

3.20 Uterus

Table 3.20.1
Overview of key epidemiological parameters for Germany, ICD-10 C54 – C55

Incidence	2019	2020	
	Women	Women	
Incident cases	11,550	10,860	
Crude incidence rate ¹	27.4	25.8	
Age-standardised incidence rate ^{1,2}	16.9	15.8	
Median age at diagnosis	67	67	
Mortality	2019	2020	2021
	Women	Women	Women
Deaths	2,659	2,758	2,634
Crude mortality rate ¹	6.3	6.5	6.2
Age-standardised mortality rate ^{1,2}	3.0	3.1	2.9
Median age at death	77	77	78
Prevalence and survival rates	5 years	10 years	25 years
	Women	Women	Women
Prevalence	44,900	79,100	145,900
Absolute survival rate (2019–2020) ³	69 (67–75)	57 (55–62)	
Relative survival rate (2019–2020) ³	78 (76–84)	75 (73–82)	

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

With about 10,860 new cases in 2020, malignant tumours of the uterus (corpus or endometrial carcinoma) are the fifth most common cancer (excluding non-melanoma skin cancer) in women and the most common of the female genital organs. Due to the good prognosis, the number of deaths from this disease is comparatively low at about 2,634 deaths in 2021. One in 50 women will develop uterine cancer in the course of her life and one in 200 will die from it. Within Germany, regional differences in incidence and mortality rates are rather small. Internationally, significantly higher incidence rates are reported from the USA, but also from the neighbouring Czech Republic. The age-standardised incidence and mortality rates of uterine cancer have recently remained almost constant after a continuous decline. The median age at diagnosis is 67 years. Histologically, most cancers of the uterine body are endometrioid adenocarcinomas, which originate from the glandular lining of the uterus. Seven out of ten corpus carcinomas for which valid stage information is available are already diagnosed in stage I, in which the tumour is still confined to the uterine body. However, around four in ten of all tumours could not be assigned to any stage. The relative 5-year survival rate for patients with uterine cancer in Germany is about 78%. At the end of 2020, there were about 145,900 women living in Germany who had been diagnosed with uterine cancer in the past 25 years.

Risk factors

About 80% of endometrial cancers are hormone-dependent. Long-term oestrogen influence is a risk factor: an early first menstruation, a late menopause, childlessness, and ovarian diseases increase the risk. Similarly, oestrogens as monotherapy during menopause increases risk, while the combination with progestogens counteracts this. Oral contraceptives (“the pill”), especially oestrogen-progestogen combinations, reduce the risk. Obesity and lack of exercise also play a role in hormone-dependent tumours. Women with type 2 diabetes mellitus are also more likely to develop uterine cancer. Women who are treated for breast cancer with tamoxifen also have a slightly higher risk. Genetic mutations associated with hereditary colorectal cancer, hereditary non-polyposis colorectal carcinoma (HNPCC, Lynch syndrome), also increase the risk of developing uterine cancer.

In the rarer oestrogen-independent forms of uterine cancer, older age is considered a risk. Uterine exposure to radiotherapy can also increase the risk. The role of lifestyle-related or genetic factors remains unclear.

Figure 3.20.1a
Age-standardised incidence and mortality rates, ICD-10 C54 – C55, Germany 1999 – 2020/2021
per 100,000 (old European Standard)

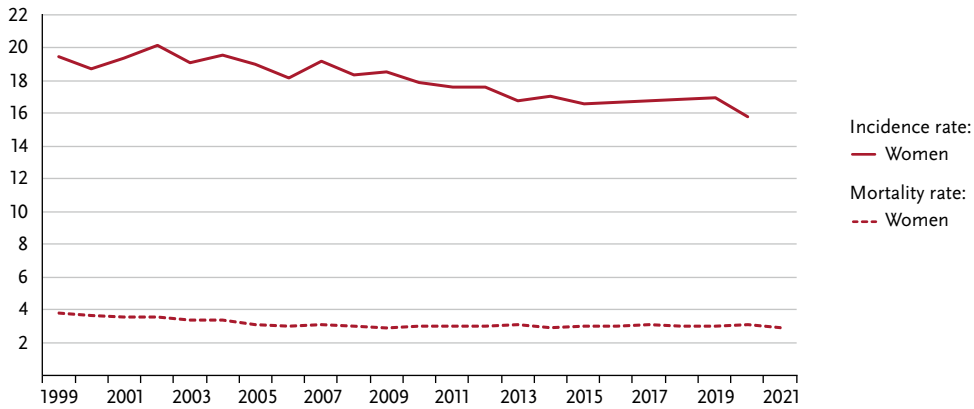


Figure 3.20.1b
Absolute numbers of incident cases and deaths, ICD-10 C54 – C55, Germany 1999 – 2020/2021

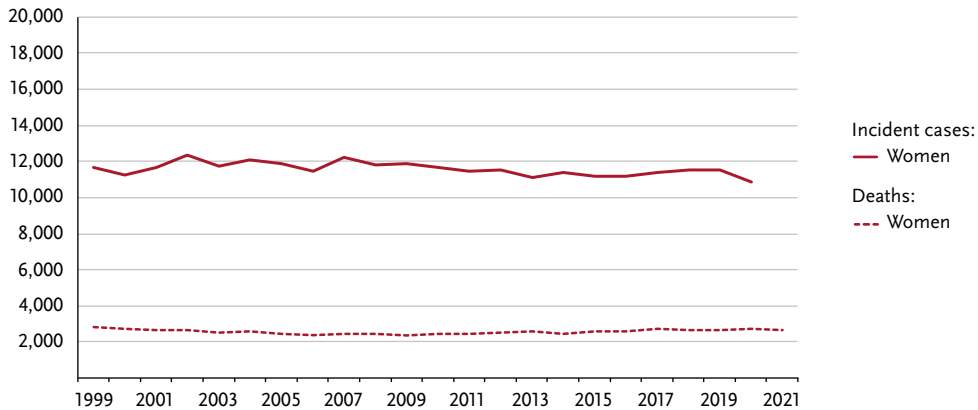


Figure 3.20.2
Age-specific incidence rates, ICD-10 C54 – C55, Germany 2019 – 2020
per 100,000

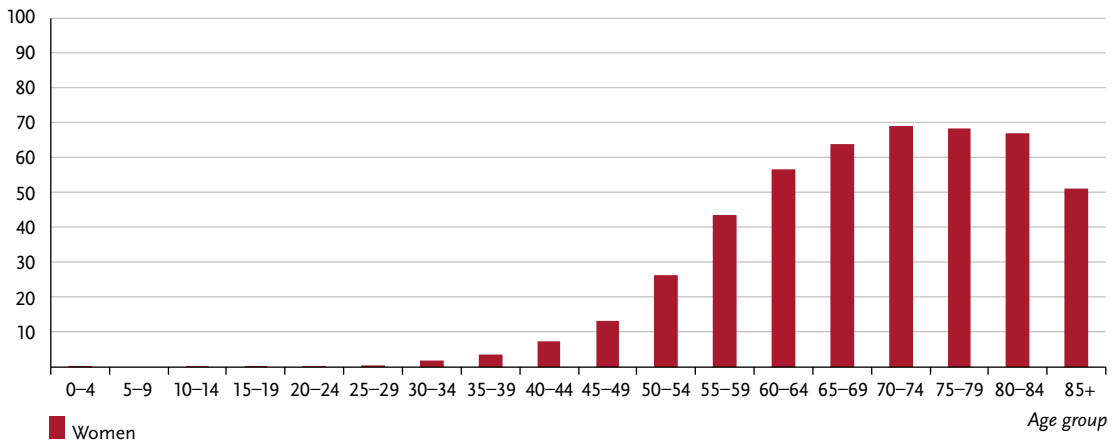


Table 3.20.2
Cancer incidence and mortality risks in Germany by age, ICD-10 C54 – C55, database 2019

Women aged	Risk of developing cancer				Mortality risk			
	in the next 10 years		ever		in the next 10 years		ever	
35 years	0.1 %	(1 in 1,700)	2.0 %	(1 in 49)	< 0.1 %	(1 in 17,200)	0.5 %	(1 in 200)
45 years	0.2 %	(1 in 470)	2.0 %	(1 in 50)	< 0.1 %	(1 in 6,000)	0.5 %	(1 in 200)
55 years	0.5 %	(1 in 200)	1.8 %	(1 in 55)	0.1 %	(1 in 1,600)	0.5 %	(1 in 200)
65 years	0.6 %	(1 in 150)	1.4 %	(1 in 71)	0.1 %	(1 in 760)	0.5 %	(1 in 220)
75 years	0.6 %	(1 in 160)	0.9 %	(1 in 120)	0.2 %	(1 in 470)	0.4 %	(1 in 270)
Lifetime risk			2.0 %	(1 in 49)			0.5 %	(1 in 200)

Figure 3.20.3
Distribution of UICC stages at diagnosis, ICD-10 C54 – C55, Germany 2019 – 2020
(top: incl. missing data and DCO cases; bottom: valid values only)

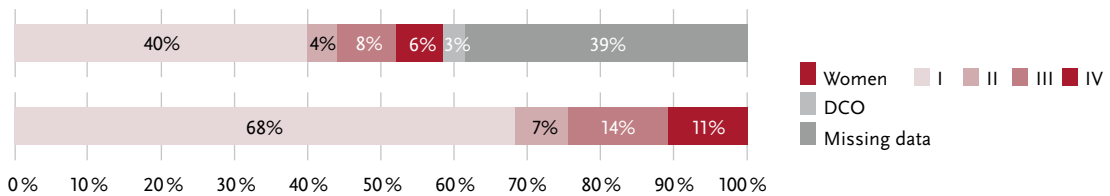


Figure 3.20.4
Absolute and relative survival rates up to 10 years after diagnosis, ICD-10 C54 – C55, Germany 2019 – 2020

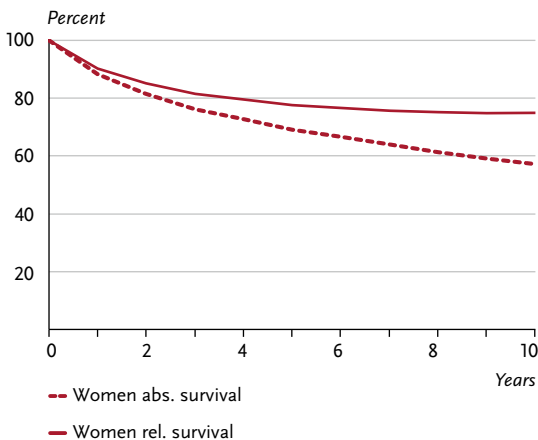


Figure 3.20.5
Relative 5-year survival by UICC stage (7th and 8th edition TNM), ICD-10 C54 – C55, Germany 2019 – 2020

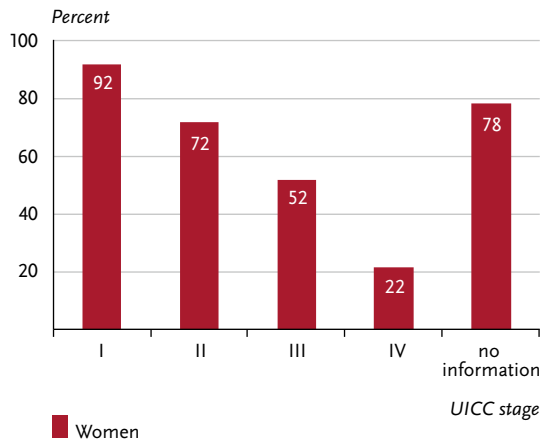


Figure 3.20.6
Age-standardised incidence and mortality rates in German federal states, ICD-10 C54 – C55, 2019 – 2020
per 100,000 (old European Standard)

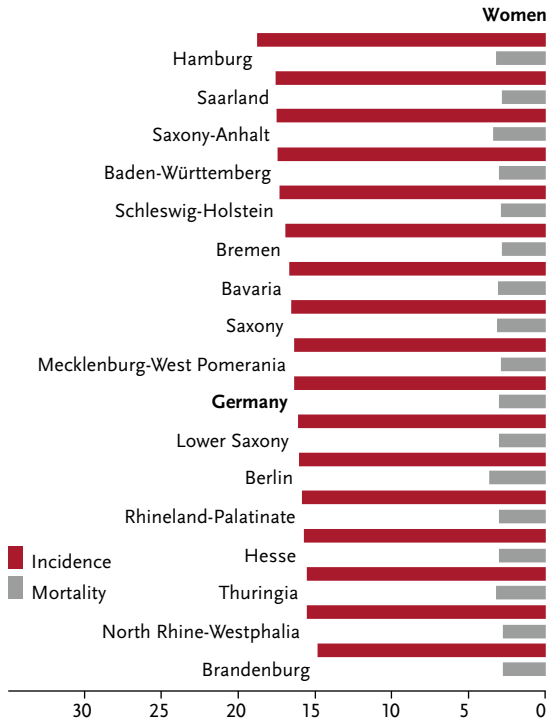
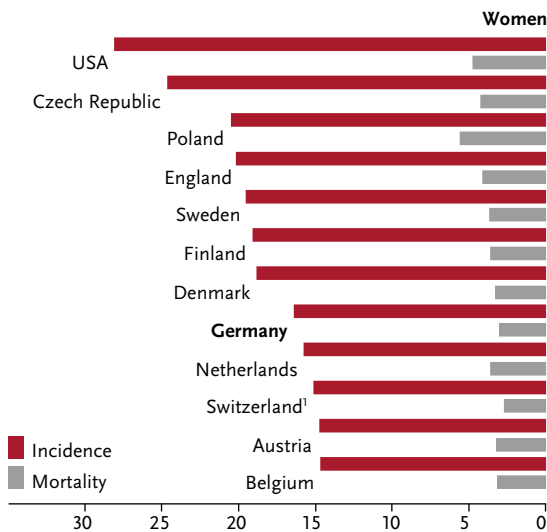


Figure 3.20.7
International comparison of age-standardised incidence and mortality rates, ICD-10 C54 – C55, 2019 – 2020 or latest available year (details and sources, see appendix)
per 100,000 (old European Standard)



¹ Switzerland: incidence data for 2015 – 2019