

TRENDS OF THE MAIN INCIDENT FEMALE CANCERS IN BRAZIL

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BACKGROUND

Cancer incidence and mortality are rapidly increasing worldwide due to demographic and epidemiological transitions. It reflects ageing, behavior and environmental changes Breast and cervix uteri cancers are the most common cancers among women in the world. In Brazil, in 2023, 74,000 new cases of breast cancer and 17,000 new cases of cervix uteri. Trends analysis are a useful tool to evaluate interventions to cancer control.

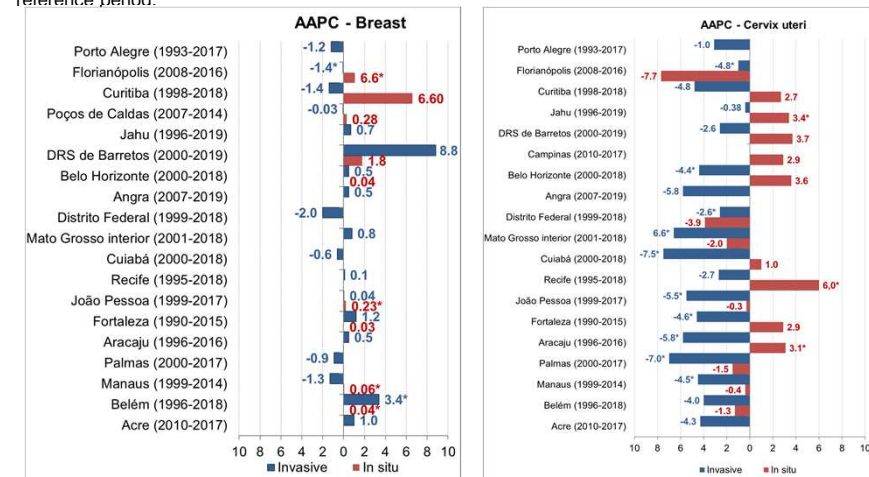
OBJECTIVE

To analyze temporal trends of incidence rates for breast and cervix uteri (in situ and invasive), in Brazil.

METHODS

Incidence data were collected from Population-Based Cancer Registries in the period 1990-2019 were 20 PBCRs met the criteria. All Incidence rates were age-adjusted by World Standard Population. Joinpoint regression was used to analyze the incidence trends.

Figure 2. The AAPC of Age-adjusted incidence rates for the main incident female cancers by PBCR and reference period.



AAPC= Average Annual Percent Change, calculated for the full period of available record information. Statistically significant AAPC ($p < 0.05$); CI = Confidence Interval with 95%. --- Rates with zero values was not possible to perform the calculation;

Sources: Brazilian Population-Based Cancer Registries and MS/ INCA/ Conprev/ Surveillance Division

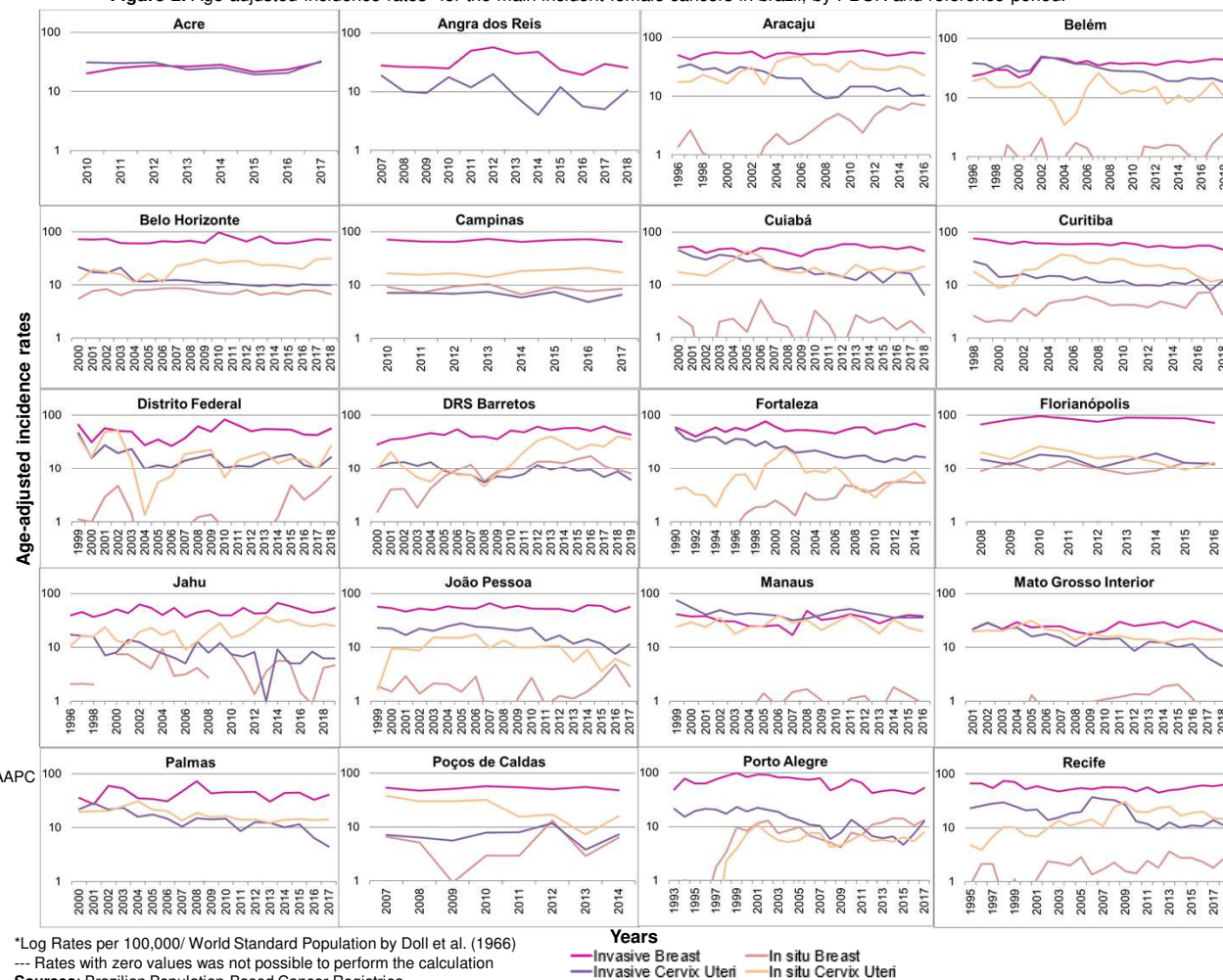
CONCLUSIONS

Trends in incidence of in situ and invasive breast cancer remain stable in most PBCRs, except for PBCRs Curitiba and Belém. However, incidence trends for in situ cervix uteri increased and invasive cervix uteri cancer decreased significantly during the study period. These results confirm the key role of PBCR as a tool for surveillance. The Incidence information is essential to monitor the cancer burden and its trends and to evaluate the cancer control programs, improving cancer policies.

RESULTS

In situ breast cancer incidence trends were stable in most PBCRs, except Curitiba, with a significant increase AAPC: 6.6(1.3; 12.2). Invasive breast cancer was stable in most PBCRs except Belém with an increase of 3.4 (0.6; 6.3) AAPC and decrease AAPC: -1.4 (-1.8;1.0) in Curitiba. In situ cervix uteri trends were increasing (AAPC: 6.0(3.1;9.1) in Recife, Jahu (AAPC: 3.4 (1.4;5.3)) and Aracaju (AAPC: 3.1 (0.2;6)) and decreasing in Florianópolis (AAPC: -7.7 (-14.2; -0.7)), Distrito Federal (AAPC: -3.9 (-6.5; -1.2)) and Palmas (AAPC: -1.5 (-3.15; 0.48). Invasive cervix uteri trends were decreasing in 10 PBCRs ranging from (AAPC: -7.5 to -0.38).

Figure 2. Age-adjusted incidence rates* for the main incident female cancers in Brazil, by PBCR and reference period.



*Log Rates per 100,000/ World Standard Population by Doll et al. (1966)

--- Rates with zero values was not possible to perform the calculation

Sources: Brazilian Population-Based Cancer Registries

MS/ INCA/ Conprev/ Surveillance Division

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