3.14 Breast

Table 3.14.1

Overview of key epidemiological parameters for Germany, ICD-10 C50

Incidence		2013		2014	Prediction for 2018		
	Men	Women	Men	Women	Men	Women	
Incident cases	670	70,820	650	69,220	700	71,900	
Crude incidence rate ¹	1.7	172.0	1.6	167.7	1.8	173.0	
Standardised incidence rate ^{1,2}	1.1	118.3	1.1	114.6	1.1	116.5	
Median age at diagnosis	72	64	71	64			
Mortality		2013		2014	2015		
	Men	Women	Men	Women	Men	Women	
Deaths	156	17,853	134	17,670	159	18,136	
Crude mortality rate ¹	0.4	43.4	0.3	42.8	0.4	43.7	
Standardised mortality rate ^{1,2}	0.2	23.6	0.2	23.0	0.3	23.0	
Median age at death	74	74	73	74	75	75	
¹ per 100,000 persons ² age-standardised (old Eu	ropean Standard)				·		
Prevalence and survival rates				after 5 years		after 10 years	
			Mon	Woman	Mon	Woman	

		unter j jeurs	unter to jeurs	
	Men	Women	Men Women	
Prevalence	2,400	311,400	3,800 559,900	
Absolute survival rate (2013–2014) ³	60	79 (79–81)	45 66 (64–68)	
Relative survival rate (2013–2014) ³	73	88 (87-88)	69 82 (81-83)	

³ in percentages (lowest and highest value of the included German federal states)

Epidemiology

With around 69,000 new cases every year, breast cancer is by far the most common form of cancer among women. Roughly an additional 6,000 women are being diagnosed with a cancer in situ each year. Around 1% of new cases affect men.

Based on current incidence figures, about one in eight women will develop breast cancer over the course of her life. Almost three in every ten women are younger than 55 years at diagnosis. Incidence and mortality rates in former East Germany remain lower than in former West Germany. For women under 55 years old, however, these differences have largely diminished by now.

Incidence rates of more recent years show the typical curve of a sharp increase after mammography screening was introduced between 2005 and 2009 and a subsequent slow decline.

Progress in therapy has significantly increased patients' chances of survival and led to a drop in mortality rates. In a few years, it should be possible to evaluate whether and to what degree screening can help further reduce the number of cases. A clear tendency, however, is that in the corresponding age group fewer women suffer advanced forms of cancer than before the introduction of screenings.

Risk factors and early detection

An early menarche and a late menopause, childlessness and higher age at first birth are all associated with an increased risk of developing breast cancer. Conversely, several and/or early births and longer periods of breast-feeding reduce the risk of breast cancer. Hormone replacement therapy during and after menopause increases the risk of breast cancer. Ovulation inhibitors containing hormones (whe pill«), on the other hand, have only a minor influence on incidence rates.

Further risk factors include overweight and a lack of exercise after menopause, as well as alcohol consumption. Moreover, smoking could also slightly increase the risk.

In addition, the risk for women with very dense breast tissue or with certain benign breast neoplasms (lobular neoplasias and atypical ductal hyperplasias) is increased. Family clusters of breast or ovarian cancer, or undergoing radio therapy of the breast during childhood or at adolescent age constitute further risk factors. The statutory early detection programme offers women above 30 years of age an annual palpation examination of the breasts by a physician. Between 2005 and 2009, Germany introduced a quality assured Mammography Screening Programme where women between 50 and 69 years of age are now invited to have their breasts X-rayed every two years.

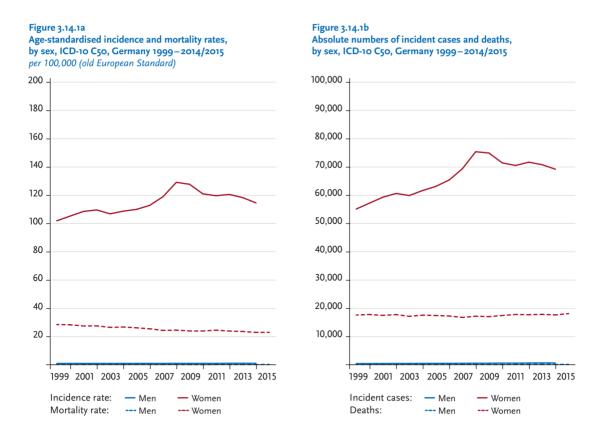
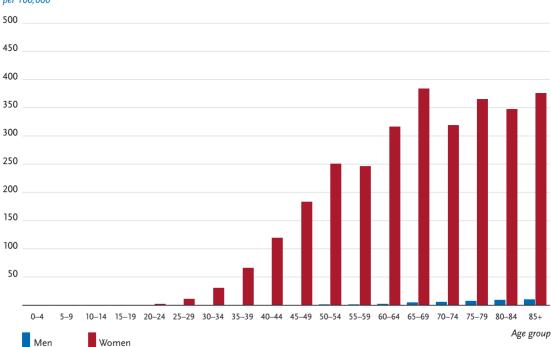


Figure 3.14.2 Age-specific incidence rates by sex, ICD-10 C50, Germany 2013-2014 per 100,000



	Risk of developing cancer				Mortality risk				
Men aged	in the	in the next ten years		ever		in the next ten years		ever	
35 years	<0.1%	(1 in 30,000)	0.1%	(1 in 740)	<0.1%	(1 in 267,000)	< 0.1%	(1 in 2,900)	
45 years	<0.1%	(1 in 12,100)	0.1%	(1 in 740)	<0.1%	(1 in 96,000)	< 0.1%	(1 in 2,900)	
55 years	<0.1%	(1 in 5,100)	0.1%	(1 in 760)	< 0.1%	(1 in 32,000)	< 0.1%	(1 in 2,900)	
65 years	<0.1%	(1 in 2,100)	0.1%	(1 in 810)	<0.1%	(1 in 8,600)	< 0.1%	(1 in 2,800)	
75 years	0.1%	(1 in 1,500)	0.1%	(1 in 1,100)	<0.1%	(1 in 6,400)	< 0.1%	(1 in 3,400)	
Lifetime risk			0.1%	(1 in 740)			<0.1%	(1 in 2,900)	
Women aged	in the next ten years			ever	in the next ten years			ever	
35 years	0.9%	(1 in 110)	12.8%	(1 in 8)	0.1%	(1 in 1,000)	3.5%	(1 in 29)	
45 years	2.1%	(1 in 47)	12.1%	(1 in 8)	0.3 %	(1 in 380)	3.4%	(1 in 29)	
55 years	3.0%	(1 in 34)	10.3 %	(1 in 10)	0.5%	(1 in 200)	3.2%	(1 in 31)	
65 years	3.6%	(1 in 28)	8.0%	(1 in 13)	0.8%	(1 in 120)	2.9%	(1 in 35)	
75 years	3.3%	(1 in 30)	5.1%	(1 in 20)	1.2%	(1 in 81)	2.3%	(1 in 43)	
Lifetime risk			12.9%	(1 in 8)			3.5%	(1 in 29)	

Table 3.14.2 Cancer incidence and mortality risks in Germany by age and sex, ICD-10 C50, database 2014

Figure 3.14.3

Distribution of T-stages at first diagnosis for all women and women between 50 and 69 years (top: all cases; bottom: only valid reports) ICD-10 C50, Germany 2013–2014

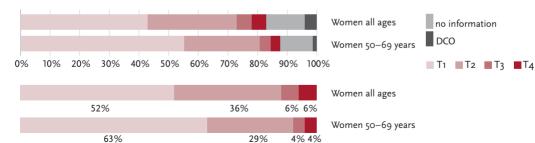


Figure 3.14.4a

Absolute survival rates up to 10 years after first diagnosis, women, ICD-10 C50, Germany 2013–2014

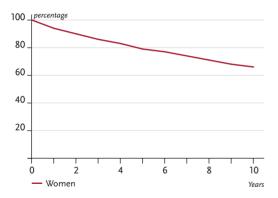


Figure 3.14.4b

Relative survival rates up to 10 years after first diagnosis, women, ICD-10 C50, Germany 2013-2014

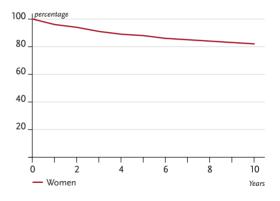


Figure 3.14.5 Registered age-standardised incidence and mortality rates in German federal states, women, ICD-10 C50, 2013–2014 per 100,000 (old European Standard)



Figure 3.14.6

International comparison of age-standardised incidence and mortality rates, women, ICD-10 C50, 2013–2014 or latest available year (details and sources, see appendix) per 100,000 (old European Standard)

