

3.7 Anus

Table 3.7.1
Overview of key epidemiological parameters for Germany, ICD-10 C21

Incidence	2019		2020			
	Women	Men	Women	Men		
Incident cases	1,510	900	1,500	810		
Crude incidence rate ¹	3.6	2.2	3.6	2.0		
Age-standardised incidence rate ^{1,2}	2.3	1.6	2.3	1.3		
Median age at diagnosis	65	64	64	65		
Mortality	2019		2020		2021	
	Women	Men	Women	Men	Women	Men
Deaths	340	208	355	261	301	231
Crude mortality rate ¹	0.8	0.5	0.8	0.6	0.7	0.6
Age-standardised mortality rate ^{1,2}	0.4	0.3	0.4	0.4	0.3	0.4
Median age at death	75	70	75	70	77	69
Prevalence and survival rates	5 years		10 years		25 years	
	Women	Men	Women	Men	Women	Men
Prevalence	5,800	3,000	9,200	4,600	13,300	6,800
Absolute survival rate (2019–2020) ³	64 (60–72)	55	54 (51–62)	45		
Relative survival rate (2019–2020) ³	72 (69–80)	63	68 (64–78)	60		

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

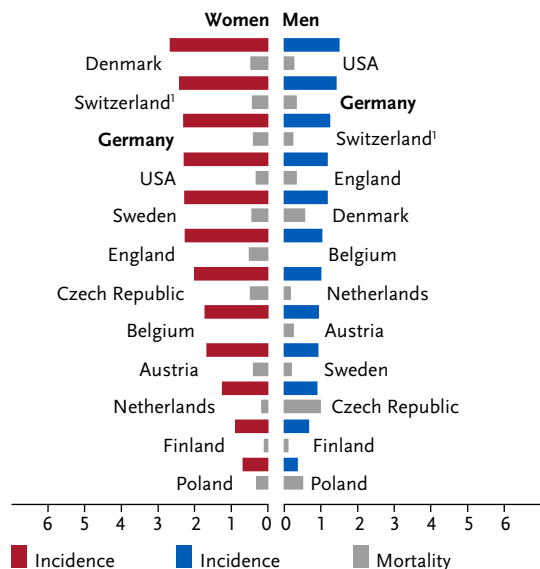
Epidemiology and risk factors

Cancers of the anus are predominantly squamous cell carcinomas. In 2020, about 2,300 people were diagnosed with anal cancer, 1,500 of whom were women. Contrary to the trend of decreasing incidence rates of colorectal cancer, both the incidence rate and the mortality rate of anal cancer have increased substantially over the last 20 years. An increase in incidence is also described internationally. The relative 5-year survival rates of patients with anal cancer are about 72% for women and 63% for men.

In Germany, about 90% of anal carcinomas can be traced back to a persistent infection with human papillomavirus (HPV). Related risk factors are certain sexual practices (frequently changing sexual contacts, passive anal intercourse) and chronic immunosuppression (especially due to HIV infection or organ transplantation). Smoking also increases the risk. Men with same-sex contacts (MSM) and an HIV infection have the highest risk of anal carcinoma.

The Standing Commission on Vaccination (STIKO) recommends vaccination against HPV regardless of gender, primarily between the ages of 9 and 14.

Figure 3.7.1
International comparison of age-standardised incidence and mortality rates by sex, ICD-10 C21, 2019–2020 or latest available year (details and sources, see appendix) per 100,000 (old European Standard)



¹ Switzerland: incidence data for 2015–2019

Figure 3.7.2
Age-standardised incidence and mortality rates by sex, ICD-10 C21, Germany 1999 – 2020/2021 per 100,000 (old European Standard)

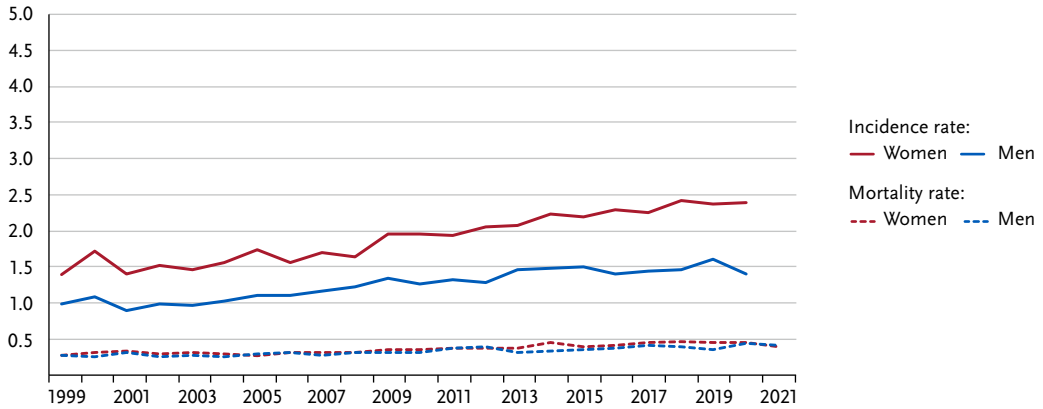


Figure 3.7.3
Absolute and relative survival rates up to 10 years after diagnosis, by sex, ICD-10 C21, Germany 2019 – 2020

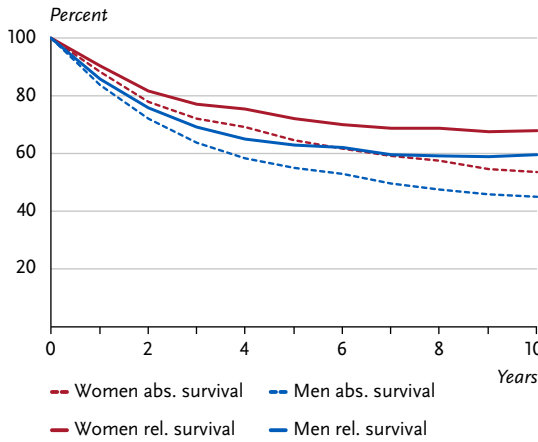


Figure 3.7.4
Relative 5-year survival by UICC stage (7th and 8th edition TNM) and sex, ICD-10 C21, Germany 2019 – 2020

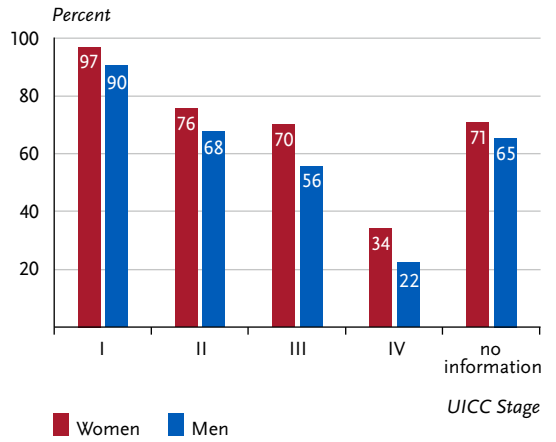


Figure 3.7.5
Age-specific incidence rates by sex, ICD-10 C21, Germany 2019 – 2020 per 100,000

