

### 3.14 Non-melanoma skin cancer

Table 3.14.1  
Overview of key epidemiological parameters for Germany, ICD-10 C44

Incidence	2015		2016		Prediction for 2020	
	Women	Men	Women	Men	Women	Men
Incident cases	105,140	118,620	107,020	122,730	119,700	145,000
Crude incidence rate <sup>1</sup>	253.3	295.3	256.4	302.3	287.8	358.5
Age-standardised incidence rate <sup>1,2</sup>	142.3	181.2	143.0	184.1	151.4	203.5
Median age at diagnosis	73	74	73	75		
Mortality	2015		2016		2017	
	Women	Men	Women	Men	Women	Men
Deaths	350	464	378	520	402	527
Crude mortality rate <sup>1</sup>	0.8	1.2	0.9	1.3	1.0	1.3
Age-standardised mortality rate <sup>1,2</sup>	0.3	0.7	0.3	0.7	0.3	0.7
Median age at death	87	82	87	82	86	82
Prevalence and survival rates	5 years		10 years			
	Women	Men	Women	Men		
Prevalence	489,300	534,300	825,700	882,600		
Absolute survival rate (2015–2016) <sup>3</sup>	85 (83–87)	80 (78–81)	69 (65–73)	61 (57–64)		
Relative survival rate (2015–2016) <sup>3</sup>	103 (102–105)	102 (100–104)	106 (101–112)	104 (98–109)		

<sup>1</sup> per 100,000 persons <sup>2</sup> age-standardised (old European Standard) <sup>3</sup> in percentages (lowest and highest value of the included German federal states)

► Additional information under [www.krebsdaten.de/cancer-sites](http://www.krebsdaten.de/cancer-sites)

#### Epidemiology

Around three quarters of non-melanoma skin cancers are basal cell carcinomas. These metastasize only in exceptional cases, and particularly in the presence of a weakened immune system. As such, they are rarely life-threatening. However, they can grow into the surrounding tissue, for example into bone tissue, and thus can potentially impact quality of life in a considerable way. Almost a quarter of malignant, non-melanoma tumours of the skin are squamous cell carcinomas. These two types of tumours most commonly affect the face, with this localisation accounting for around 40% of cases. Rare forms include Merkel cell carcinomas, which are neuroendocrine tumours, as well as dermatofibrosarcomas and carcinomas of the sebaceous and sweat glands. In 2016, an estimated 230,000 people in Germany were diagnosed with non-melanoma skin cancer; around 930 people died from the condition in 2017. As with malignant melanoma, incidence increased significantly with the introduction of skin cancer screening, and has stabilised recently. Although reliable international data are not as widely available in this case as they are for malignant melanoma, it is likely that the incidence of non-melanoma skin cancers has increased significantly in western industrialised nations over the past few decades.

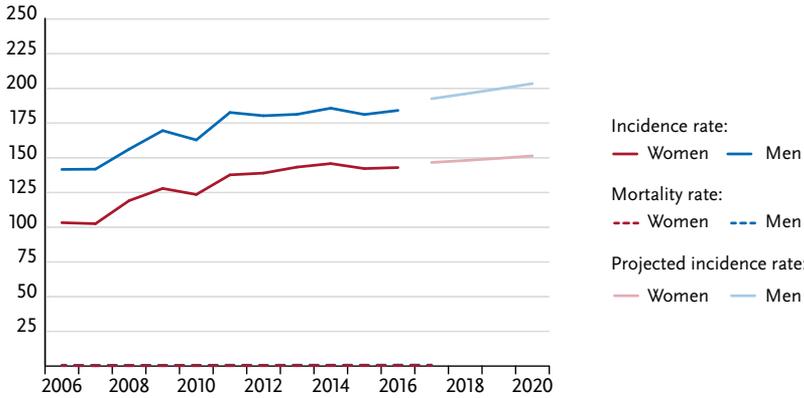
#### Risk factors

Non-melanoma skin cancer is more commonly diagnosed among people with lighter skin types than those with darker skin types. The most important risk factor associated with this cancer is strong exposure of the skin to ultraviolet (UV) radiation. The type of source – be it the sun or artificial UV sources such as solariums – is not important. The risk of squamous cell carcinoma increases with the cumulative (life-long) dose of UV radiation.

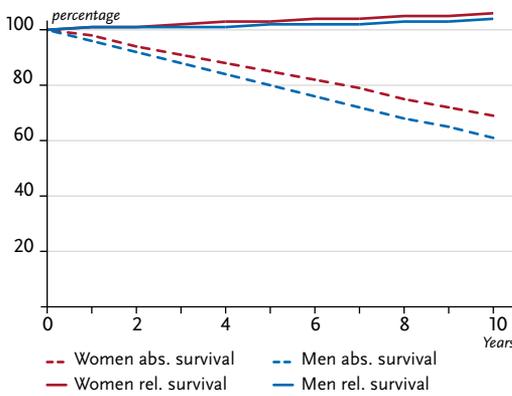
In contrast, intermittent (recurring, intensive) UV exposure increases the risk of basal cell carcinomas. Patients who have already developed a basal cell carcinoma have an increased risk of developing further non-melanoma skin cancer. Non-melanoma skin cancer can also develop many years after exposure to arsenic; on skin that has been damaged by radiation (such as after radiation therapy) and due to immunosuppressive therapy, for example after an organ transplant.

In accordance with the guidelines on statutory screening, men and women are entitled to have their skin examined by a specially trained doctor (such as a dermatologist or general practitioner) every two years beginning at 35 years of age.

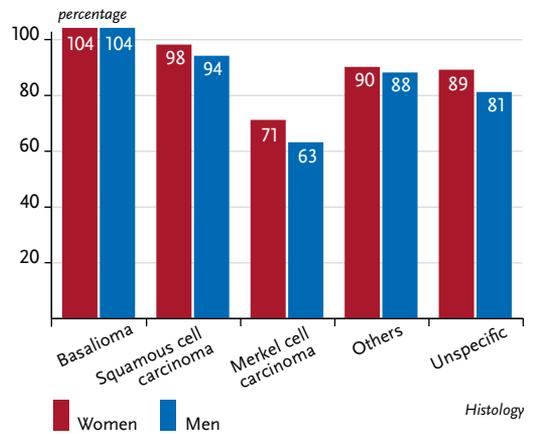
**Figure 3.14.1**  
Age-standardised incidence and mortality rates by sex, ICD-10 C44, Germany 2006–2016/2017, projection (incidence) through 2020 per 100,000 (old European Standard)



**Figure 3.14.2**  
Absolute and relative survival rates up to 10 years after first diagnosis, by sex, ICD-10 C44, Germany 2015–2016



**Figure 3.14.3**  
Relative 5-year survival by histology and sex, ICD-10 C44, Germany 2015–2016



**Figure 3.14.4**  
Age-specific incidence rates by sex, ICD-10 C44, Germany 2015–2016 per 100,000

