

部位別5年相対生存率(%)の日米欧比較—日本6登録、米国SEERプログラム、および欧州連合

Comparisons of 5-year relative survivals by site - 6 Cancer Registries in Japan, the US SEER Program, and Eurocare-4

部位 (ICD-10)	Site	日本6がん登録 6 Cancer registries in Japan	米国 SEER US SEER Program	欧州連合 Eurocare-4
		1997-99年診断患者 Diagnosed in 1997-99	1996-2003年診断患者 Diagnosed in 1996-2003	1995-99年診断患者 Diagnosed in 1995-99
全がん (C00-C96)	All cancers	54.3	64.9 <sup>1)</sup>	51.9 <sup>1)</sup>
口腔・咽頭 (C00-C14)	Oral cavity, pharynx	52.9	59.1	—
食道 (C15)	Esophagus	31.6	15.6	12.3
胃 (C16)	Stomach	62.1	24.3	24.1
結腸 (C18)	Colon	68.9	63.5	53.9
直腸および肛門 (C19-C21)	Rectum	65.2	65.0	53.5
肝臓 (C22)	Liver	23.1	10.8	8.6
胆のう・胆管 (C23-C24)	Gallbladder and bile ducts	20.2	15.1 胆のう 18.6 肝外胆管	14.1
膵臓 (C25)	Pancreas	6.7	5.0	5.5
喉頭 (C32)	Larynx	76.1	62.9	63.1
肺・気管 (C33-C34)	Lung, trachea	25.6	15.0	12.6
乳房(女) (C50)	Breast (females)	85.5	88.6	81.1
子宮頸部 (C53)	Cervix uteri	71.5	71.6	66.5
子宮体部 (C54)	Corpus uteri	76.8	83.9	78.3
卵巣 (C56)	Ovary	52.0	44.9	41.6
前立腺 (C61)	Prostate	75.5	98.1	77.0
精巣 (C62)	Testis	92.0	98.4	93.8
膀胱 (C67)	Urinary bladder	76.5	79.5	65.8
甲状腺 (C73)	Thyroid	92.4	93.9	86.5
悪性リンパ腫 (C81-C85, C96)	Lymphoma	49.9	66.8	—
ホジキン病 (C81)	Hodgkin's disease	68.3	84.9	83.0
非ホジキンリンパ腫 (C82-C85, C96)	Non-Hodgkin's lymphoma	49.1	63.4 <sup>2)</sup>	54.6
多発性骨髄腫 (C88-C90)	Multiple myeloma	29.8	33.7	34.4
白血病 (C91-C95)	Leukemia	32.9	49.6	—
急性リンパ性白血病	Acute Lymphoid Leukemia	50.0	64.0	30.0
急性骨髄性白血病	Acute myeloid Leukemia	26.6	21.2	19.0
慢性骨髄性白血病	Chronic myeloid Leukemia	44.0	47.5	39.5

地域がん登録に基づくがん患者の5年相対生存率を、日本(6府県)、米国(SEER計画参加9登録)、欧州連合22ヶ国の3群で比較すると、診断年に多少の違いがあり留意が必要であるが、わが国のがん患者の生存率は、食道、胃、肝、喉頭、肺などで高く、前立腺、リンパ腫、白血病で低い傾向を示した。

Comparisons of 5-year relative survival rates in population-

based cancer registry among Japan (6 prefectures), U.S. (9 registries in the SEER program), and Europe (22 countries in EURO-CARE study) reveal that survival rates in Japan are higher for esophagus, stomach, liver, larynx, and lung, and lower for prostate, malignant lymphoma, and leukemia. These results should be interpreted with caution, since years at diagnosis varies across these three regions.

(注) 日本6登録(宮城、山形、新潟、福井、大阪、長崎): がん研究助成金「地域がん登録研究班」による協同調査。1997-99年診断の新発届出患者。資料: 厚生労働省がん研究助成金「地域がん登録精度向上と活用に関する研究」平成19年度報告書  
米国SEER: 米国SEER計画参加の9登録。1996-2003年診断患者。資料: SEER Cancer Statistics Review, 1975-2004, All Races. [http://seer.cancer.gov/csr/1975\\_2004/results\\_single/sect\\_01\\_table.04\\_2pgs.pdf](http://seer.cancer.gov/csr/1975_2004/results_single/sect_01_table.04_2pgs.pdf)  
EURO-CARE-4: EU22カ国生存率協同調査。1995-99年診断患者。資料: Lancet Oncol 2007; 8: 773-783

1) C44を除く、2) C96を除く

Note: Six districts for the Cancer Registry are Miyagi, Yamagata, Niigata, Fukui, Osaka and Nagasaki. This is a collaborative work by Research Group for the Population-based Cancer Registry in Japan, and is supported by Grant-in-Aid for Cancer Research in the Ministry of Health, Labor and Welfare. Cancer patients newly diagnosed and reported between 1997 and 1999 are included.  
US SEER program: Newly diagnosed cancer patients between 1996 and 2003 in 9 registries in the SEER program. Source: SEER Cancer Statistics Review, 1975-2004, All Races. [http://seer.cancer.gov/csr/1975\\_2004/results\\_single/sect\\_01\\_table.04\\_2pgs.pdf](http://seer.cancer.gov/csr/1975_2004/results_single/sect_01_table.04_2pgs.pdf)  
EURO-CARE-4: Newly diagnosed cancer patients of 22 countries in European Union between 1995 and 1999. This is a joint work for survival analysis. Source: Lancet Oncol 2007; 8: 773-783  
1) Excludes C44, 2) Excludes C96