



Some Facts about Cancer in the World using Registered Cancer in 2012

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Dear editor-in-Chief

Cancer is a leading cause of death worldwide, there were 14.1 million new cancer cases, 8.2 million cancer deaths and 32.6 million people living with cancer (prevalence) in 2012 worldwide (Fig.

1) (1). About 44% of new cancer cases and 53% of the cancer deaths occurred in occur in countries at a low or medium level of the Human Development Index (2).

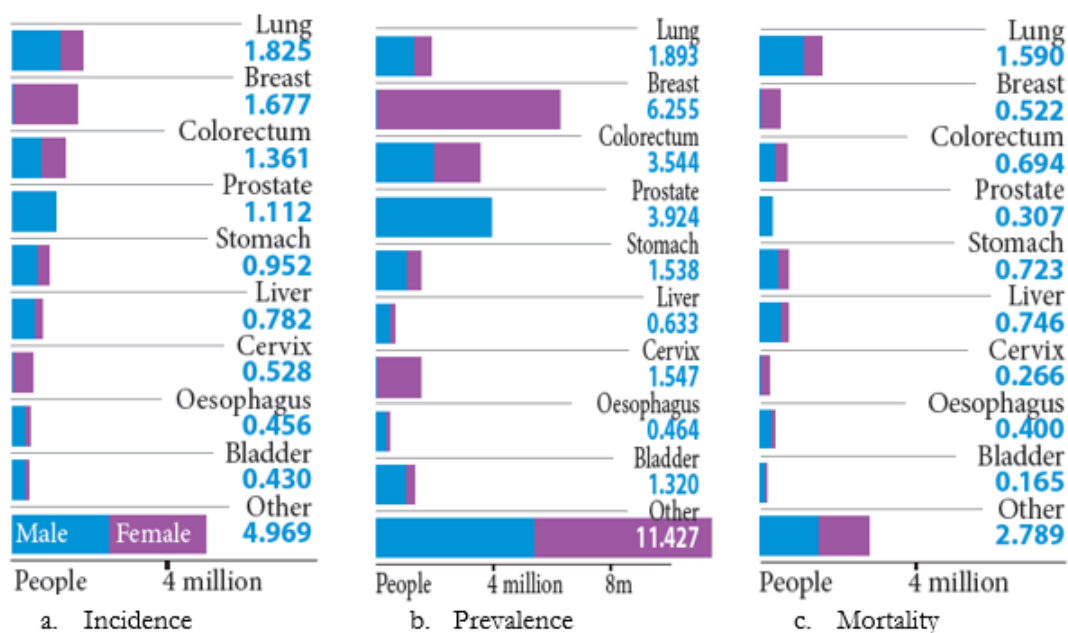


Fig.1: Cancer status in the world in 2014 by incidence, prevalence & mortality

An estimated 169.3 million years of healthy life lost (YLL) in the world is due to cancer in 2008. Contributors about 18%-50% of the total healthy years lost was colorectal, lung, female breast and prostate cancers were the in most regions of the world (3). The most commonly diagnosed cancers worldwide were those of the lung (1.8 million, 13.0% of the total), breast (1.7 million, 11.9%), and colorectal (1.4 million, 9.7%). The most com-

mon causes of cancer death were cancers of the lung (1.6 million, 19.4% of the total), liver (0.8 million, 9.1%), and stomach (0.7 million, 8.8%) (1). The 5 most common sites of cancer diagnosed in 2012 were lung, prostate, colorectal, stomach, and liver cancer among men and breast, colorectal, lung, cervix, and stomach cancer among women (Table 1) (4).

Table 1: Most common cancer worldwide, by gender in 2012

Rank	Cancer	Females		Cancer	Males	
		New cases (1,000s)	% of all cancers		New cases (1,000s)	% of all cancers
1	Breast	1,677	25.2	Lung	1,242	16.7
2	Colorectal	614	9.2	Prostate	1,112	15.0
3	Lung	583	8.8	Colorectal	746	10.0
4	Cervix uteri	528	7.9	Stomach	631	8.5
5	Stomach	320	4.8	Liver	554	7.5

Epidemiologic transition and increasing trend of non-communicable disease such as cancer, Sought countries have a planning for control of cancer, in order to respond to the cancer needs in populations by preventing, detecting early, curing and caring (5). Cancer control strategy allows for a more balanced, efficient and equitable use of limited resources. In lower resource settings such as our country, a plan that considers a primary health care approach and the gradual implementation of few, affordable, cost-effective interventions will have a better chance of moving into effective action (5).

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