

# **CANCER AUSTRALIA**

# **Upper Gastro-Intestinal Tract Cancers**

### Definition

Upper gastro-intestinal tract (GI) cancers include cancers of the oesophagus, stomach, small intestine, liver, gallbladder and pancreas.

#### **Incidence and mortality**

- The most common upper GI cancers in 2006 were cancers of the:
  - Pancreas: 2,244 new cases (2.1 per cent of all new cancer cases)
  - Stomach: 1,946 new cases (1.9 per cent)
  - Oesophagus: 1,212 new cases (1.2 per cent).
- In 2005, the most common upper GI cancers in males were stomach, pancreas and oesophagus. In females, the most common were cancers of the pancreas and stomach.
- The lifetime risk of a person developing certain upper GI cancers before the age of 75 is 1 in 144 (pancreas), 1 in 156 (stomach), 1 in 261 (oesophagus) and 1 in 247 (liver).
- In 2005, pancreatic and oesophageal cancers were in the top ten causes of cancer deaths for the population.
- In 2007, the most common cause of death from a GI cancer were cancers of the:
  - Pancreas: 2,248 deaths (5.6 per cent of all cancer deaths)
  - Stomach: 1,129 deaths (2.8 per cent)
  - o Liver: 1,109 (2.8 per cent)
  - Oesophagus: 1,098 (2.8 per cent)

#### Trends

- The incidence and mortality rates of oesophageal cancer have remained relatively stable over the last 20 years, however oesophageal cancer has been increasing in males and decreasing in females.
- The incidence and mortality rates of stomach cancer have dramatically decreased over the last 20 years (42 per cent decrease in the rate of incidence and 55 per cent decrease in the rate of mortality). This decline is seen in both genders, with a larger decrease of rates in males.
- The incidence and mortality rates of pancreatic cancer have been relatively stable for the population over the last 20 years.
- While the rate of liver cancer is low in the Australian population, over the last 20 years

incidence rates have increased by 175 per cent and mortality rates by 83 per cent.

• The incidence and mortality rates of upper GI cancers increase with age. A very similar pattern is seen in males and females, with a rapid increase in incidence and mortality rates after approximately 40 years of age.

#### **Relative Survival**

- Relative survival figures are available for pancreatic and stomach cancers.
- The percentage of the population that will be alive 5 years after their initial diagnosis are:
  - Cancer of the stomach: 24.4 per cent males, 25.3 per cent females.
  - Cancer of the pancreas: 4.5 per cent males, 4.7 per cent females.

#### **Risk factors**

- A range of risk factors are associated with upper GI cancers. The strength of the risk factors is dependent on the type of upper GI cancer.
- Increasing age and family history are risk factors for all upper GI cancers.
- Other risk factors associated with different upper GI cancers include:
  - Oesophageal cancer: smoking and alcohol consumption, obesity (possibly through increasing the occurrence of acid reflux);
  - Pancreatic cancer: smoking, diabetes (particularly Type 2);
  - Gallbladder: gallstones and other conditions causing inflammation of the bladder, some industrial compounds
  - Liver cancer: chronic infection with hepatitis B or C virus, cirrhosis;
  - Stomach cancer: infection with Helicobacter pylori, tobacco use and obesity.

Sources: This factsheet draws on data published by the Australian Institute of Health and Welfare, including in:

- Australian Institute of Health and Welfare 2010. Australia's Health 2010. Australia's health series no. 12. Cat. no. AUS 122. Canberra: AIHW.
- Australian Institute of Health and Welfare, Cancer Australia & Australasian Association of Cancer Registries 2008. Cancer survival and prevalence in Australia: cancers diagnosed from 1982 to 2004. Cancer series no. 42 Cat. no. CAN 38. Canberra: AIHW.
- AIHW (Australian Institute of Health and Welfare) & AACR (Australasian Association of Cancer Registries) 2008. Cancer in Australia: an overview, 2008. Cancer series no. 46. Cat. no. CAN 42. Canberra: AIHW.
- <u>www.aihw.gov.au/cancer/data/acim\_books</u> (viewed 28/9/2010) 2006 incidence and 2007 mortality data.

The figures quoted relate to cancers C15, C16, C17, C22, C23-C24, and C25, as classified under the International Classification of Diseases (ICD – 10).

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