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COMMENTARY

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In Australia mortality from melanoma is decreasing but increasing for non-melanoma skin cancer

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Abstract

Mortality from melanoma is decreasing in Australia since 2013. Deaths from non-melanoma skin cancer are increasing.

Keywords: *mortality, melanoma, non-melanoma skin cancer, Australia*

Commentary

The incidence of invasive melanoma is increasing in Australia and shows no sign of decreasing in the susceptible population in any age group [1,2]. In parallel with the rising incidence of melanoma, the incidence of deaths from the disease was increasing but at a slower rate. Between the 1981 and 2011 Australian Censuses the crude mortality rate had more than doubled in susceptible Australians [3]. However, since 2011 drugs effective against metastatic melanoma have been available in Australia. These would be expected to influence the mortality rate [4,5].

Non-melanoma skin cancers (NMSC) are not registered in Australia but deaths caused by these cancers are [6]. The number of NMSC removed from Australians is increasing every year [5]. The data relate to the number of cancers removed not to the incidence of these cancers but it would be expected that if the number removed was increasing, the mortality rate would also increase. The latest Census was held in 2016 and trends in melanoma and NMSC mortality since 1981are presented in this article.

The methodology for determining the number of Australians susceptible to melanoma has been previously described [1]. In summary, the country of birth of Australians during each Australian Census was obtained from the Australian Bureau of Statistics (ABS) (6). Country of birth was used as a surrogate for race because information on the race of the population is not available for most Censuses. People born in Asia, the Pacific Islands, the Middle East, or sub-Saharan Africa, were defined as being low risk people (LRP) for melanoma because the incidence of melanoma is very low in these regions [7]. Their Australian-born children were also included as LRP, as were Australian aborigines, and New Zealand Maoris. Australian pathologists are obliged by law to notify the Cancer Registry of cases of invasive melanoma. Data for melanoma mortality were obtained from the Australian Institute of Health and Welfare [4]. The data covered the period from 1981 to 2016.

The data for the Census years are set out in the table. People are obliged by law to provide the information requested at each Census. The Australian population increased by 65% in 35 years but the susceptible population only increased by 30.3%. The number of deaths from melanoma greatly increased between 1981 and 2011 but fell between 2011 and 2016. The ASMR for the entire population and CMR for the susceptible population both decreased by almost 20%. The number of deaths in the years between the censuses was; 1538 in 2012, 1616 in 2013, 1466 in 2014, 1498 in 2015.

The decrease in mortality is probably due to the introduction of effective therapy for metastatic melanoma, mainly immune check-point inhibitors. It is not due to early detection of melanoma because the number of invasive melanomas excised from Australians is increasing each year by an average of 11% a year and the incidence of thick melanomas (>4 mm) is also increasing in men and women in all age groups [8]. In 2015, the year with the latest data, there were 13,694 people who had invasive melanomas excised [4].

The mortality rate for NMSC shows no sign of easing and is increasing by an average 8% a year. It almost tripled between 1981 and 2016 and if this trend continues, NMSC will soon kill more Australians than melanoma. The rising rate of mortality is more evidence that public health campaigns that have been running in Australia since 1981, are not having their desired outcome.

References

1. Czarnecki D. The Incidence of Melanoma is Increasing in the Susceptible Young Australian Population. *Acta Derm Venereol.* 2014; 94: 39-41.
2. Czarnecki D. The relentless rise in the incidence of melanoma in susceptible Australians. *J Inv Dermatol.* 2016;136: 1912-1913.
3. Czarnecki D. Melanoma mortality rising in susceptible Australians. *J Eur Acad Dermatol Venereol.* 2018; 32: e2-e4.
4. Australian Institute of Health and Welfare. Cancer Data,

Availble from: http://www.aihw.gov.au/cancer data/

5. http://medicarestatistics.humanservices.gov.au/statistics/mbs_group.jsp
6. http://www.abs.gov.au/Ausstats/
7. http://gco.iarc.fr/today/online-analysis
8. Baade P, Meng X, Youlden D, Aitken J, Youl P. Time trends and latitudinal differences in melanoma thickness distribution in Australia, 1990-2006. *Int J Cancer.* 2012;130: 170-178.

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