

3.29 Rare cancer sites and non-melanoma skin cancer

Rare malignant tumours

A good 5 % of all malignant neoplasms excluding non-melanoma skin cancer affect sites which have not been covered in the preceding chapters. Of these, approximately half again are malignant tumours of unspecified site (C80) or other and ill-de-

fined sites (C26, C76). The remainders are presented in Table 3.29.1. Detailed results regarding estimated nationwide incidence and mortality, for instance according to age group and year of diagnosis can be found at www.krebsdaten.de.

Table 3.29.1
Frequency, median age at diagnosis and survival rates for rare malignant tumours in Germany 2012

Cancer site	ICD-10	Incident cases		Deaths		Ø age at diagnosis		rel. 5-Y-SR ¹
		Men	Women	Men	Women	Men	Women	
Small intestine	C17	1,170	1,010	281	258	69	70	60
Nasal cavity, nasal sinuses and middle ear	C30, C31	560	350	125	65	63	66	58
Mediastinum and other intrathoracic organs	C37–C39	290	210	157	136	67	70	44
Bone and articular cartilage	C40, C41	360	330	250	215	53	55	60
Vagina and other female genital organs	C52, C57, C58		1,110		453		71	49
Penis and other male genital organs	C60, C63	900		198		70		74
Urinary tract excl. kidney and bladder	C65, C66, C68	1,530	1,000	2,270	1,042	74	76	46
Eye	C69	340	330	127	136	66	68	66
Adrenal gland and other endocrine glands	C74, C75	260	240	375	293	57	61	49
Other and unspecified malignant neoplasms of lymphoid, haematopoietic and related tissue	C96	100	80	28	26	59	58	83

¹ relative 5-year survival rate in percentage, men and women, period 2011–2012

Non-melanoma skin cancer

Non-melanoma skin cancers can mainly be divided into basal cell carcinomas (basaliomas) and squamous-cell carcinomas, both of which occur particularly in advanced age (Table 3.29.2). The most important risk factor for both forms is the long-term impact of the ultraviolet part of sunshine, which is why they are particularly located on the face or on the head and neck.

The basalioma metastasises only in very rare exceptional circumstances and therefore is not usually life-threatening. It can however grow destructively in the surrounding tissue and can considerably affect quality of life given an unfavourable site. The relative survival rate of over 100 % for basalioma can probably

be explained by the fact that suspicious skin changes especially in old age are more likely to heal completely in otherwise healthy people.

In the case of squamous-cell carcinoma, metastases occur somewhat more frequently, the prognosis is however generally good. An acquired immune deficiency and/or suppression through medication, for example following transplant surgery, can encourage the occurrence of this tumour.

Rare forms of skin cancer include, amongst others, Merkel-cell tumours, fibrosarcoma and carcinoma of the sebaceous and sweat glands. In cause of death statistics, no differentiation can be made between the various forms of non-melanoma skin cancer.

Table 3.29.2
Frequency, median age at diagnosis and survival rates for types of non-melanoma skin cancer in Germany 2012

Cancer site	ICD-O-3	Incident cases		Deaths		Ø age at diagnosis		rel. 5-Y-SR ¹
		Men	Women	Men	Women	Men	Women	
Basaliomas	809–811	80,800	78,400			72	71	104
Squamous cell carcinomas	805–808	26,400	17,900			76	79	95
Unspecific histology	800–804	500	500			75	77	91
Other types		1,100	900			75	76	80
Total		108,800	97,700	363	325	73	72	102

¹ relative 5-year survival rate in percentage, men and women, period 2011–2012