

3.14 Non-melanoma skin cancer

Table 3-14.1
Overview of key epidemiological parameters for Germany, ICD-10 C44

Incidence	2019		2020			
	Women	Men	Women	Men		
Incident cases	103,710	118,720	96,490	112,300		
Crude incidence rate ¹	246.4	289.5	229.0	273.7		
Age-standardised incidence rate ^{1,2}	133.7	168.8	123.5	157.6		
Median age at diagnosis	74	75	74	75		
Mortality	2019		2020		2021	
	Women	Men	Women	Men	Women	Men
Deaths	445	631	431	617	464	714
Crude mortality rate ¹	1.1	1.5	1.0	1.5	1.1	1.7
Age-standardised mortality rate ^{1,2}	0.4	0.8	0.3	0.7	0.3	0.8
Median age at death	87	83	87	83	88	84
Survival rates	5 years		10 years			
	Women	Men	Women	Men		
Absolute survival rate (2019–2020) ³	85 (84–86)	79 (77–81)	69 (68–71)	60 (57–63)		
Relative survival rate (2019–2020) ³	103 (102–105)	103 (99–105)	108 (104–111)	106 (100–110)		

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

Almost three quarters of non-melanotic forms of skin cancer are basal cell carcinomas (basaliomas). These only metastasise in exceptional cases, especially if the immune defence is weakened, and are therefore rarely life-threatening. However, they can grow into the surrounding tissue, e.g. into the bones, and thus lead to considerable restrictions in quality of life. Around a quarter are squamous cell carcinomas, which mainly affect older people. Around two thirds of these tumours occur on the head or neck. One of the rarer forms is Merkel cell carcinoma, which belongs to the group of neuroendocrine tumours. In 2020, an estimated 209,000 people in Germany were diagnosed with non-melanotic skin cancer for the first time, compared to 1,180 deaths in 2021. After the introduction of skin cancer screening in mid-2008, the incidence rose significantly, although a slight decline has recently become apparent. Even if the international data situation is less good than for malignant melanoma, it can be assumed that the incidence of the disease has increased significantly in western industrialised nations in recent decades.

Risk factors

Anyone who has ever had non-melanoma skin cancer has an increased risk of developing it again. Actinic keratoses increase the risk of squamous cell carcinoma. Non-melanoma skin cancer can also develop after long-term exposure to arsenic, on skin damaged by radiation (for example after radiotherapy) or during immunosuppressive therapy, for example after an organ transplant.

The statutory cancer screening programme provides for a skin examination every two years by a doctor (dermatologist or General practitioner with appropriate training) for men and women from the age of 35.

Figure 3.14.1
Age-standardised incidence and mortality rates by sex, ICD-10 C44, Germany 2006 – 2020/2021 per 100,000 (old European Standard)

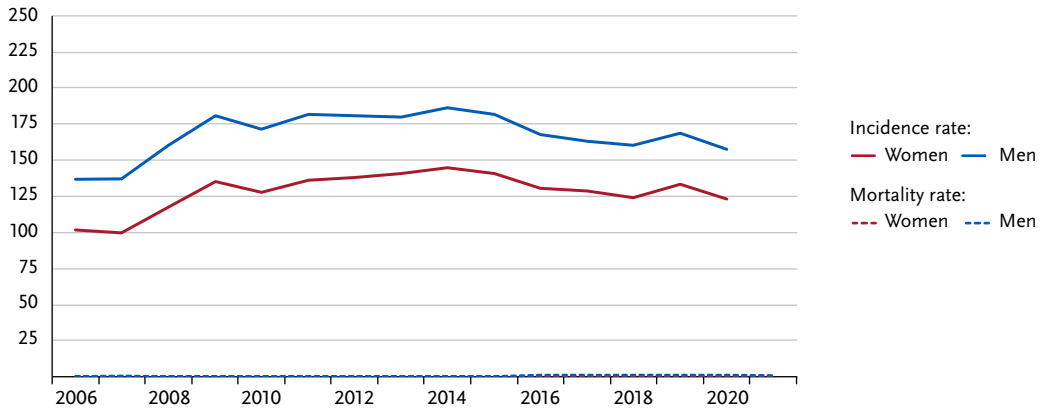


Figure 3.14.2
Absolute and relative survival rates up to 10 years after diagnosis, by sex, ICD-10 C44, Germany 2019 – 2020

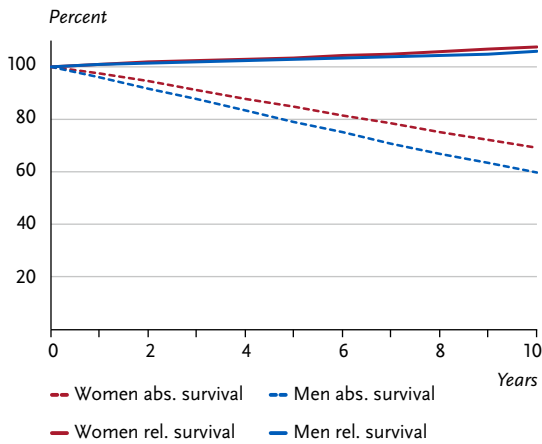


Figure 3.14.3
Relative 5-year survival by histology and sex, ICD-10 C44, Germany 2019 – 2020

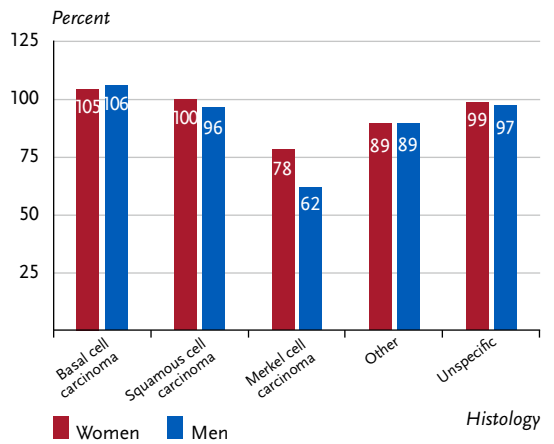


Figure 3.14.4
Age-specific incidence rates by sex, ICD-10 C44, Germany 2019 – 2020 per 100,000

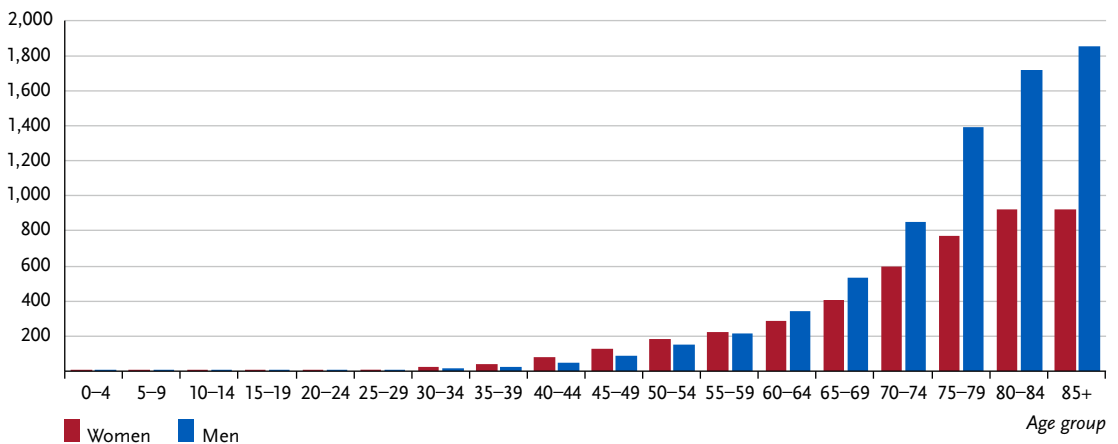


Table 3.13.2
Cancer incidence and mortality risks in Germany by age and sex, ICD-10 C43, database 2019

Risk of developing cancer				Mortality risk				
Women aged	in the next 10 years		ever		in the next 10 years		ever	
35 years	0.2 %	(1 in 450)	2.0 %	(1 in 50)	< 0.1 %	(1 in 18,800)	0.2 %	(1 in 420)
45 years	0.3 %	(1 in 290)	1.8 %	(1 in 56)	< 0.1 %	(1 in 6,400)	0.2 %	(1 in 430)
55 years	0.4 %	(1 in 270)	1.5 %	(1 in 68)	< 0.1 %	(1 in 4,400)	0.2 %	(1 in 450)
65 years	0.5 %	(1 in 220)	1.2 %	(1 in 86)	< 0.1 %	(1 in 2,100)	0.2 %	(1 in 480)
75 years	0.5 %	(1 in 190)	0.8 %	(1 in 130)	0.1 %	(1 in 1,100)	0.2 %	(1 in 540)
Lifetime risk			2.1 %	(1 in 47)			0.2 %	(1 in 420)
Men aged	in the next 10 years		ever		in the next 10 years		ever	
35 years	0.1 %	(1 in 750)	2.4 %	(1 in 42)	< 0.1 %	(1 in 10,000)	0.4 %	(1 in 280)
45 years	0.3 %	(1 in 380)	2.3 %	(1 in 44)	< 0.1 %	(1 in 4,500)	0.3 %	(1 in 290)
55 years	0.4 %	(1 in 240)	2.1 %	(1 in 48)	< 0.1 %	(1 in 2,400)	0.3 %	(1 in 290)
65 years	0.7 %	(1 in 140)	1.8 %	(1 in 54)	0.1 %	(1 in 1,100)	0.3 %	(1 in 310)
75 years	1.0 %	(1 in 100)	1.4 %	(1 in 70)	0.2 %	(1 in 580)	0.3 %	(1 in 340)
Lifetime risk			2.4 %	(1 in 42)			0.4 %	(1 in 280)

Figure 3.13.3
Distribution of UICC stages at diagnosis by sex, ICD-10 C43, Germany 2019 – 2020
(top: incl. missing data and DCO cases; bottom: valid values only)

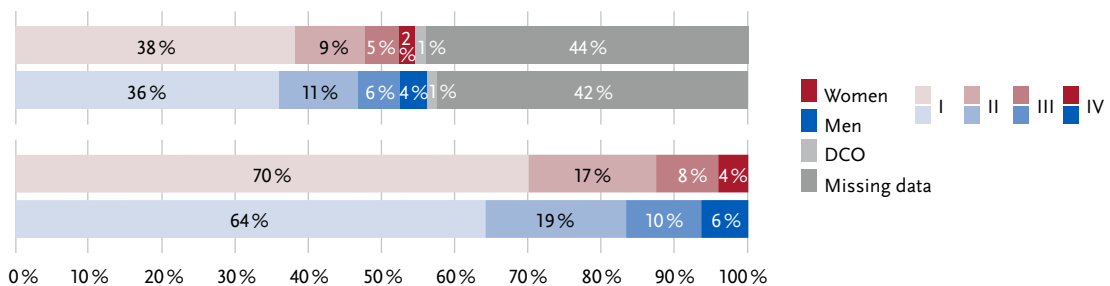


Figure 3.13.4
Absolute and relative survival rates up to 10 years after diagnosis, by sex, ICD-10 C43, Germany 2019 – 2020

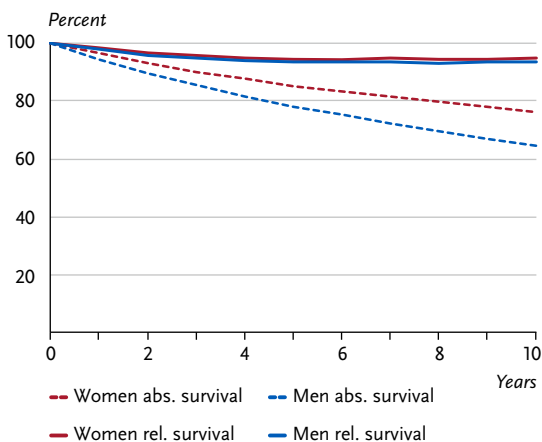


Figure 3.13.5
Relative 5-year survival by UICC stage (7th and 8th edition TNM) and sex, ICD-10 C43, Germany 2019 – 2020

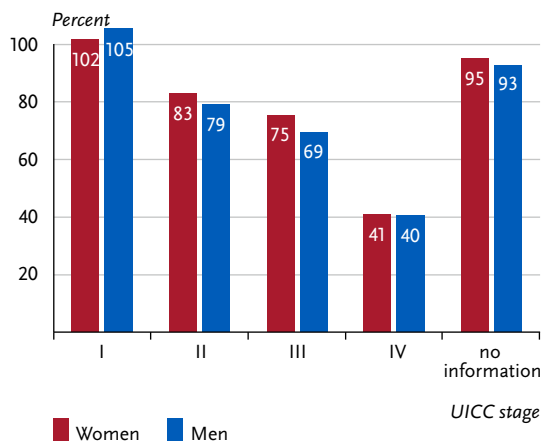


Figure 3.13.6
 Age-standardised incidence and mortality rates in German federal states by sex, ICD-10 C43, 2019 – 2020
 per 100,000 (old European Standard)

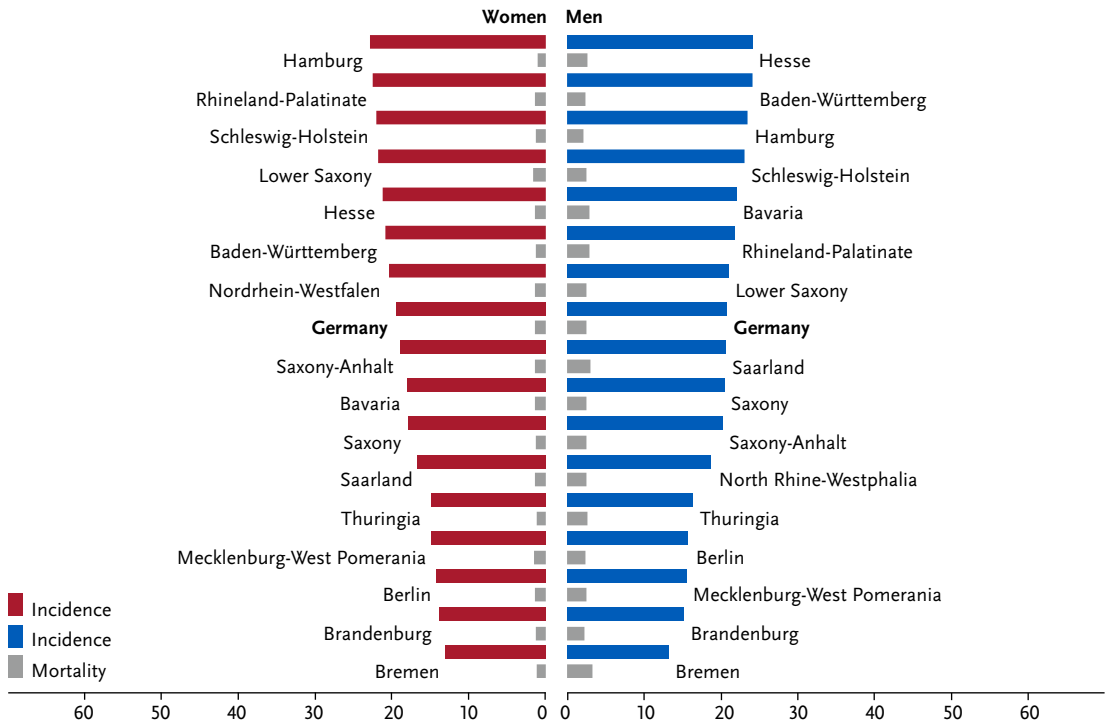
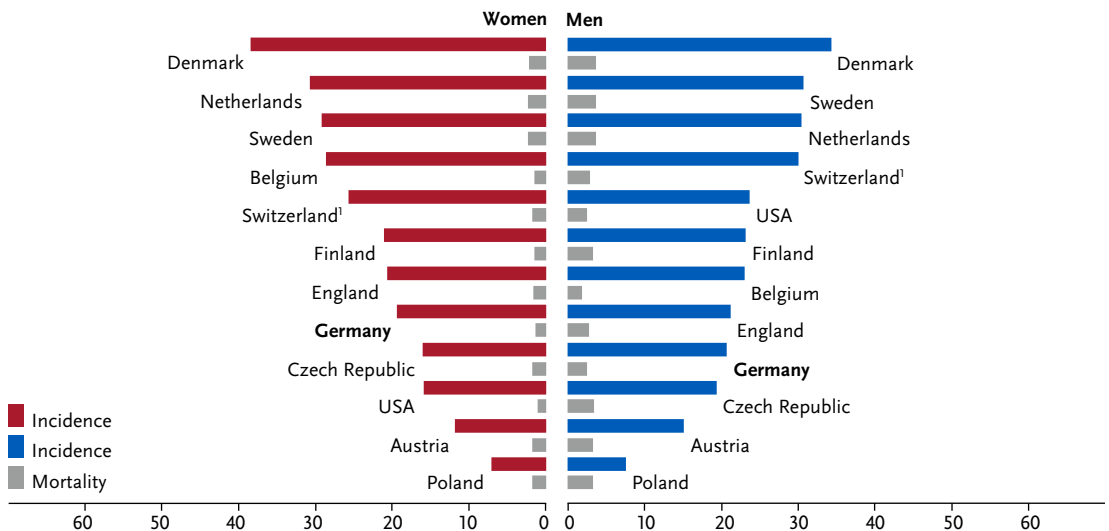


Figure 3.13.7
 International comparison of age-standardised incidence and mortality rates by sex,
 ICD-10 C43, 2019 – 2020 or latest available year (details and sources, see appendix)
 per 100,000 (old European Standard)



¹ Switzerland: incidence data for 2015 – 2019