evaluation can be found in the respective headings.

Table 1a

All patients with invasive cancer  
by year of diagnosis and gender  
(incl. DCO)

Year of diagnosis	All n	Males n	Females n	Prop. males %
1998	10	9	1	90.0
1999	12	9	3	75.0
2000	7	4	3	57.1
2001	7	6	1	85.7
2002	14	11	3	78.6
2003	12	7	5	58.3
2004	10	7	3	70.0
2005	17	13	4	76.5
2006	16	10	6	62.5
2007	15	12	3	80.0
2008	23	19	4	82.6
2009	19	15	4	78.9
2010	24	17	7	70.8
2011	19	12	7	63.2
2012	19	13	6	68.4
2013	18	12	6	66.7
2014	5	3	2	60.0
1998–2014	247	179	68	72.5

Table 2

Incidence measures by year of diagnosis including DCO cases  
(with respect to registry area expansion from 2.51 to 3.96 m as of 2002,  
and from 3.96 to 4.64 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
1998	9	1	0.8	0.1	0.6	0.1	0.7	0.1	0.9	0.1
1999	9	3	0.8	0.3	0.6	0.2	0.8	0.2	0.8	0.2
2000	4	3	0.4	0.2	0.3	0.2	0.3	0.2	0.4	0.2
2001	6	1	0.5	0.1	0.4	0.0	0.4	0.0	0.5	0.1
2002	11	3	0.6	0.2	0.4	0.1	0.5	0.1	0.6	0.1
2003	7	5	0.4	0.3	0.2	0.2	0.3	0.2	0.4	0.2
2004	7	3	0.4	0.2	0.3	0.1	0.3	0.1	0.4	0.1
2005	13	4	0.7	0.2	0.5	0.1	0.6	0.2	0.6	0.2
2006	10	6	0.5	0.3	0.3	0.2	0.4	0.2	0.6	0.3
2007	12	3	0.5	0.1	0.3	0.1	0.4	0.1	0.5	0.1
2008	19	4	0.9	0.2	0.5	0.1	0.7	0.1	0.8	0.1
2009	15	4	0.7	0.2	0.4	0.1	0.6	0.1	0.6	0.1
2010	17	7	0.8	0.3	0.5	0.2	0.7	0.2	0.8	0.3
2011	12	7	0.5	0.3	0.3	0.2	0.4	0.2	0.5	0.3
2012	13	6	0.6	0.3	0.4	0.1	0.5	0.2	0.5	0.2
2013	12	6	0.5	0.3	0.4	0.1	0.5	0.1	0.5	0.2
2014	3	2	0.1	0.1	0.1	0.0	0.1	0.1	0.1	0.1
1998-2014	179	68	0.6	0.2	0.4	0.1	0.5	0.2	0.5	0.2

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

Table 3

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

Year of diagnosis	Cases n	Mean	Std. dev.	Min.	Max.	10%	25%	Median 50%	75%	90%
1998	10	56.8	9.3	45.6	76.0	46.5	49.6	54.9	62.1	69.9
1999	12	55.9	13.2	32.7	79.4	38.2	51.0	52.9	66.1	69.7
2000	7	44.6	13.6	31.0	70.3	31.0	31.8	40.6	52.6	70.3
2001	7	53.3	20.0	29.5	84.8	29.5	31.4	54.9	66.1	84.8
2002	14	62.2	13.1	38.0	83.6	46.2	53.4	63.0	71.3	81.1
2003	12	57.7	12.6	38.9	73.8	40.0	47.1	60.0	68.9	71.6
2004	10	55.0	15.8	31.7	83.5	34.0	45.6	51.9	65.6	76.9
2005	17	54.0	17.4	12.8	76.2	29.9	43.2	50.3	65.9	76.2
2006	16	61.6	15.3	17.6	76.9	47.6	51.5	65.7	71.7	76.2
2007	15	64.3	9.9	48.1	82.6	50.1	55.7	65.4	72.0	73.6
2008	23	60.7	16.3	28.3	97.0	43.6	52.1	57.3	70.3	82.6
2009	19	61.5	12.3	42.1	86.2	43.6	51.7	62.2	70.5	78.8
2010	24	58.4	16.2	21.3	82.8	33.3	54.7	59.7	69.3	76.1
2011	19	58.1	17.0	24.5	89.5	32.1	45.3	56.4	70.8	79.0
2012	19	62.1	10.3	45.1	85.1	46.3	55.8	60.5	66.6	77.2
2013	18	64.0	13.6	38.2	91.4	46.9	55.8	60.9	74.8	84.4
2014	5	63.5	23.0	31.6	92.4	31.6	51.2	70.7	71.6	92.4
1998-2014	247	59.2	14.7	12.8	97.0	39.8	50.1	60.5	70.1	76.9

Table 3a

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

Year of diagnosis	Cases n	Mean	Std. dev.	Min.	Max.	10%	25%	Median 50%	75%	90%
1998	9	57.0	9.8	45.6	76.0	45.6	49.6	55.2	62.1	76.0
1999	9	60.1	10.5	50.2	79.4	50.2	51.9	53.8	68.0	79.4
2000	4	52.3	12.9	40.6	70.3	40.6	43.2	49.2	61.4	70.3
2001	6	48.1	15.8	29.5	66.1	29.5	31.4	49.1	63.2	66.1
2002	11	59.4	12.8	38.0	81.1	46.2	48.6	58.6	71.3	73.6
2003	7	63.2	11.4	45.3	73.8	45.3	48.9	66.9	71.6	73.8
2004	7	54.3	13.3	31.7	70.2	31.7	45.6	53.2	65.6	70.2
2005	13	52.1	18.6	12.8	76.2	29.9	42.7	50.1	65.9	74.0
2006	10	61.0	18.5	17.6	76.9	32.6	49.4	65.4	76.0	76.6
2007	12	63.7	9.2	48.1	73.6	50.1	55.8	66.5	71.9	72.2
2008	19	58.1	15.4	28.3	84.8	33.7	51.6	55.1	67.6	82.6
2009	15	58.4	10.8	42.1	73.6	43.6	45.2	61.1	69.6	70.7
2010	17	57.8	16.4	21.3	77.0	21.8	55.2	59.3	69.3	76.1
2011	12	57.9	14.2	32.1	79.0	38.6	49.5	58.6	70.4	71.3
2012	13	63.4	8.3	51.7	85.1	55.8	58.0	63.4	66.1	70.3
2013	12	57.7	9.5	38.2	74.8	46.9	52.4	59.6	62.5	66.2
2014	3	64.5	11.5	51.2	71.6	51.2	51.2	70.7	71.6	71.6
1998-2014	179	58.4	13.4	12.8	85.1	42.1	50.2	60.0	69.2	73.8

Table 3b

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

Year of diagnosis	Cases n	Mean	Std. dev.	Min.	Max.	10%	25%	Median 50%	75%	90%
1998	1	54.5		54.5	54.5	54.5	54.5	54.5	54.5	54.5
1999	3	43.2	13.7	32.7	58.8	32.7	32.7	38.2	58.8	58.8
2000	3	34.2	4.9	31.0	39.8	31.0	31.0	31.8	39.8	39.8
2001	1	84.8		84.8	84.8	84.8	84.8	84.8	84.8	84.8
2002	3	72.3	10.4	63.1	83.6	63.1	63.1	70.1	83.6	83.6
2003	5	50.0	10.6	38.9	63.1	38.9	40.0	51.2	56.9	63.1
2004	3	56.6	24.3	36.3	83.5	36.3	36.3	50.0	83.5	83.5
2005	4	60.2	13.0	49.0	76.2	49.0	49.6	57.9	70.9	76.2
2006	6	62.7	9.4	48.7	71.7	48.7	53.6	65.7	70.5	71.7
2007	3	66.4	14.3	55.7	82.6	55.7	55.7	60.9	82.6	82.6
2008	4	73.0	16.7	59.3	97.0	59.3	62.3	67.8	83.7	97.0
2009	4	73.3	11.2	62.2	86.2	62.2	64.0	72.3	82.5	86.2
2010	7	59.8	16.7	33.3	82.8	33.3	44.8	65.9	68.9	82.8
2011	7	58.3	22.3	24.5	89.5	24.5	42.2	55.0	77.4	89.5
2012	6	59.3	14.2	45.1	77.2	45.1	46.3	55.7	75.4	77.2
2013	6	76.6	12.0	57.9	91.4	57.9	68.0	79.0	84.4	91.4
2014	2	62.0	43.0	31.6	92.4	31.6	31.6	62.0	92.4	92.4
1998–2014	68	61.4	17.5	24.5	97.0	36.3	49.0	62.7	75.8	84.4

Table 4

Age distribution by 5-year age group and gender for period 2007–2014  
(incl. DCO)

Age at diagnosis Years	Cases			Males			Females		
	n	%	Cum.%	n	%	Cum.%	n	%	Cum.%
20–24	3	2.1	2.1	2	1.9	1.9	1	2.6	2.6
25–29	1	0.7	2.8	1	1.0	2.9			2.6
30–34	4	2.8	5.6	2	1.9	4.9	2	5.1	7.7
35–39	2	1.4	7.0	2	1.9	6.8			7.7
40–44	7	4.9	12.0	5	4.9	11.7	2	5.1	12.8
45–49	8	5.6	17.6	5	4.9	16.5	3	7.7	20.5
50–54	16	11.3	28.9	15	14.6	31.1	1	2.6	23.1
55–59	24	16.9	45.8	18	17.5	48.5	6	15.4	38.5
60–64	20	14.1	59.9	18	17.5	66.0	2	5.1	43.6
65–69	17	12.0	71.8	11	10.7	76.7	6	15.4	59.0
70–74	19	13.4	85.2	17	16.5	93.2	2	5.1	64.1
75–79	9	6.3	91.5	3	2.9	96.1	6	15.4	79.5
80–84	6	4.2	95.8	3	2.9	99.0	3	7.7	87.2
85+	6	4.2	100.0	1	1.0	100.0	5	12.8	100.0
All ages	142	100.0		103	100.0		39	100.0	

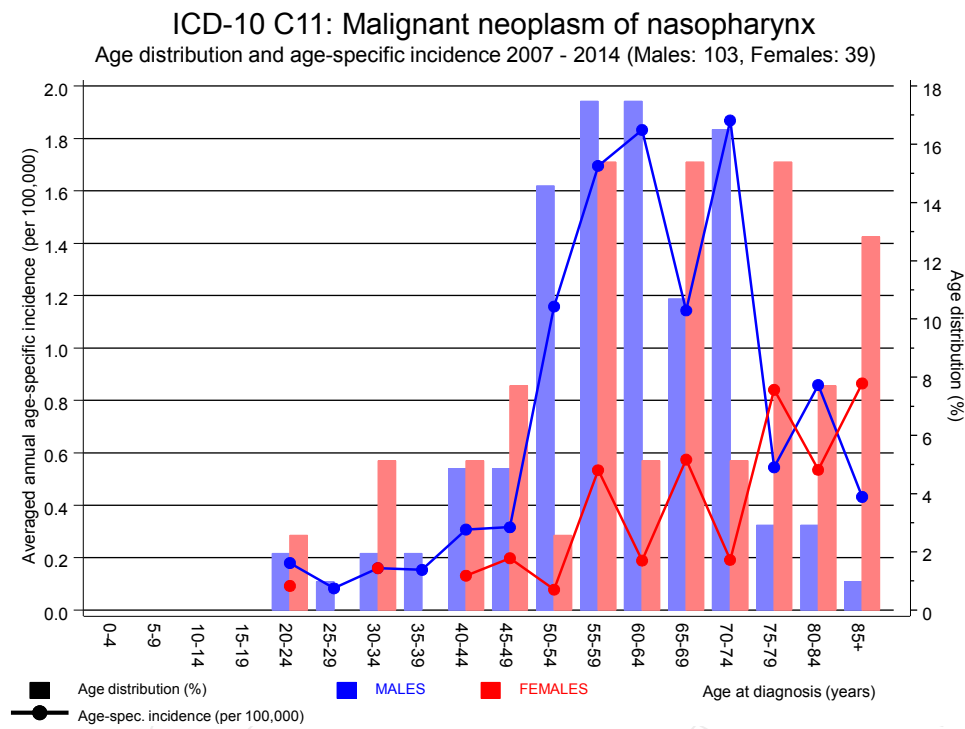
Included in the statistics are 25.2% multiple primaries in males and 56.4% in females.

Table 5

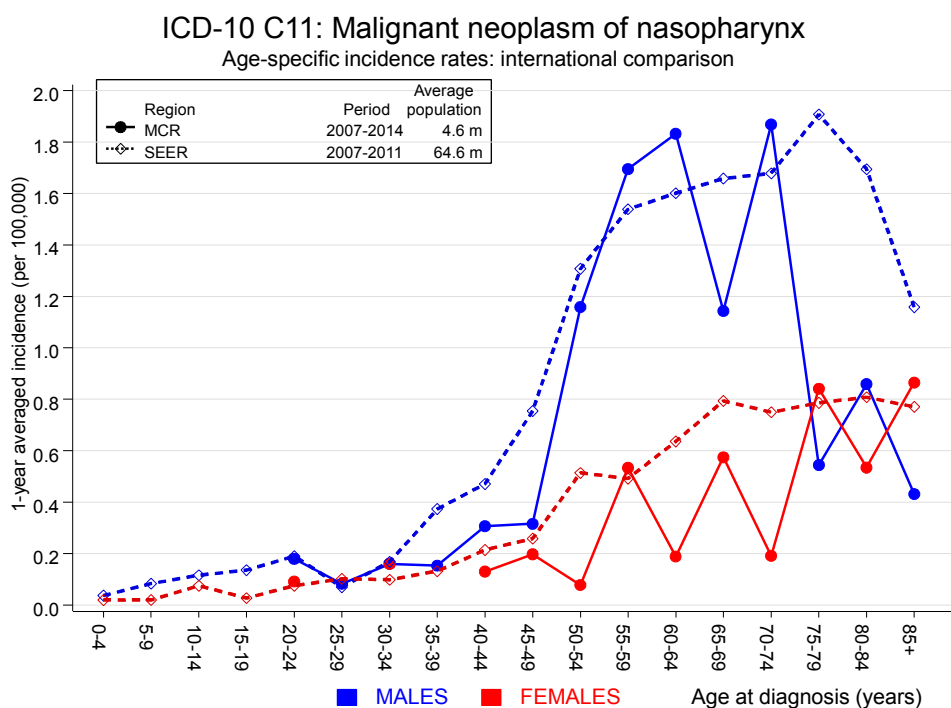
Age-specific incidence, DCO rate and proportion of all cancers  
for period 2007-2014

Age at diagnosis Years	Males n	Females n	Males Age- spec. incid.	Females Age- spec. incid.	Males DCO rate n=3 %	Females DCO rate n=6 %	Males Prop.all cancers n=91183 %	Females Prop.all cancers n=89596 %
0- 4			0.0	0.0				
5- 9			0.0	0.0				
10-14			0.0	0.0				
15-19			0.0	0.0				
20-24	2	1	0.2	0.1			0.5	0.3
25-29	1		0.1	0.0			0.2	
30-34	2	2	0.2	0.2			0.3	0.2
35-39	2		0.2	0.0			0.2	
40-44	5	2	0.3	0.1			0.3	0.1
45-49	5	3	0.3	0.2			0.2	0.1
50-54	15	1	1.2	0.1	6.7		0.3	0.0
55-59	18	6	1.7	0.5	5.6		0.2	0.1
60-64	18	2	1.8	0.2			0.2	0.0
65-69	11	6	1.1	0.6	9.1	16.7	0.1	0.1
70-74	17	2	1.9	0.2			0.1	0.0
75-79	3	6	0.5	0.8		33.3	0.0	0.1
80-84	3	3	0.9	0.5		33.3	0.0	0.0
85+	1	5	0.4	0.9		40.0	0.0	0.0
All ages	103	39			2.9	15.4	0.1	0.0
Incidence								
Raw			0.6	0.2				
WS			0.4	0.1				
ES			0.5	0.1				
BRD-S			0.5	0.2				

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).



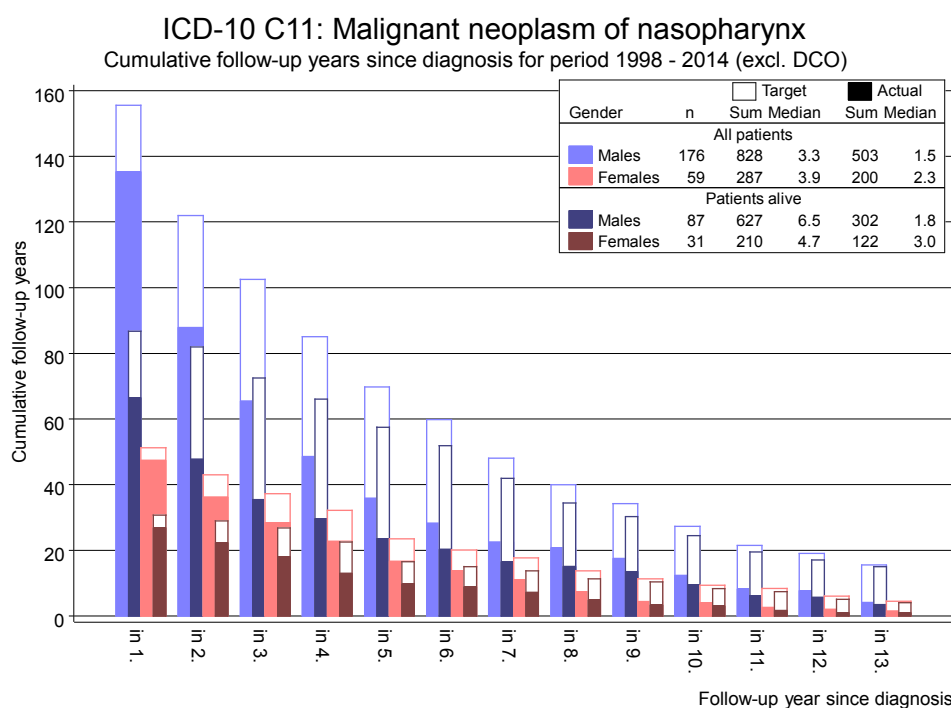
**Figure 6.** Age distribution and age-specific incidence



**Figure 6a.** Age-specific incidence in MCR registry areas compared to SEER (Surveillance, Epidemiology, and End Results, USA).

Reference:

Surveillance, Epidemiology, and End Results (SEER) Program SEER\*Stat Database: Incidence - SEER 18 Regs Research Data, released April 2014, based on the November 2013 submission. <http://www.seer.cancer.gov>.



**Figure 7.** 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.

Table 8a

Standardized incidence ratio (SIR, with 95% confidence limits),  
excess absolute risk (EAR) and DCO rate of second primaries  
for period 1998-2014

MALES

Diagnosis	Observed n	Expected n	SIR	LCL 95%	UCL 95%	EAR	DCO %
C09-C10 Oropharynx	2	0.1	23.5	2.8	85.0 #	38.2	
C18 Colon	2	0.5	4.0	0.5	14.5	29.9	
C19-C20 Rectum	2	0.3	6.1	0.7	22.0	33.3	
C25 Pancreas	2	0.2	10.3	1.3	37.3 #	36.0	
C33-C34 Lung	2	0.7	2.9	0.4	10.6	26.2	
Other primaries	6	2.2	2.7	1.0	5.9	75.4	33.3
Not observed	0	1.7	0.0	0.0	2.2	-33.5	
All mult. primaries	16	5.7	2.8	1.6	4.6 #	205.5	12.5
Patients	178						
Median age at second malignancy (years)	71.7						
Person-years	502						
Mean observation time (years)	2.8						
Median observation time (years)	1.4						

# The occurrence of second malignancy is statistically significant.

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

Table 8b

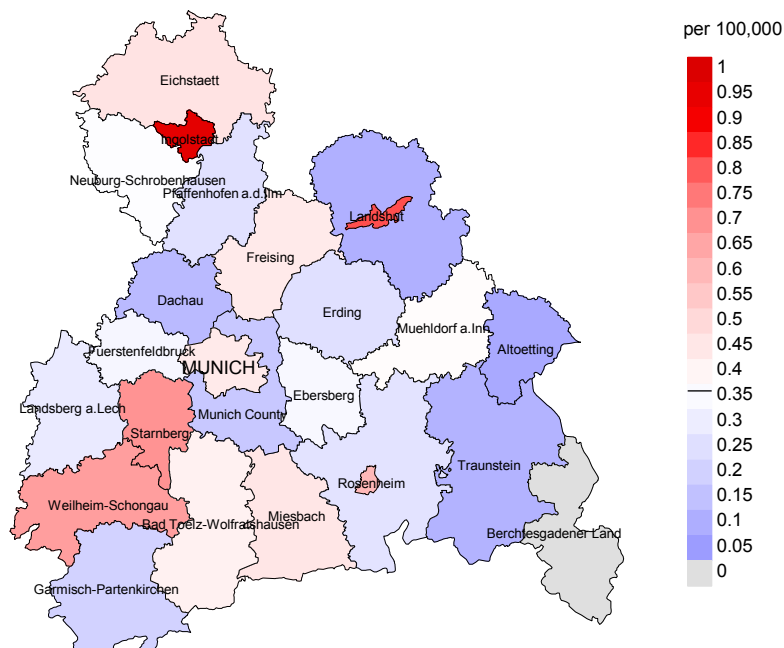
Standardized incidence ratio (SIR, with 95% confidence limits),  
excess absolute risk (EAR) and DCO rate of second primaries  
for period 1998–2014  
FEMALES

Diagnosis	Observed n	Expected n	SIR	LCL 95%	UCL 95%	EAR	DCO %
C25 Pancreas	2	0.1	31.4	3.8	113.5 #	96.4	
Other primaries	5	0.2	28.7	9.3	66.9 #	240.1	20.0
Not observed	0	1.4	0.0	0.0	2.7	-68.1	
All mult. primaries	7	1.6	4.4	1.8	9.0 #	268.4	14.3
Patients	61						
Median age at second malignancy (years)	68.1						
Person-years	201						
Mean observation time (years)	3.3						
Median observation time (years)	2.2						

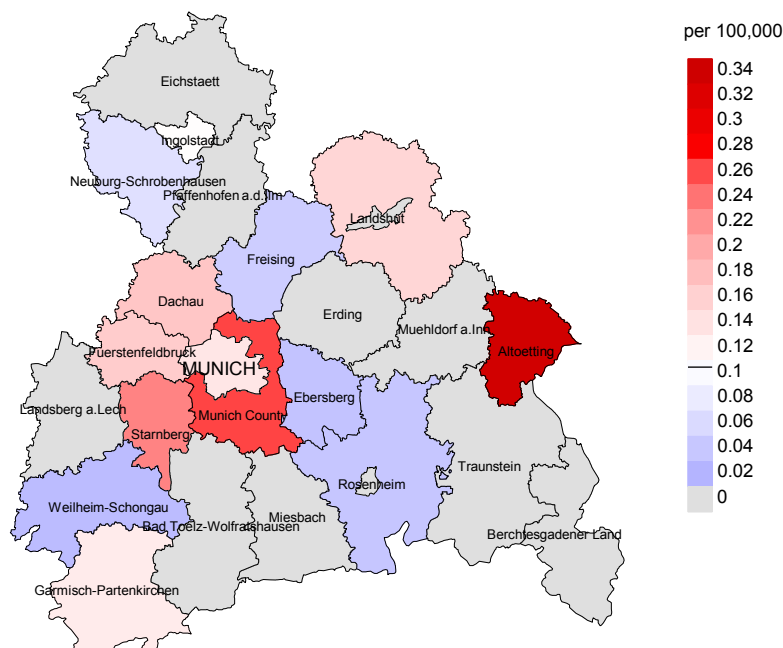
# The occurrence of second malignancy is statistically significant.

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

## Average incidence (world standard population) 2007 - 2014: Males



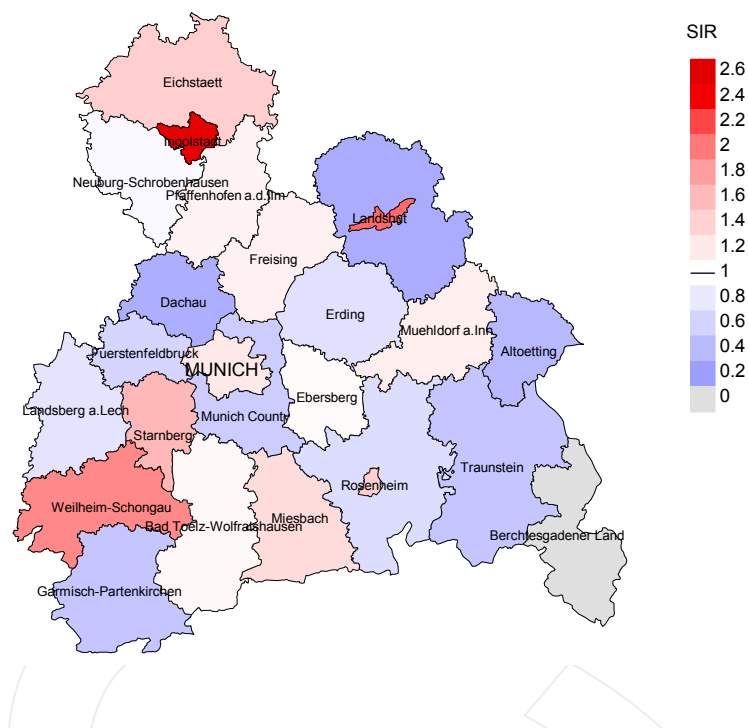
## Average incidence (world standard population) 2007 - 2014: Females



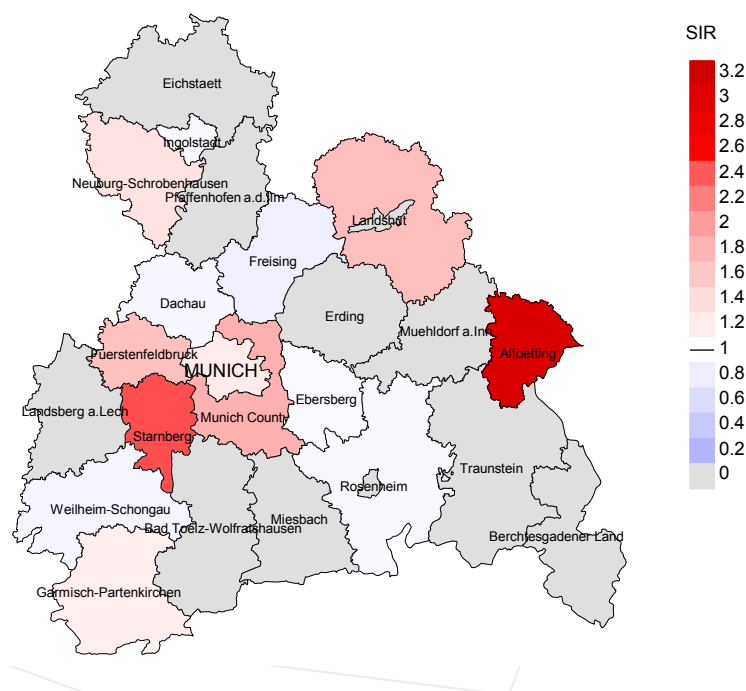
**Figure 9a.** Map of cancer incidence (world standard population, incl. DCO cases) by county averaged for period 2007 to 2014. According to their individual incidence rates, the counties are displayed in different red and blue color temperatures where the fine white color indicates the population mean (males 0.4/100,000 WS N=103, females 0.1/100,000 WS N=39).

The results should be interpreted with caution! E.g., in county Ebersberg with a population of 65,347 female residents (averaged) in the period from 2007 to 2014 a total of 1 women were identified with newly diagnosed nasopharynx cancer. Therefore, the mean incidence rate for this cancer type in this area can be calculated at 0.0/100,000 (world standard population). Though, the value of this parameter may vary with an underlying probability of 99% between 0.0 and 0.3/100,000.

## Standardized incidence ratio (SIR) 2007 - 2014: Males



## Standardized incidence ratio (SIR) 2007 - 2014: Females



**Figure 9b.** Map of standardized incidence ratio (SIR, incl. DCO cases) by county averaged for period 2007 to 2014. 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=103, females N=39).

The results should be interpreted with caution! E.g., in county Ebersberg with a population of 64,924 female residents (averaged) in the period from 2007 to 2014 a total of 1 women were identified with newly diagnosed nasopharynx cancer. Therefore, the mean standardized incidence ratio (SIR) for this cancer type in this area can be calculated at 0.96. Though, the value of this parameter may vary with an underlying probability of 99% between 0.00 and 7.13, 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 4.64 m as of 2007, respectively)

Year of diagnosis	Incident cases n	Prop. actively followed %	Prop. DCO %	Deaths n	Prop. deaths %	Prop. deaths with death certific. %
1998	10	100.0		5	50.0	80.0
1999	12	91.7		8	66.7	100.0
2000	7	71.4	14.3	4	57.1	100.0
2001	7	100.0		2	28.6	100.0
2002	14	92.9		11	78.6	100.0
2003	12	91.7		9	75.0	100.0
2004	10	100.0	10.0	5	50.0	100.0
2005	17	88.2	5.9	10	58.8	100.0
2006	16	93.8		9	56.3	100.0
2007	15	73.3	13.3	9	60.0	88.9
2008	23	60.9	4.3	10	43.5	100.0
2009	19	78.9	5.3	12	63.2	100.0
2010	24	83.3	4.2	12	50.0	100.0
2011	19	78.9	5.3	7	36.8	100.0
2012	19	78.9	5.3	8	42.1	100.0
2013	18	100.0		7	38.9	85.7
2014	5	100.0	40.0	4	80.0	100.0
1998-2014	247	85.0	4.9	132	53.4	97.7

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 4.64 m as of 2007, respectively)

Year of diagnosis/ death	Incident cases n	Deaths n	Prop. deaths with death certific. %	Deaths in same year n	Prop. deaths in same year %
1998	10	12	83.3		
1999	12	6	83.3	1	8.3
2000	7	8	100.0	1	14.3
2001	7	5	100.0	1	14.3
2002	14	10	100.0	2	14.3
2003	12	15	100.0	2	16.7
2004	10	8	100.0		
2005	17	10	100.0	4	23.5
2006	16	10	100.0	2	12.5
2007	15	13	92.3	2	13.3
2008	23	9	88.9	2	8.7
2009	19	14	100.0	3	15.8
2010	24	13	100.0	3	12.5
2011	19	13	100.0	4	21.1
2012	19	13	100.0	2	10.5
2013	18	14	100.0	3	16.7
2014	5	16	100.0	4	80.0
1998-2014	247	189	97.4	36	14.6

Table 10c

Annual cohorts of deaths, proportion of cancer-related and non-cancer-related 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 4.64 m as of 2007, respectively)

Year of death	Deaths n	Prop. cancer- related %	Prop. non-cancer- related %	Prop. cancer recorded on death certificate %
1998	12	75.0	25.0	100.0
1999	6	50.0	50.0	60.0
2000	8	87.5	12.5	87.5
2001	5	40.0	60.0	80.0
2002	10	60.0	40.0	90.0
2003	15	73.3	26.7	80.0
2004	8	50.0	50.0	62.5
2005	10	80.0	20.0	100.0
2006	10	90.0	10.0	100.0
2007	13	53.8	46.2	91.7
2008	9	88.9	11.1	87.5
2009	14	78.6	21.4	92.9
2010	13	92.3	7.7	100.0
2011	13	76.9	23.1	100.0
2012	13	84.6	15.4	92.3
2013	14	85.7	14.3	100.0
2014	16	93.8	6.3	100.0
1998-2014	189	76.7	23.3	91.8

Table 11a

Medians of age at death according to the grouping in Table 10

## MALES

Year of death	Deaths n	Age at death (all causes) Years	Age at death (cancer-related) Years	Age at death (non-cancer-related) Years	Age at death (according to death certificate) Years
1998	9	63.3	63.3	73.5	68.6
1999	4	54.3	63.5	52.0	63.5
2000	4	73.5	73.5		73.5
2001	4	58.0	59.8	54.5	58.0
2002	9	64.7	63.0	67.6	65.6
2003	13	64.2	57.8	76.8	58.1
2004	6	72.8	50.1	81.6	58.9
2005	5	70.8	70.8	75.0	70.8
2006	9	72.0	68.2	79.0	72.0
2007	6	77.3	70.7	77.6	77.3
2008	7	72.5	73.5	54.2	74.6
2009	10	72.7	69.6	77.0	70.7
2010	9	67.2	67.2		67.2
2011	11	63.4	62.2	78.0	63.4
2012	11	72.2	73.3	62.0	72.7
2013	7	71.0	72.2	69.1	71.0
2014	11	67.8	67.9	59.9	67.8
1998-2014	135	67.9	67.3	72.3	67.9

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 11b

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

Year of death	Deaths n	Age at death (all causes) Years	Age at death (cancer-related) Years	Age at death (non-cancer-related) Years	Age at death (according to death certificate) Years
1998	3	51.5	63.7	51.5	51.5
1999	2	80.4	72.7	88.1	72.7
2000	4	58.8	58.5	75.3	58.5
2001	1	67.3		67.3	
2002	1	58.4	58.4		58.4
2003	2	73.0	73.0		73.0
2004	2	71.5	64.3	78.6	64.3
2005	5	53.3	53.3		53.3
2006	1	66.9	66.9		66.9
2007	7	73.7	65.1	82.4	66.9
2008	2	69.6	69.6		69.6
2009	4	60.1	57.8	83.8	60.1
2010	4	50.6	45.8	55.3	50.6
2011	2	76.3	89.6	63.0	76.3
2012	2	64.1	64.1		64.1
2013	7	76.4	72.2	90.1	76.4
2014	5	82.6	82.6		82.6
1998-2014	54	67.5	66.3	76.9	66.3

By 2010, life expectancy at birth was 77.5 years for boys and 82.6 years for girls.

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 death	Deaths n	Mort. raw	MI-Index raw	Mort. WS	MI-Index WS	Mort. ES	MI-Index ES	Mort. BRD-S	MI-Index BRD-S
1998	7	0.6	0.78	0.5	0.88	0.6	0.84	0.7	0.80
1999	2	0.2	0.22	0.1	0.19	0.2	0.22	0.2	0.28
2000	4	0.4	1.00	0.2	0.71	0.3	0.91	0.5	1.33
2001	2	0.2	0.33	0.1	0.32	0.2	0.37	0.2	0.37
2002	5	0.3	0.45	0.2	0.43	0.2	0.43	0.2	0.39
2003	9	0.5	1.29	0.3	1.32	0.4	1.39	0.5	1.19
2004	3	0.2	0.43	0.1	0.44	0.1	0.43	0.2	0.43
2005	3	0.2	0.23	0.1	0.16	0.1	0.22	0.2	0.28
2006	8	0.4	0.80	0.2	0.68	0.3	0.77	0.4	0.78
2007	3	0.1	0.25	0.1	0.19	0.1	0.21	0.1	0.26
2008	6	0.3	0.32	0.1	0.22	0.2	0.25	0.3	0.31
2009	8	0.4	0.53	0.2	0.42	0.3	0.48	0.3	0.59
2010	9	0.4	0.53	0.2	0.41	0.3	0.45	0.4	0.47
2011	9	0.4	0.75	0.2	0.71	0.3	0.72	0.4	0.76
2012	9	0.4	0.69	0.2	0.50	0.3	0.57	0.4	0.67
2013	6	0.3	0.50	0.1	0.34	0.2	0.38	0.2	0.50
2014	10	0.4	3.33	0.2	3.96	0.4	3.89	0.4	3.76
1998-2014	103	0.3	0.58	0.2	0.50	0.3	0.54	0.3	0.59

Table 12b

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

## FEMALES

Year of death	Deaths n	Mort. raw	MI-Index raw	Mort. WS	MI-Index WS	Mort. ES	MI-Index ES	Mort. BRD-S	MI-Index BRD-S
1998	2	0.2	2.00	0.1	1.33	0.1	1.47	0.2	1.89
1999	1	0.1	0.33	0.0	0.25	0.1	0.30	0.1	0.38
2000	3	0.2	1.00	0.2	0.91	0.2	1.07	0.2	1.06
2001									
2002	1	0.1	0.33	0.0	0.54	0.1	0.56	0.1	0.40
2003	2	0.1	0.40	0.0	0.26	0.1	0.32	0.1	0.34
2004	1	0.1	0.33	0.0	0.35	0.0	0.36	0.0	0.31
2005	5	0.3	1.25	0.2	1.29	0.2	1.27	0.2	1.20
2006	1	0.0	0.17	0.0	0.13	0.0	0.13	0.0	0.13
2007	4	0.2	1.33	0.1	1.39	0.1	1.34	0.1	1.29
2008	2	0.1	0.50	0.0	0.51	0.1	0.48	0.1	0.51
2009	3	0.1	0.75	0.1	1.24	0.1	1.19	0.1	0.95
2010	3	0.1	0.43	0.1	0.42	0.1	0.41	0.1	0.49
2011	1	0.0	0.14	0.0	0.04	0.0	0.06	0.0	0.06
2012	2	0.1	0.33	0.1	0.38	0.1	0.35	0.1	0.31
2013	6	0.3	1.00	0.1	1.25	0.2	1.15	0.2	1.04
2014	5	0.2	2.50	0.0	0.87	0.1	1.35	0.1	2.26
1998-2014	42	0.1	0.62	0.1	0.55	0.1	0.59	0.1	0.60

Table 13

Age distribution of age at death (cancer-related) for period 2007-2014  
(incl. multiple primaries)

Age at death Years	Cases			Males			Females		
	n	%	Cum.%	n	%	Cum.%	n	%	Cum.%
45-49	4	4.7	4.7	2	3.3	3.3	2	7.7	7.7
50-54	5	5.8	10.5	4	6.7	10.0	1	3.8	11.5
55-59	11	12.8	23.3	8	13.3	23.3	3	11.5	23.1
60-64	11	12.8	36.0	7	11.7	35.0	4	15.4	38.5
65-69	13	15.1	51.2	9	15.0	50.0	4	15.4	53.8
70-74	19	22.1	73.3	18	30.0	80.0	1	3.8	57.7
75-79	10	11.6	84.9	6	10.0	90.0	4	15.4	73.1
80-84	8	9.3	94.2	5	8.3	98.3	3	11.5	84.6
85+	5	5.8	100.0	1	1.7	100.0	4	15.4	100.0
All ages	86	100.0		60	100.0		26	100.0	

Included in the statistics are 25.2% multiple primaries in males and 56.4% in females.

Table 14

Age-specific mortality (cancer-related) and proportion of all cancers  
for period 2007-2014  
(incl. multiple primaries)

Age at death Years	Males n	Females n	Males Age- spec. mortal.	MI-index	Females Age- spec. mortal.	MI-index	Males Prop.all cancers %	Females Prop.all cancers %
0- 4			0.0		0.0			
5- 9			0.0		0.0			
10-14			0.0		0.0			
15-19			0.0		0.0			
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	2	2	0.1	0.40	0.1	0.67	0.2	0.2
50-54	4	1	0.3	0.27	0.1	1.00	0.2	0.1
55-59	8	3	0.8	0.44	0.3	0.50	0.3	0.1
60-64	7	4	0.7	0.39	0.4	2.00	0.1	0.1
65-69	9	4	0.9	0.82	0.4	0.67	0.1	0.1
70-74	18	1	2.0	1.06	0.1	0.50	0.2	0.0
75-79	6	4	1.1	2.00	0.6	0.67	0.1	0.1
80-84	5	3	1.4	1.67	0.5	1.00	0.1	0.0
85+	1	4	0.4	1.00	0.7	0.80	0.0	0.0
All ages	60	26					0.1	0.1
Mortality								
Raw			0.3	0.58	0.1	0.67		
WS			0.2	0.47	0.1	0.59		
ES			0.2	0.51	0.1	0.62		
BRD-S			0.3	0.58	0.1	0.64		
PYLL-70								
per 100,000			1.8		0.9			
ES			1.6		0.7			
AYLL-70			9.7		10.0			

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

Table 15a

Multiple primaries in deaths in period 1998-2014  
MALES

Diagnosis	Total n	Total %↓	Pre n	Pre ←%	Syn- chron ±30d n	Syn- chron ±30d ←%	Post n	Post ←%
C03-C06 Oral cavity	1	1.8	1	100.0				
C07-C08 Salivary gland	1	1.8					1	100.0
C09-C10 Oropharynx	4	7.3	2	50.0	1	25.0	1	25.0
C12-C13 Hypopharynx	1	1.8					1	100.0
C16 Stomach	2	3.6	1	50.0			1	50.0
C18 Colon	3	5.5	1	33.3			2	66.7
C19-C20 Rectum	5	9.1	2	40.0	1	20.0	2	40.0
C25 Pancreas	4	7.3	1	25.0			3	75.0
C30-C31 Sinuses	1	1.8			1	100.0		
C32 Larynx	6	10.9	2	33.3			4	66.7
C33-C34 Lung	7	12.7	1	14.3			6	85.7
C43 Malign. melanoma	2	3.6			1	50.0	1	50.0
C44 Skin others	6	10.9	1	16.7	1	16.7	4	66.7
C60 Penis	1	1.8	1	100.0				
C61 Prostate	3	5.5	2	66.7			1	33.3
C67 Bladder	1	1.8	1	100.0				
C69 Eye carcinoma	1	1.8	1	100.0				
C70-C72 CNS cancer	1	1.8					1	100.0
C73 Thyroid	1	1.8	1	100.0				
C76-C79 CUP	2	3.6	1	50.0			1	50.0
C81 Hodgkin lymphoma	2	3.6					2	100.0
All mult. primaries	55	100.0	19	34.5	5	9.1	31	56.4

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 1998-2014  
FEMALES

Diagnosis	Total n	Total %↓	Pre n	Pre ←%	Syn- chron ±30d n	Syn- chron ±30d ←%	Post n	Post ←%
C03-C06 Oral cavity	1	4.0	1	100.0				
C09-C10 Oropharynx	2	8.0			1	50.0	1	50.0
C12-C13 Hypopharynx	2	8.0			2	100.0		
C18 Colon	1	4.0			1	100.0		
C19-C20 Rectum	1	4.0	1	100.0				
C22 Liver	1	4.0					1	100.0
C25 Pancreas	2	8.0					2	100.0
C30 Middle/inner ear	1	4.0					1	100.0
C30-C31 Sinuses	1	4.0	1	100.0				
C32 Larynx	1	4.0					1	100.0
C33-C34 Lung	1	4.0			1	100.0		
C50 Breast	7	28.0	6	85.7			1	14.3
C53 Cervix uteri	1	4.0	1	100.0				
C56 Ovary	1	4.0	1	100.0				
C67 Bladder	2	8.0	2	100.0				
All mult. primaries	25	100.0	13	52.0	5	20.0	7	28.0

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 2007-2014  
(First primaries only \*)

Age at death Years	Males n	Females n	Males Age- spec. mortal.	Males MI-index	Females Age- spec. mortal.	Females MI-index	Males Prop.all cancers %	Females Prop.all cancers %
0- 4			0.0		0.0			
5- 9			0.0		0.0			
10-14			0.0		0.0			
15-19			0.0		0.0			
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	2	1	0.1	0.40	0.1	0.33	0.2	0.1
50-54	4	1	0.3	0.29	0.1	1.00	0.3	0.1
55-59	8	2	0.8	0.47	0.2	0.67	0.3	0.1
60-64	7	2	0.7	0.44	0.2	1.00	0.2	0.1
65-69	7	2	0.7	0.88	0.2	1.00	0.1	0.0
70-74	14	1	1.5	1.17	0.1	0.50	0.2	0.0
75-79	3	3	0.5	3.00	0.4	0.60	0.0	0.1
80-84	4	2	1.1	1.33	0.4	2.00	0.1	0.0
85+		1	0.0		0.2	0.50		0.0
All ages	49	15					0.1	0.0
Mortality								
Raw			0.3	0.56	0.1	0.60		
WS			0.1	0.46	0.0	0.50		
ES			0.2	0.49	0.1	0.55		
BRD-S			0.2	0.55	0.1	0.58		
PYLL-70								
per 100,000			1.8		0.5			
ES			1.6		0.5			
AYLL-70			10.2		10.6			

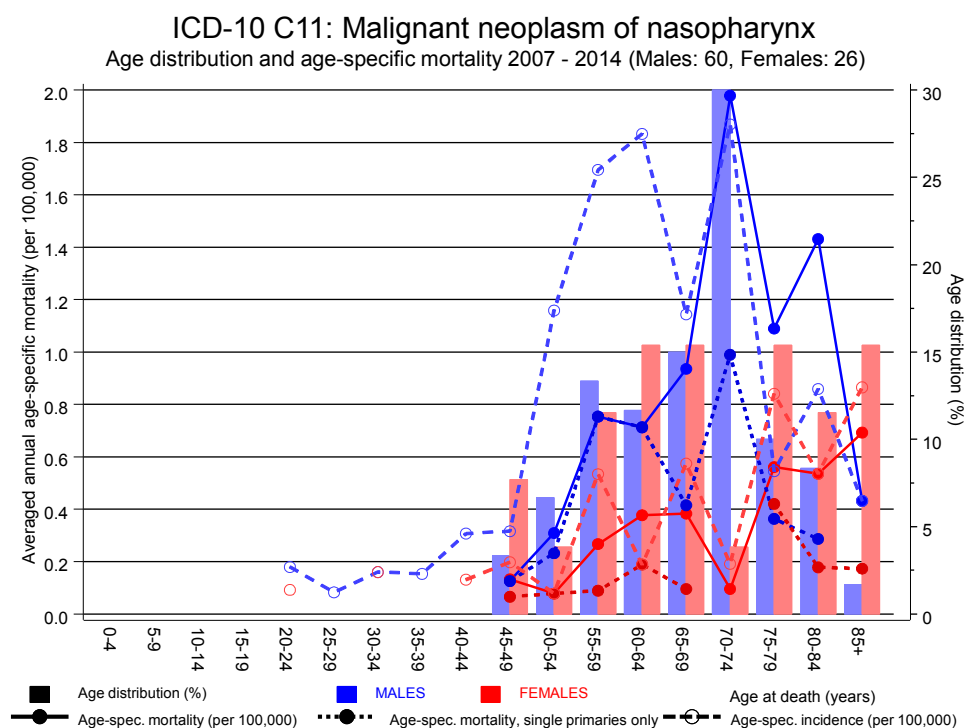
\* See corresponding tables with multiple primaries.

Table 17

Age-specific mortality (cancer-related) and proportion of all cancers  
for period 2007-2014  
(Single primaries only \*)

Age at death Years	Males n	Females n	Males Age- spec. mortal.	Males MI-index	Females Age- spec. mortal.	Females MI-index	Males Prop.all cancers %	Females Prop.all cancers %
0- 4			0.0		0.0			
5- 9			0.0		0.0			
10-14			0.0		0.0			
15-19			0.0		0.0			
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	2	1	0.1	0.40	0.1	0.50	0.2	0.1
50-54	3	1	0.2	0.21	0.1	1.00	0.2	0.1
55-59	8	1	0.8	0.47	0.1	0.50	0.3	0.1
60-64	7	2	0.7	0.44	0.2	1.00	0.2	0.1
65-69	4	1	0.4	0.67	0.1	0.50	0.1	0.0
70-74	9		1.0	0.82	0.0		0.2	
75-79	2	3	0.4	2.00	0.4	0.60	0.0	0.1
80-84	1	1	0.3	0.50	0.2	1.00	0.0	0.0
85+		1	0.0		0.2	0.50		0.0
All ages	36	11					0.1	0.0
Mortality								
Raw			0.2	0.43	0.1	0.48		
WS			0.1	0.37	0.0	0.42		
ES			0.2	0.40	0.0	0.46		
BRD-S			0.2	0.42	0.1	0.48		
PYLL-70								
per 100,000			1.6		0.4			
ES			1.5		0.4			
AYLL-70			10.8		11.7			

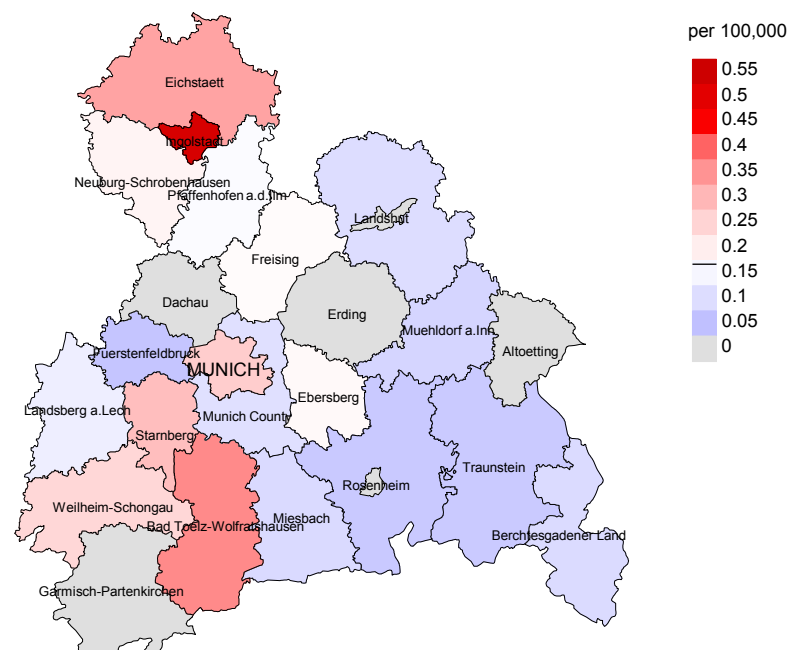
\* See corresponding tables with multiple primaries.



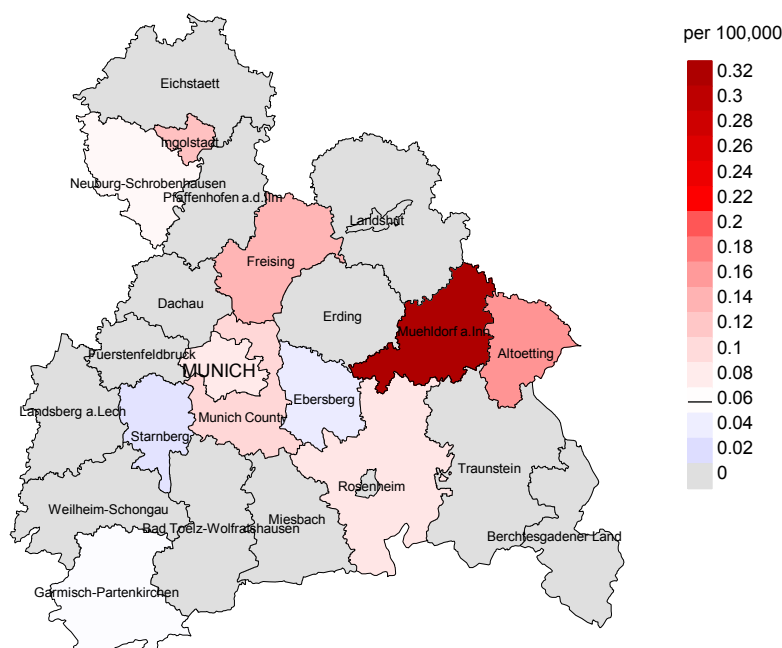
**Figure 18.** Distribution of age at death (bars) and age-specific mortality (all patients: solid line, patients with single primaries: dotted line). The age-specific incidence is additionally plotted for comparison (dashed line).

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

## Average mortality (world standard population) 2007 - 2014: Males



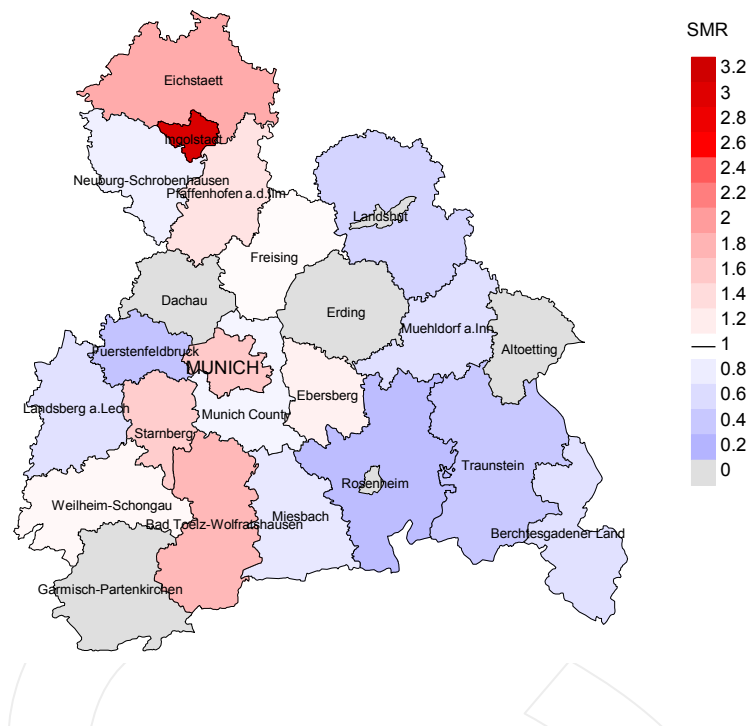
## Average mortality (world standard population) 2007 - 2014: Females



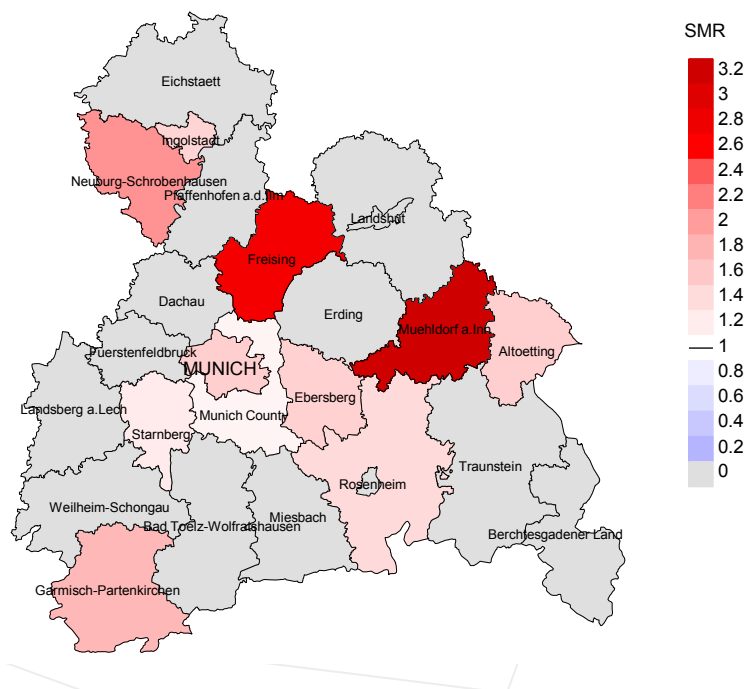
**Figure 19a.** Map of cancer mortality (world standard population) by county averaged for period 2007 to 2014. According to their individual mortality rates, the counties are displayed in different red and blue color temperatures where the fine white color indicates the population mean (males 0.2/100,000 WS N=60, females 0.1/100,000 WS N=25).

The results should be interpreted with caution! E.g., in county Ebersberg with a population of 65,347 female residents (averaged) in the period from 2007 to 2014 a total of 1 women died from nasopharynx cancer. Therefore, the mean mortality rate for this cancer type in this area can be calculated at 0.0/100,000 (world standard population). Though, the value of this parameter may vary with an underlying probability of 99% between 0.0 and 0.3/100,000.

## Standardized mortality ratio (SMR) 2007 - 2014: Males



## Standardized mortality ratio (SMR) 2007 - 2014: Females



**Figure 19b.** Map of standardized mortality ratio (SMR, incl. DCO cases) by county averaged for period 2007 to 2014. 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=60, females N=25).

The results should be interpreted with caution! E.g., in county Ebersberg with a population of 64,924 female residents (averaged) in the period from 2007 to 2014 a total of 1 women died from nasopharynx cancer. Therefore, the mean standardized mortality ratio (SMR) for this cancer type in this area can be calculated at 1.52. Though, the value of this parameter may vary with an underlying probability of 99% between 0.01 and 11.26, 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, where applicable. 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 cancer-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**

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

**Recommended Citation**

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