# がんの統計 2022

CANCER STATISTICS IN JAPAN — 2022



# 公益財団法人 がん研究振興財団

**Foundation for Promotion of Cancer Research** 

序

「がんの統計2022」版が関係各位のご協力を頂き、発刊できましたことに感謝申し上げます。本書は1974年に発刊されて以来48年になりますが、日本人のがんの変貌を実感し、正確な実態把握によるがん対策の重要性が再認識されるものとして多くの方々に親しまれてきました。収載されている各種統計は、我が国のがん対策を推進するうえでも貴重な資料でありますので、広くご活用いただければ幸いに存じます。

本書の編集にご協力いただきました編集委員会の皆様に心より御礼申し上げます。

令和4年3月

公益財団法人がん研究振興財団 理事長 堀 田 知 光

# **Preface**

We would like to thank for the cooperation of parties concerned in publishing cancer statistics 2022 version. This book has been published and read by many people since 1974. "Cancer statistics," published to date, contain valuable information, demonstrating changes in Japanese cancer statuses and reaffirming the importance of cancer control based on their accurate understanding. Various types of cancer statistics, included in this book, are important in promoting cancer control. Hence, we hope many people utilize them to promote cancer control.

We thank the editorial committee for their cooperation in editing this book.

March 2022

Chairman, Board of Directors Tomomitsu Hotta, M.D. CONTENTS Page

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1963
           Subsidy for cancer research by Ministry of Health and Welfare started
1981
           Cancer became the leading cause of death
1984
           Comprehensive 10-year Strategy for Cancer Control (~1993)
1994
           New 10-year Strategy to Overcome Cancer (~2003)
2004
           The 3rd-term Comprehensive 10-year Strategy for Cancer Control (~2013)
2005 May. Headquarters of Cancer Control in Ministry of Health, Labour and Welfare (MHLW)
2005 Aug. Action Plan 2005 for Promotion of Cancer Control
           Cancer Control Act enacted
2007 Apr. Cancer Control Act implemented
2007 Jun. Basic Plan to Promote Cancer Control Programs formulated
           Headquarters of 50% Cancer Screening Rate (MHLW)
2012 Jun. Basic Plan to Promote Cancer Control Programs revised
2013 Dec.
           Cancer Registration Promotion Act was enacted.
2014 Mar.
           Comprehensive 10-year Strategy for Cancer Control formulated (~2023)
2015 Jun. Organization of Cancer Summit
2015 Dec. Formulation of "Acceleration plan for cancer control"
2016 Jan.
           Enforcement of Cancer Registration Promotion Act was implemented.
2016 Dec. Amendment and implementation of a law to revise a part of the Cancer Control Act
2016 Dec. Organization of Cancer Genome Medical Forum 2016
2018 Mar. Basic Plan to Promote Cancer Control Programs revised
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- Cancer has been the leading cause of death in Japan since 1981. The Japanese government formulated the Comprehensive 10-year Strategy for Cancer Control (1984-1993) and the New 10-year Strategy to Overcome Cancer (1994-2003) to tackle cancer. Since 2004, the 3rd-term Comprehensive 10-year Strategy for Cancer Control has been implemented in order to promote cancer research and disseminate high-quality cancer medical services, with the slogan "Drastic reduction in cancer morbidity and mortality".
- In May 2005, the Japanese Ministry of Health, Labour and Welfare (MHLW) developed the Headquarters of Cancer Control in order to promote multidisciplinary activity for comprehensive cancer control, and formulated the Action Plan 2005 for Promotion of Cancer Control in August.
- In June 2006, the Cancer Control Act was enacted and the law has been implemented since April 2007. Based on this law, the Basic Plan to Promote Cancer Control programs was discussed by the Cancer Control Promotion Council and approved by the Japanese Cabinet in June 2007.
- In July 2009, the Japanese MHLW developed the Headquarters of 50% Cancer Screening Rate to promote multidisciplinary activity for cancer screening.
- In June 2012, the Basic Plan to Promote Cancer Control Programs was revised based on the discussion at the Cancer Control Promotion Council and three expert committees under the council.
- In December 2013, Cancer Registration Promotion Act was enacted, and is being prepared to be implemented through discussion by the Cancer Registration Group established in June 2014.
- · As a novel cancer research strategy based on the Basic Plan to Promote Cancer Control Programs, Comprehensive 10-year Strategy for Cancer Control was formulated in March 2014, with the approval of the Minister of Education, Culture, Sports, Minister of Health, Labour and Welfare, and Minister of Economy, Trade and Industry, in order to promote cancer research in cooperation with patients and society, targeting cancer eradication, prevention, and coexistence.
- In December 2015, the "Acceleration plan for cancer control" was formulated on three areas of "prevention," "treatment/research," and "coexistence with cancer."
- · In November 2016, a bill was submitted to revise a part of the Cancer Control Act, which was enacted and implemented in December.
- In December 2016, with a goal to conquer cancer, the Genome Medical Forum 2016 was organized to provide an opportunity to reconstruct the cancer medical system from the viewpoints of patients, survivors, and their families.
- The Basic Plan to Promote Cancer Control Programs was decided by the Cabinet in March, 2018 based on discussion by the Cancer Control Promotion Council.

資料:厚生労働省健康局がん・疾病対策課

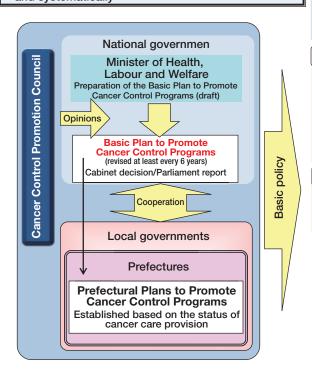
Source: Cancer and Disease control Division, Health Services Bureau, Ministry of Health, Labour and Welfare

People

## Ocancer Control Act (Article No. 98, 2006)

(established in June 2006, enforced in April 2007, and revised and enforced in December, 2016)

Promote cancer control measures comprehensively and systematically



Section 1: Promotion of cancer prevention and early detection

- O Promotion of cancer prevention
- O Improvement of cancer screening, etc.

Section 2: Promotion of uniform cancer care

- Development of physicians and other medical professionals with specialized knowledge and skills and maintenance of medical institutions
- Maintenance and improvement of the quality of medical care for cancer patients
- Establishment of systems to collect and provide cancer care information

Section 3: Promotion of research

- Promotion of cancer research and utilization of research results
- O Promotion of rare and refractory cancer research

Section 4: Employment status of cancer patients

- Continued employment of cancer patients
   Combination of learning and treatment for cancer
- Combination of learning and treatment for cancer patients
- O Support for private organization activities

Section 5: Promotion of cancer education

Promotion of school education on cancer

#### **Promotion of cancer control measures**

Draft budget in FY 2022: 35.4 billion yen (budget in FY 2021: 36.5 billion yen)

\* Revised budget for FY 2021: 4.5 billion yen

Based on the Phase 3 Basic Plan to Promote Cancer Control Programs, approved by the Cabinet in March 2018, further measures are taken for cancer control based on the three policies of "cancer prevention," "improvement of cancer care," and "coexistence with cancer".

Prevention



#### (Cancer screening)

- •The distribution of coupons to those eligible for cervical/breast cancer screening in their first year of eligibility will be continued. In addition, to improve screening rates, screening is recommended and re-recommended for eligible individuals and those in need of detailed examination.
- •A large-scale experimental survey will be conducted to examine effective measures for improving the cancer screening rate, from the position of emphasizing the importance of such measures.

mprovement of cancer care



#### (Cancer genome)

- •Continued expansion and enhancement of the functions of the Center for Cancer Genomics and Advanced Therapeutics: C-CAT, including the addition of new panel testing and system development in response to the increased amount of storage space necessary for the increased number of tests and so on, for the Cancer Genome Information Repository System.
- •Based on the Whole Genome Analysis Plan Road Map 2021, research on the structure of a patient return system is promoted, in addition to the collecting of whole cancer genome analysis results and accompanying clinical information. Further, a system for the promotion of whole genome analysis of cancer will be developed.

Coexistence with cancer



#### (Patient support)

- •To provide social support for cancer patients balancing work and medical treatment, the appropriate information and consultation support for job assistance is provided at Designated Cancer Care Hospitals in accordance with the "treatment-work balance plan" and depending on each individual's situation.
- •To support pediatric and adolescent and young adult (AYA) generation cancer patients, the cost burden of fertility preservation therapy will be reduced and clinical information will be collected from patients to promote research.

# The 3rd-term Basic Plan to Promote Cancer Control Programs (outline)

#### 1. Overall goal

#### "People, including cancer patients, learn and overcome cancer."

- (1) Improvement of cancer prevention and screening based on scientific evidence; (2) Realization of patient-oriented cancer medicine; and
- (3) Establishment of a society where patients can live peacefully while maintaining dignity.

#### 2. Measures of each section

#### 1. Cancer prevention

- (1) Primary cancer prevention
- (2) Early detection and screening of cancer

(Secondary prevention)

#### 2. Improvement of cancer care

- (1) Cancer genome medicine
- (2) Surgery, radiation therapy, drug therapy, and immunotherapy for cancer
- (3) Team medicine
- (4) Cancer rehabilitation
- (5) Supportive therapy
- (6) Rare and refractory cancers (Measures according to cancer characteristics)
- (7) Childhood cancers and cancers of AYA\* generation and the elderly
  - \*Adolescent and young adult
- (8) Pathological diagnosis
- (9) Cancer registration
- (10) Efforts towards early development and approval of pharmaceuticals and medical equipment

#### 3. Coexistence with cancer

- (1) Palliative care after cancer diagnosis
- (2) Consultation support and information provision
- (3) Cancer measures and cancer patient support based on social cooperation
- (4) Social problems, including employment statuses of cancer patients
- (5) Cancer measures according to life stages

#### 4. Improvement of infrastructure to support the above

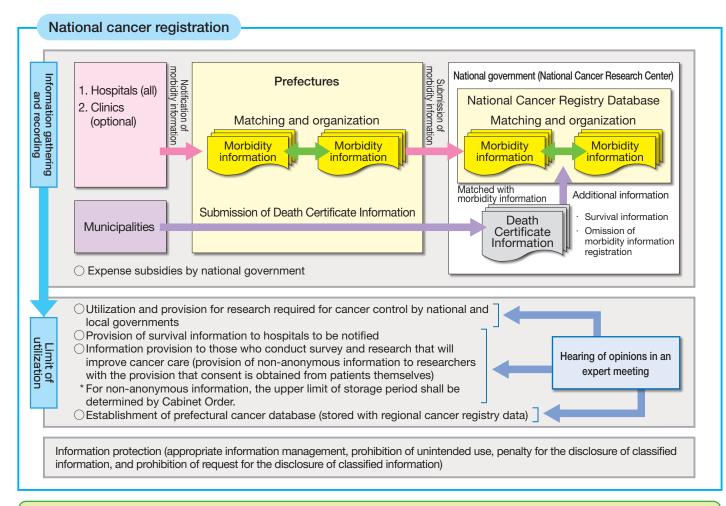
- (1) Cancer research
- (2) Human resource development
- (3) Cancer education and awareness

#### 3. Comprehensive and systematic promotion of cancer measures

- 1. Further cooperation among persons concerned
- 2. Planning by prefectural governments
- 3. Efforts of the people, including cancer patients
- 4. Cooperation with patient organizations
- 5. Necessary financial measures and efficient and prioritized budgets
- 6. Comprehension of goal achievements
- 7. Review of basic plans

# Cancer registration

## Cancer Registry Act (established in December 2013)



#### Promotion of hospital cancer registry

(promotion of hospital cancer registration and system maintenance for cancer information gathering by national government)

#### Human resource development

(training required for securing human resources for national and hospital cancer registry)

#### Utilization of cancer registry data

- National and prefectural governments → Enhancement of cancer control, information provision to medical institutions, publication of statistics, and consultation support for patients
- Medical institutions → Appropriate information provision to patients, analysis and evaluation of cancer care, and improvement of cancer care
   Researchers who received cancer registry data → Improvement of cancer care

#### Cancer Registry Act

- Cancer Registry Act was established in December 2013 to facilitate the understanding and analysis of the morbidity, medical care, and outcome of cancer and the other surveys and research of cancer, thereby improving cancer control.
- The basic concepts of this law are as follows:
- (1) For national cancer registration, morbidity should be accurately understood through a wide range of information gathering;
- (2) For hospital cancer registration, necessary information should be gathered through national cancer registration to promote its dissemination and enhancement:
- (3) To enhance cancer control, detailed information should be gathered regarding cancer care;
- (4) The results of cancer research and survey, including those in private sector, are utilized for the public; and
- (5) Personal information in cancer registry should be strictly protected.
- · Under this law, all hospitals and (designated) clinics report cancer incidence information to prefectural governments.
- Morbidity information, matched and organized by prefectural governments, is notified to the national government (National Cancer Center), and is further matched and organized by the National Cancer Registry Database of the National Cancer Center and simultaneously with death certificate information notified by municipalities as vital statistics to the national government. Cancer morbidity and death information obtained in Japan is centrally managed by the Japanese government to enhance the provision of information about cancer treatment and prevention and take measures for cancer control based on scientific findings.