

PRESS RELEASE

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Melanoma death rates are rising in men but static or falling in women

Glasgow, UK: The rate of men dying from malignant melanoma has risen in populations around the world, while in some countries the rates are steady or falling for women, according to research presented at the 2018 NCRI Cancer Conference.

Researchers studied worldwide data on deaths gathered by the World Health Organisation, focusing on 33 countries with the most reliable data. They found that melanoma death rates in men were rising in all but one country.

They say more research is needed to understand the reason for this trend, but in the meantime, more public health efforts targeted at men may be needed to raise awareness of the disease and of sun-smart behaviours.

The work was presented by Dr Dorothy Yang, a junior doctor at the Royal Free London NHS Foundation Trust, UK. She said: "The major risk factor for melanoma is overexposure to ultraviolet radiation, either from sun exposure or from using sunbeds. Despite public health efforts to promote awareness of melanoma and encourage sun-smart behaviours, melanoma incidence has been increasing in recent decades. However, some new reports have identified signs of stabilisation and decline in melanoma death rates in places like Australia and Northern Europe.

"We wanted to conduct an up-to-date analysis of recent melanoma mortality rates across the world to try to understand these patterns, and whether new diagnosis, treatment and prevention strategies are having any effect."

The researchers studied age-standardised death rates in the 33 countries between 1985 and 2015. These rates take into account the effects of some countries having an aging population and others having a younger demographic. They extracted the rates for malignant melanoma, the most dangerous form of skin cancer. They compared the rates for men and women and looked at trends over time.

In all countries, the rates were higher in men than in women. Overall, the highest three-year average death rates for 2013 to 2015 were found in Australia (5.72 per 100,000 men and 2.53 per 100,000 in women) and Slovenia (3.86 in men and 2.58 in women), with the lowest in Japan (0.24 in men and 0.18 in women).

The Czech Republic was the only country where the researchers found a decrease in men's melanoma death rate, where there was an estimated annual percentage decrease of 0.7% between 1985 and 2015. Israel and the Czech Republic experienced the largest decreases in mortality rates in women, 23.4% and 15.5% respectively.

Dr Yang added: "More research will be needed to explore the factors underlying these trends. There is evidence that suggests men are less likely to protect themselves from the sun or engage with melanoma awareness

and prevention campaigns. There is also ongoing work looking for any biological factors underlying the difference in mortality rates between men and women.”

Dr Yang says she and her colleagues will continue to examine the data to see whether they can identify any possible factors that help explain the differences.

Poulam Patel is Chair of the NCRI Skin Cancer Clinical Studies Group, Professor of Clinical Oncology at the University of Nottingham, and was not involved with the research. He said: “This research shows that death rates for melanoma are stabilising or decreasing in some countries, particularly for women, but in almost all countries there was an increase in death rates over the past 30 years in men. This is an important finding that requires further scrutiny.

“These results also suggest that melanoma will continue to be a health issue over the coming years, and we will need to find effective strategies to accurately diagnose and successfully treat patients.”

ENDS

Notes to editors

Abstract number 1952, ‘Trends in mortality from malignant melanoma: an observational study of the World Health Organisation mortality database from 1985 to 2015,’ Dorothy Yang *et al.* **Poster presentation, Silent theatre 1, Hall 4, 19.40 hrs, Sunday 4 November.**

This research received no external funding.

List of countries with 2013-2015 mortality rates:

Country	Males	Females
Australia	5.72	2.53
Austria	2.72	1.45
Belgium	1.97	1.75
Bulgaria	1.97	1.08
Canada	No 2013-2015 data	No 2013-2015 data
Croatia	3.40	1.84
Czech Republic	2.56	1.34
Denmark	3.24	2.27
Estonia	3.01	1.60
Finland	3.02	1.28
France	1.89	1.26
Germany	2.16	1.29
Greece	1.40	0.87
Hungary	2.52	1.55
Ireland	3.22	2.06
Israel	2.66	1.39
Italy	2.07	1.23
Japan	0.24	0.18
Latvia	2.25	1.72
Lithuania	2.06	1.34
The Netherlands	3.37	2.19
New Zealand	No 2013-2015 data	No 2013-2015 data

Poland	2.69	1.75
Portugal	1.52	1.01
Republic of Moldova	1.88	1.11
Romania	1.38	0.99
Slovakia	3.46	2.31
Slovenia	3.86	2.58
Spain	1.46	0.95
Sweden	3.44	2.09
Switzerland	2.84	1.41
UK	2.57	1.58
USA	No 2013-2015 data	No 2013-2015 data

About the NCRI Cancer Conference

The NCRI Cancer Conference is the UK's largest forum showcasing the latest advances in cancer research. The Conference provides a platform for researchers, clinicians, people affected by cancer and industry representatives to come together to discuss, present and showcase high-quality research. Informative and interactive educational sessions attract over 1,500 delegates each year and create the ideal setting to establish new collaborations with key stakeholders in cancer research. The NCRI Cancer Conference is taking place from 4-6 November 2018 at the Scottish Event Campus, Glasgow, UK.

For more information visit <https://conference.ncri.org.uk/>

About the NCRI

The National Cancer Research Institute (NCRI) is a UK-wide partnership of cancer research funders, established in 2001. Its 19 member organisations work together to accelerate progress in cancer-related research through collaboration, to improve health and quality of life.

NCRI works to coordinate research related to cancer, to improve the quality and relevance of research and to accelerate translation of research into clinical practice for the benefit of patients.

NCRI Partners are: Biotechnology and Biological Sciences Research Council (BBSRC); Bloodwise; Brain Tumour Research; Breast Cancer Now; Cancer Research UK; Children with Cancer UK; Department of Health and Social Care; Economic and Social Research Council (ESRC); Macmillan Cancer Support; Marie Curie; Medical Research Council (MRC); Northern Ireland Health and Social Care Public Health Agency (Research & Development Department); Pancreatic Cancer Research Fund; Prostate Cancer UK; Roy Castle Lung Cancer Foundation; Scottish Government Health Directorates (Chief Scientist Office); Tenovus Cancer Care; The Wellcome Trust and Welsh Assembly Government (Health and Care Research Wales).

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