

2021

澳門癌症登記年報

ANNUAL REPORT OF MACAO CANCER REGISTRY



澳門特別行政區政府衛生局
Serviços de Saúde do Governo de Região Administrativa Especial de Macao
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澳門特別行政區政府
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Health Bureau

Government of Macao Special Administrative Region

澳門 · 2023 年 9 月

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摘要

- 澳門癌症登記系統一直監測本澳癌症的流行情況和變化趨勢，記錄和公佈癌症發展的新動向，《澳門癌症登記年報》至今已出版至第 19 期。
- 2021 年澳門錄得的新發現個案是 2,571 例，粗發病率為 377 (每 10 萬人口)，年齡標準化發病率為 270 (每 10 萬人口)。2021 年錄得的新發病個案和發病率較往年高，可能受新冠疫情影響，市民不方便前往外地，傾向留澳就醫，另外在澳門工作或生活的外地人也因此多留在澳門就醫。
- 2021 年新發現的癌症中，按個案計算女性較多，佔總個案數的 52%，若按發病率計算，則男性的癌症發病率較高。其中肺癌、結腸直腸癌、乳癌、前列腺癌和甲狀腺癌是本澳最常見和最主要的癌症。
- 2021 年澳門錄得死亡個案 929 例，粗死亡率為 136 (每 10 萬人口)，年齡標準化死亡率為 98 (每 10 萬人口)，死亡個案和死亡率與往年相若。
- 2021 年澳門死亡個案中，男性較女性多，男性佔所有死亡個案 56%。前五位的致命癌症部位是肺、結腸直腸、肝、胰臟和胃。

Summary

- The Registration System is consistently monitoring the epidemiological situation of cancer and changes in cancer trend, as well as documenting and disclosing every single move of development. The annual report of the Macao Cancer Registry has been published to the 19th issue.
- In 2021, the number of new cases was 2,571, crude incidence rate was 377 per 100,000 persons and the age-standardized incidence rate was 270 per 100,000 persons. New cases and incidence rate recorded in 2021 were higher than previous years, There have been more new cases discovered in Macao than in previous years maybe due to the Covid-19 pandemic, it was inconvenient for our citizens to seek medical treatment outside Macao. Hence, local residents tend to be treated in Macao. In addition, many foreigners working or living in Macao were bound to have medical treatment in Macao.
- In 2021, the number of new cases was more among females than males, female cases accounted for 52% of the total number of cases. However, the cancer incidence rate of male was higher than that of female. Among the new cases, lung, colorectal, breast, prostate and thyroid cancers were the commonest and most significant cancer sites in Macao.
- In 2021, the number of death cases of cancer was 929, crude mortality rate was 136 per 100,000 persons and the age-standardized mortality rate was 98 per 100,000 persons. The number of death cases and mortality rate of 2021 were similar to previous years.
- Among the death cases of cancer, there were more males than females and the male cases accounted for 56% among all death cases. The top 5 fatal cancer sites were lung, colorectum, liver, pancreas and stomach.

簡介 *Introduction*

惡性腫瘤（又稱癌症）是一種非常值得關注的疾病，一直位於澳門十大死因之內。根據澳門統計暨普查局的資料，2021 年十大死因中惡性腫瘤仍名列榜首，約佔所有死亡個案的四成。

為監測癌症的發展情況，衛生局參考世界衛生組織的建議，於 2003 年開展推動全民性的“澳門癌症登記”計劃，用流行病學的統計資料，為制訂癌症防治措施和重新配置醫療資源提供參考依據。另外，每年公佈綜合性數據資料，讓衛生計劃者和決策者、醫護人員、學者和市民了解本澳癌症的流行情況，有利大家共同參與討論癌症防治的政策。

In Macao, malignant neoplasm (also known as ‘cancer’) has been a very significant disease as being ranked one of the top 10 leading causes of death for years. According to the data from the Statistics and Census Service of Macao, malignant neoplasm has been the principal cause of death in 2021, occupying about 40% of all death cases.

To monitor the situation trend of cancer, the Health Bureau, based on the WHO recommendations, initiated and promoted a population-based cancer registration project named “MACAO CANCER REGISTRY” in 2003 to collect epidemiological data of cancer for formulating strategies on cancer control and prevention. Besides, the Health Bureau disseminates the data to health planners, policymakers, health care professionals, academics and the general public to report the cancer situation of Macao annually, to facilitate broad discussion on cancer control and prevention among all walks of the community.

申報來源 *Sources of reporting*

目前病例的申報渠道主要有三：一）由仁伯爵綜合醫院、鏡湖醫院及科大醫院的臨床醫生填寫標準申報表進行申報；二）在仁伯爵綜合醫院及鏡湖醫院的病理部電子檔案中擷取符合病例定義的檢驗記錄及資料；三）從死亡證明書中擷取死因符合癌症病例定義的死亡個案。

At present, there are three main reporting channels which include 1) through submission of standard reporting forms filled by clinicians of the Centro Hospitalar Conde de São Januário (CHCSJ), Kiang Wu Hospital and University Hospital; 2) through extracting electronic medical records which fulfil the definition of a reportable case from Pathological Departments of the CHCSJ and Kiang Wu Hospital; 3) through removing death cases which meet the definition of a reportable case from death certificates.

申報病例定義 *Definition of reportable cases*

所有符合國際疾病分類第十版 (ICD-10) 內 C00-C97、D00-D09、D30 和 D32-D33，或國際疾病分類腫瘤學第三版 (ICD-O-3) 組織形態分類碼第 5 碼 (性態譯碼) 為 2 (原位癌) 或 3 (侵襲癌) 者，以及部份為 1 者 (良性腫瘤) (限中樞神經系統和泌尿系統的良好性腫瘤)，經申報後均記錄在本登記系統內。對於多發性腫瘤 (multiple tumours)，應按每一腫瘤分別以獨立的報告表作個別申報。在儲存及分析資料時，將以腫瘤為單位而非以病人計算。

All cases with primary sites coded as C00-C97, D00-D09, D30 and D32-D33 according to the International Classification of Diseases 10th Edition (ICD-10), or those with the 5th-digit behaviour codes as 2 (in situ carcinoma) or 3 (primary malignant tumour) and a portion of 1 (benign tumour) exclusive for the central nervous system and urinary system according to the International Classification of Diseases for Oncology 3rd edition (ICD-O-3) should be registered in the system. As for multiple tumours, each tumour should be reported individually. Tumour, instead of the patient, will be the measuring unit for data storage and analytic purpose.

1. 2021 年有多少人被診斷患有癌症？

How many people were DIAGNOSED with cancer in 2021?

2021 年錄得的癌症新發個案共有 2,571 例，男性 1,238 例 (48%)，女性 1,333 例 (52%)。所有部位的癌症 (以下簡稱“全部癌症”) 的粗發病率約 377 (每 10 萬人口)，男性是 389，女性是 366。女性的新發癌症個案數較男性多，但男性的發病率較女性高。

由於癌症發生的風險隨著年齡增長而顯著增加，因此，為避免因人口結構影響本澳癌症發病率及與其他地區的結果比較，經世界標準人口將年齡因素調整後之年齡標準化發病率是 270 (每 10 萬人口)，男性的年齡標準化發病率是 278，女性則是 258。男性個案的診斷年齡中位數是 67 歲，女性是 61 歲。

按累積風險評估，本澳每 4 人可能有 1 人在 0 至 74 歲間罹患癌症，男性和女性也是每 4 名有 1 人在 0 至 74 歲間罹患癌症。

The total number of new incident cases registered in 2021 was 2,571 with male and female accounting for 1,238 (48%) and 1,333 (52%) cases respectively. The crude incidence rate of all cancer sites (from now onwards as ‘all sites’) was 377 in every 100,000 population, with male and female accounting for 389 and 366 respectively. The number of new cancer cases is similar in men and women, but slightly more in men by incidence.

Age is the crucial factor of cancer incidence as its risk is proportional to the increase of age. For international comparison, the age-standardized rate is used to avoid the influence of population structure on the incidence rate. After adjustment to the world standard population, the age-standardized incidence rate of Macao was 270 in every 100,000 people. The age-standardized incidence rates of males and females were 278 and 258 respectively. Median age at diagnosis of male and female cases was 67 and 61 respectively.

According to the cumulative risk of all cancer sites, there will be 1 in every four persons among our population will have the chance to develop cancer between 0 and 74 years old. 1 in every four for both men and women of Macao will have a risk to develop cancer during their life span between 0 and 74 years old.

累積風險 (Cumulative Risk) 指在沒有其他疾病或死因競爭下，終其一生（通常指 0 至 74 歲）患有或死於癌症的機會。這是終生風險的測量，亦是反映癌症對社會造成影響的重要指標之一。可透過公式一用 0 至 74 歲的累積發生機率 (Cumulative Rate 0-74 percent, CR%₀₋₇₄) 換算，0 至 74 歲的累積發生機率是 0 至 74 歲的年齡組別發生率的加總。當 CR%₀₋₇₄ 少於 10% 時，兩者的值非常接近。0 至 74 歲的累積風險亦可表示為在沒有其他疾病或死因競爭下，在多少人的群體中會出現一個癌症新發或死亡病例。數字越大表示需要越大的群體才有一病例出現，即風險或影響越低，反之亦然。

Cumulative risk is defined as the probability that an individual will develop or die of cancer during a specific age span (the age range 0-74 year is commonly used), assuming that no other competitive diseases or causes of death are in operation. It is a measurement of lifetime risk and is a good indicator of the impact of the disease on society. There is a precise mathematical relationship between the cumulative rate and the cumulative risk, as shown below (Formula 1). Cumulative Rate 0-74 per cent (CR%₀₋₇₄) is the summation of the age-specific rate over each year of age from birth to a defined age of 74. If the cumulative rate is less than 10%, as in the case of most tumours, the cumulative risk can be approximated very well by the cumulative rate. The cumulative risk can be expressed as the number of persons among whom one will develop or die of the disease in question, assuming there are no other competitive diseases. The bigger the number, the bigger the population will be required to find a case, indicating a smaller risk and vice versa.

$$(\text{公式一 Formula 1}) \quad \text{Cumulative Risk}_{0-74} = 1 - e^{-CR\%_{0-74}}$$

表一、澳門 2021 年所有申報癌症之發病率

Table 1 Incidence of ALL reportable cancers, Macao, 2021

	男性 Male	女性 Female	總數 Total
個案數 No. of cases	1238	1333	2571
粗發病率 Crude Incidence rate (1/100,000)	388.5	366.4	376.7
年齡標準化發病率 Age-standardised Incidence rate ^(a)	277.6	258.3	269.6
百分比 Percent of all cases	48.2	51.8	100.0
診斷年齡中位數 Median age at diagnosis	67	61	64
累積風險 Cumulative Risk (多少人中可能在 0-74 歲期間出現一例，1 in every how many people will occur 1 case during age 0 to 74)	4	4	4

(a) 世界標準人口 2000 直接標準化之年齡標準化率，以每十萬為單位

World age-standardised rate derived by direct method weighted with World Standard Population 2000, expressed in per 100,000

2. 2021 年有多少人死於癌症？

How many people DIED from cancer in 2021?

在 2021 年的死亡登記中，顯示死於癌症的共 929 人，男性 524 人（56%），女性 405 人（44%）。全部癌症的粗死亡率是 136（每 10 萬人口），男性 164，女性 111。經世界標準人口將年齡因素調整後的年齡標準化死亡率是 98（每 10 萬人口），男性的年齡標準化死亡率是 122，女性則 76。男性死亡年齡中位數是 71 歲，女性是 70 歲。

按累積風險評估，本澳每 12 人可能有 1 人在 0 至 74 歲間死於癌症，其中每 10 名男性或每 16 名女性可能有 1 人在 0 至 74 歲間死於癌症。

In 2021, 929 registered cases died of cancer, in which 524 (56%) were males, and 405 (44%) were females. The crude mortality rate of all cancer sites was 136 in every 100,000 population with male accounted for 164, and female accounted for 111. The age-standardized mortality rate of Macao was 98 in every 100,000 people, 122 and 76 for males and females respectively. Median age at death of male cases was 71 and 70 of females.

According to the cumulative risk of all cancer sites, 1 in every 12 people of Macao will have the chance to die from cancer during their life span between 0 and 74 years old, whereas 1 in every 10 men and 1 in every 16 women will die from cancer respectively.

表二、澳門 2021 年所有申報癌症之死亡率

Table 2 Mortality of ALL reportable cancers, Macao, 2021

	男性 Male	女性 Female	總數 Total
個案數 <i>No. of cases</i>	524	405	929
粗死亡率 <i>Crude Mortality rate (1/100,000)</i>	164.4	111.3	136.1
年齡標準化死亡率 <i>Age-standardised Mortality rate ^(a)</i>	121.8	75.9	97.7
百分比 <i>Percent of all cases</i>	56.4	43.6	100.0
死亡年齡中位數 <i>Median age at death</i>	71	70	71
累積風險 <i>Cumulative Risk</i> (多少人中可能在 0-74 歲期間出現一例，1 in every how many people will occur 1 case during age 0 to 74)	10	16	12

(a) 世界標準人口 2000 直接標準化之年齡標準化率，以每十萬為單位

World age-standardised rate derived by direct method weighted with World Standard Population 2000, expressed in per 100,000

3. 2021 年哪些癌症最常見？

Which cancers were the commonest in 2021?

發病 *Incident cases*

在 2021 年登記的新發病例中，最常見的癌症為：

- 肺癌 (377 例 · 15%)
 - 結腸直腸癌 (353 例 · 14%)
 - 乳癌 (327 例 · 13%)
 - 前列腺癌 (182 例 · 7%)
 - 甲狀腺癌 (128 例 · 5%)
- 以上五部位個案總和約佔 2021 所有新發個案約 54%。
 - 最常見的新發癌症個案在男女之間是有差別的：
 - 男性前三位癌症分別是肺癌(16%)、結腸直腸癌(16%)及前列腺癌(15%)。
 - 女性前三位癌症分別是乳癌 (24%)、肺癌 (13%) 及結腸直腸癌 (12%)。
 - 近年皮膚癌已登上十大癌症之列，2021 年排行第八，共有 82 例新個案，男性 45 例，女性 37 例。

In 2021, the most commonly reported cancers were:

- Lung (377 cases, 15%),
 - Colorectal (353 cases, 14%),
 - Breast (327 cases, 13%),
 - Prostate (182 cases, 7%) and
 - Thyroid (128 cases, 5%).
- Together, the above five cancers accounted for around 54% of all reportable cancers diagnosed in 2021.
 - Differences were evident among males and females as to which cancers were the commonest:
 - Among males, the top 3 common cancer sites were lung (16%), colorectal (16%) and prostate (15%).
 - Among females, the top 3 common cancer sites were breast (24%), lung (13%) and colorectal (12%).
 - Skin cancer has been one of the top 10 common cancers in recent years and ranked the 8th in 2021, with a total of 82 cases, males accounted for 45 and females accounted for 37.

死亡 *Death cases*

在 2021 年登記的死亡個案中，最常見的癌症為：

- 肺癌 (242 例 · 26%)
- 結腸直腸癌 (151 例 · 16%)
- 肝癌 (105 例 · 11%)
- 胰臟癌 (47 例 · 5%)
- 胃癌 (44 例 · 5%)

- 以上五部位總和約佔 2021 所有死亡個案的 63%。
- 最常見的死亡癌症個案在男女之間是有差別的：
 - 男性前三位癌症分別是肺癌 (29%)、結腸直腸癌 (18%) 及肝癌 (14%)。
 - 女性前三位癌症分別是肺癌 (22%)、結腸直腸癌 (15%) 及乳癌 (10%)。

In 2021, the most common causes of cancer death were:

- Lung (242 cases, 26%),
- Colorectal (151 cases, 16%),
- Liver (105 cases, 11%),
- Pancreas (47 cases, 5%) and
- Stomach (44 cases, 5%)

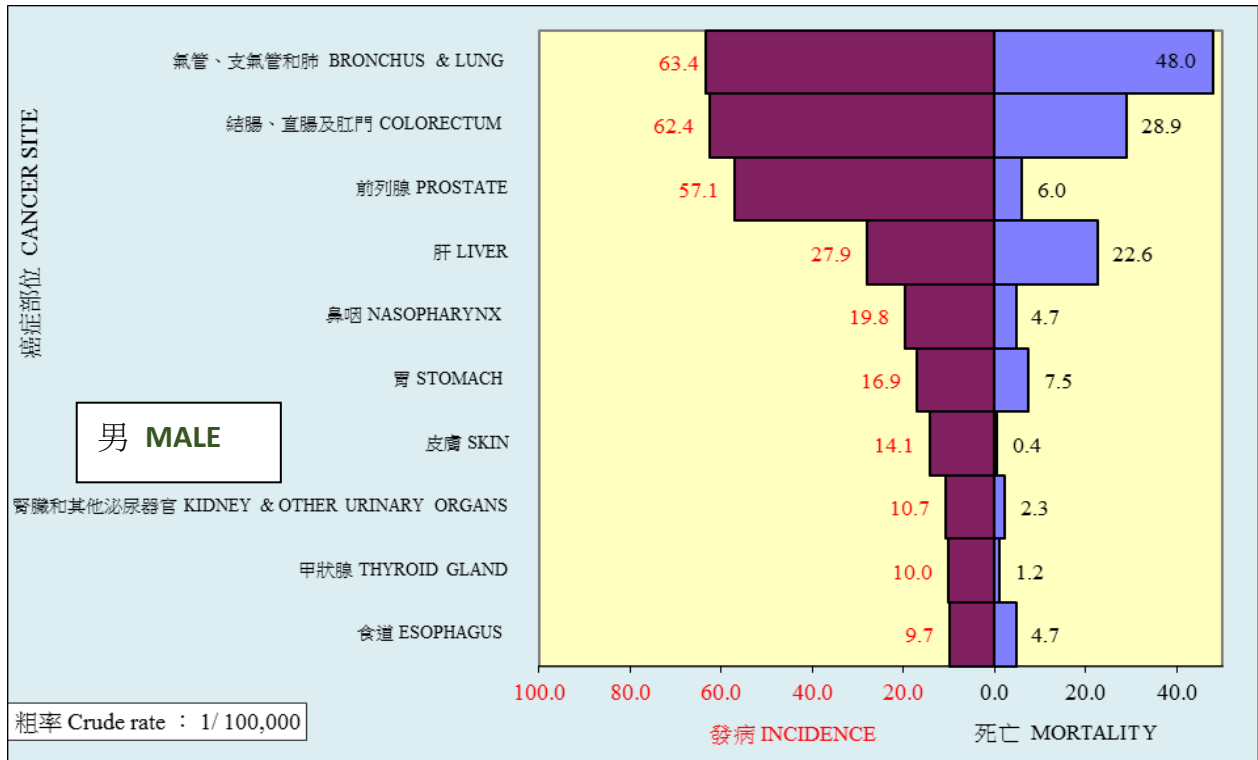
- Together, the above five cancers accounted for about 63% of all deaths from cancers in 2021.
- Males and females were slightly different in the top leading causes of death:
 - Among males, the top 3 fatal cancer sites were lung (29%), colorectal (18%) and liver (14%).
 - Among females, the top 3 fatal cancer sites were lung (22%), colorectal (15%) and breast (10%).

表三、2021 年的主要癌症 (以個案數排序)

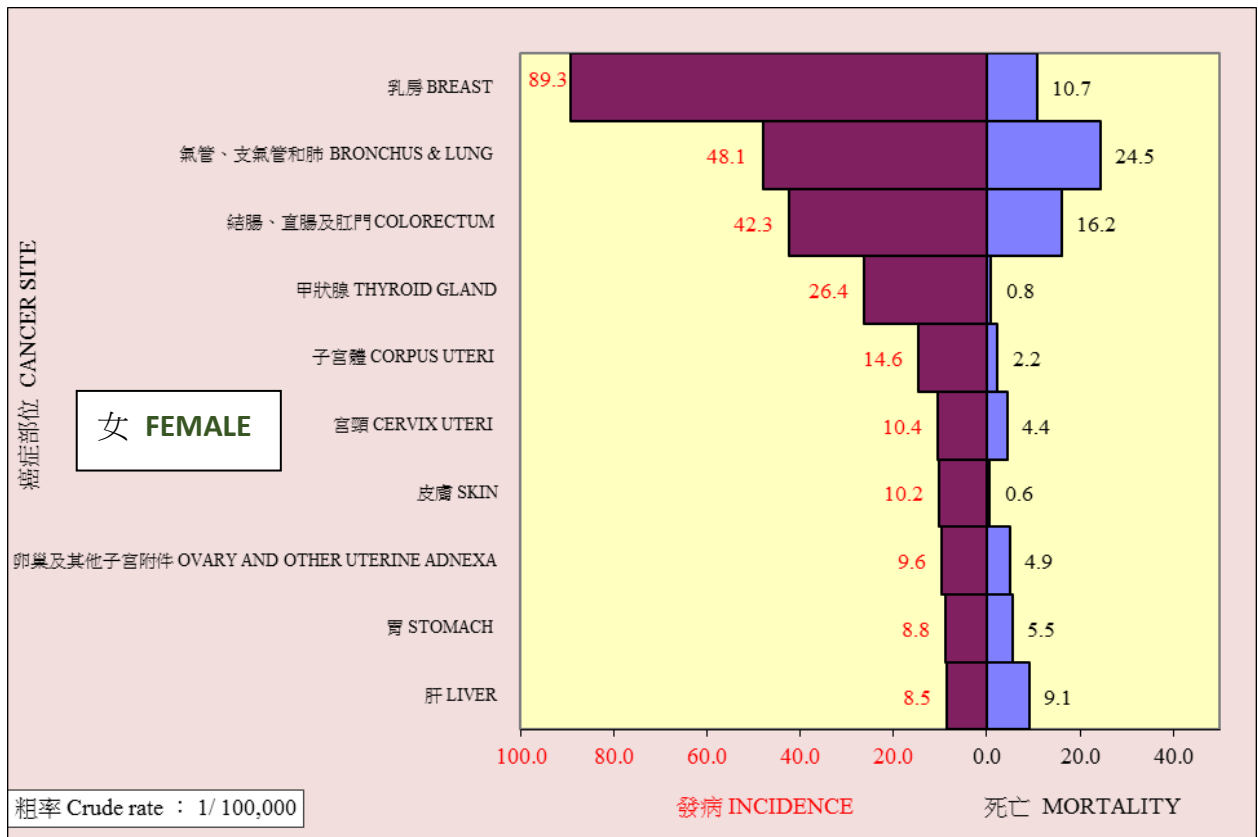
Table 3 Leading Cancer Sites in 2021 (in descending order of case number)

前十位癌症 10 Most Common Cancers, 2021						前十位死亡癌症 10 Major Causes of Cancer Deaths, 2021					
男女 Both Sexes											
名次 Rank	ICD-10	部位 Site	登記的新個案 New cases registered	粗發病率 Crude incidence rate	構成比 Proportion %	名次 Rank	ICD-10	部位 Site	登記的死亡個案 Deaths registered	粗死亡率 Crude mortality rate	構成比 Proportion %
1	C33-C34	氣管、支氣管和肺 BRONCHUS & LUNG	377	55.2	14.7%	1	C33-C34	氣管、支氣管和肺 BRONCHUS & LUNG	242	35.5	26.0%
2	C18-C21	結腸、直腸及肛門 COLORECTUM	353	51.7	13.7%	2	C18-C21	結腸、直腸及肛門 COLORECTUM	151	22.1	16.3%
3	C50	乳房 BREAST	327	47.9	12.7%	3	C22	肝 LIVER	105	15.4	11.3%
4	C61	前列腺 PROSTATE	182	26.7	7.1%	4	C25	胰臟 PANCREAS	47	6.9	5.1%
5	C73	甲狀腺 THYROID GLAND	128	18.8	5.0%	5	C16	胃 STOMACH	44	6.4	4.7%
6	C22	肝 LIVER	120	17.6	4.7%	6	C50	乳房 BREAST	41	6.0	4.4%
7	C16	胃 STOMACH	86	12.6	3.3%	7	C91-C95	白血病 LEUKEMIA	23	3.4	2.5%
8	C44	皮膚 SKIN	82	12.0	3.2%	8	C23- C24	膽及肝外膽管 GALLBLADDER & EXTRAHEPATIC BILE DUCT	22	3.2	2.4%
9	C11	鼻咽 NASOPHARYNX	78	11.4	3.0%	9	C11	鼻咽 NASOPHARYNX	21	3.1	2.3%
10	C64-C66,C68	腎臟和其他泌尿器官 KIDNEY & OTHER URINARY ORGANS	65	9.5	2.5%	10	C61	前列腺 PROSTATE	19	2.8	2.0%
		其他 Others	773	113.3	30.1%			其他 Others	214	31.4	23.0%
		所有部位 ALL SITES	2571	376.7	100.0%			所有部位 ALL SITES	929	136.1	100.0%
男 Male											
名次 Rank	ICD-10	部位 Site	登記的新個案 New cases registered	粗發病率 Crude incidence rate	構成比 Proportion %	名次 Rank	ICD-10	部位 Site	登記的死亡個案 Deaths registered	粗死亡率 Crude mortality rate	構成比 Proportion %
1	C33-C34	氣管、支氣管和肺 BRONCHUS & LUNG	202	63.4	16.3%	1	C33- C34	氣管、支氣管和肺 BRONCHUS & LUNG	153	48.0	29.2%
2	C18-C21	結腸、直腸及肛門 COLORECTUM	199	62.4	16.1%	2	C18-C21	結腸、直腸及肛門 COLORECTUM	92	28.9	17.6%
3	C61	前列腺 PROSTATE	182	57.1	14.7%	2	C22	肝 LIVER	72	22.6	13.7%
4	C22	肝 LIVER	89	27.9	7.2%	4	C16	胃 STOMACH	24	7.5	4.6%
5	C11	鼻咽 NASOPHARYNX	63	19.8	5.1%	5	C25	胰臟 PANCREAS	23	7.2	4.4%
6	C16	胃 STOMACH	54	16.9	4.4%	6	C61	前列腺 PROSTATE	19	6.0	3.6%
7	C44	皮膚 SKIN	45	14.1	3.6%	7	C11	鼻咽 NASOPHARYNX	15	4.7	2.9%
8	C64-C66,C68	腎臟和其他泌尿器官 KIDNEY & OTHER URINARY ORGANS	34	10.7	2.7%	8	C15	食道 ESOPHAGUS	15	4.7	2.9%
9	C73	甲狀腺 THYROID GLAND	32	10.0	2.6%	9	C00-C10,C12- C14, except C11	唇、口腔和咽 (不含鼻咽) LIP, ORAL CAVITY & PHARYNX EXCEPT NASOPHARYNX	12	3.8	2.3%
10	C15	食道 ESOPHAGUS	31	9.7	2.5%	10	C67	膀胱 URINARY BLADDER	12	3.8	2.3%
		其他 Others	307	96.3	24.8%			其他 Others	87	27.3	16.6%
		所有部位 ALL SITES	1238	388.5	100.0%			所有部位 ALL SITES	524	164.4	100.0%
女 Female											
名次 Rank	ICD-10	部位 Site	登記的新個案 New cases registered	粗發病率 Crude incidence rate	構成比 Proportion %	名次 Rank	ICD-10	部位 Site	登記的死亡個案 Deaths registered	粗死亡率 Crude mortality rate	構成比 Proportion %
1	C50	乳房 BREAST	325	89.3	24.4%	1	C33- C34	氣管、支氣管和肺 BRONCHUS & LUNG	89	24.5	22.0%
2	C33-C34	氣管、支氣管和肺 BRONCHUS & LUNG	175	48.1	13.1%	2	C18-C21	結腸、直腸及肛門 COLORECTUM	59	16.2	14.6%
3	C18-C21	結腸、直腸及肛門 COLORECTUM	154	42.3	11.6%	3	C50	乳房 BREAST	39	10.7	9.6%
4	C73	甲狀腺 THYROID GLAND	96	26.4	7.2%	4	C22	肝 LIVER	33	9.1	8.1%
5	C54	子宮體 CORPUS UTERI	53	14.6	4.0%	5	C25	胰臟 PANCREAS	24	6.6	5.9%
6	C53	宮頸 CERVIX UTERI	38	10.4	2.9%	6	C16	胃 STOMACH	20	5.5	4.9%
7	C44	皮膚 SKIN	37	10.2	2.8%	7	C56, C57.0-4	卵巢及其他子宮附件 OVARY AND OTHER UTERINE ADNEXA	18	4.9	4.4%
8	C56, C57.0-4	卵巢及其他子宮附件 OVARY AND OTHER UTERINE ADNEXA	35	9.6	2.6%	8	C53	宮頸 CERVIX UTERI	16	4.4	4.0%
9	C16	胃 STOMACH	32	8.8	2.4%	9	C23- C24	膽及肝外膽管 GALLBLADDER & EXTRAHEPATIC BILE DUCT	14	3.8	3.5%
10	C22	肝 LIVER	31	8.5	2.3%	10	C91-C95	白血病 LEUKEMIA	11	3.0	2.7%
		其他 Others	357	98.1	26.8%			其他 Others	82	22.5	20.2%
		所有部位 ALL SITES	1333	366.4	100.0%			所有部位 ALL SITES	405	111.3	100.0%

* 粗率 Crude rate : 1/100,000



圖一、澳門 2021 年男性主要癌症之發病率及死亡率
 Fig.1 Incidence & Mortality Rates of Leading Cancer Sites in 2021, Macao (Male)



圖二、澳門 2021 年女性主要癌症之發病率及死亡率
 Fig.2 Incidence & Mortality Rates of Leading Cancer Sites in 2021, Macao (Female)

4. 癌症的發生隨年齡而不同?

Do cancer rates differ with AGE?

癌症發生的機率隨年齡增加而上升。20 歲以下人士發病率較低，20 歲後癌症發病率隨年齡的增加而上升，70 歲後癌症發病率明顯上升，75 歲後癌症發病率稍下跌，但女性 80 至 84 歲時又回到高位，可能因大部分癌症的篩查服務只提供至 70 歲，故不少個案在 70 歲前提早被找出，70 至 80 歲之間發病率下降，但 80 歲後又回升，符合癌症發生率隨年齡上升的趨勢。性別也會影響年齡對癌症的作用，因性別和年齡之間存在交互作用，女性在 55 歲前發病率均高於男性，55 歲後男性發病率則超越女性。

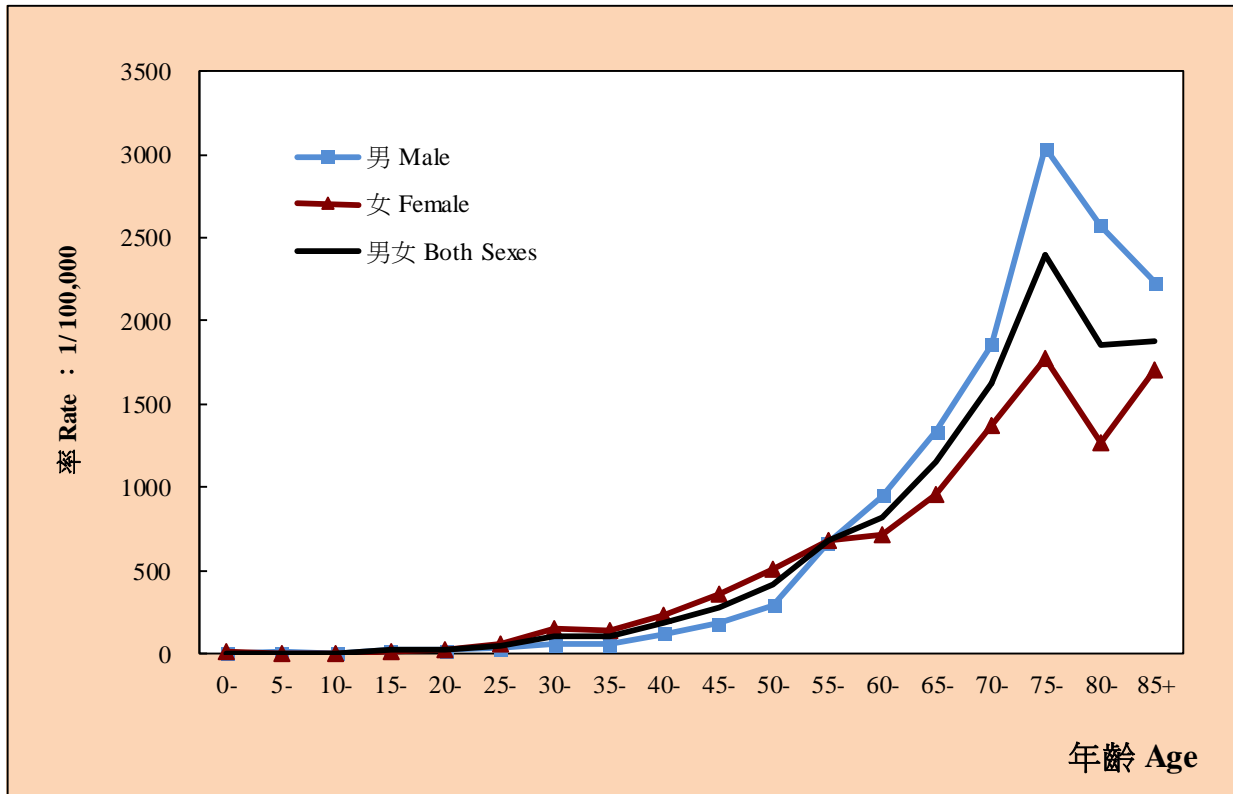
癌症死亡率同樣是隨年齡增加而上升，男性在每個年齡組的死亡率均高於女性，50 歲後兩者之間的差異更明顯。男性癌症死亡率在 65 歲後明顯上升；而女性癌症死亡率在 60 至 74 歲之間緩慢上升。

此外，不同年齡組中最常見的五類癌症有明顯差異。0 至 19 歲的癌症是以形態學進行分類。在 20 至 49 歲的青壯年群組中，最常見的癌症是女性乳癌和鼻咽癌。在 50 至 69 歲的群組中，最常見的癌症則是肺癌、女性乳癌和結腸直腸癌。而在 70 歲以上的群組中，最常見的是肺癌、結腸直腸癌、女性乳癌和前列腺癌等。

The likelihood of being diagnosed with cancer increased with age. Cancer incidence was low among those aged below 20 but climbed up gradually after 20 years of age. Cancer incidence was on the rise over the age of 70 and dropped slightly after 75, but female's incidence rose again between age 80 and 84. The reason for this may be due to most of the screening services are for citizens aged below 70, so many cancer cases were detected at the age of 70. The detection rate decreased between the ages of 70-80 but rebounded again at and above the age of 80. This complies to the trend of increasing cancer incidence with age. Sex also influences the effects of age on cancer, because there is an interaction between sex and age. Cancer incidence rates were higher among females than among males for those aged under 55, but higher among males for those aged 55 and over.

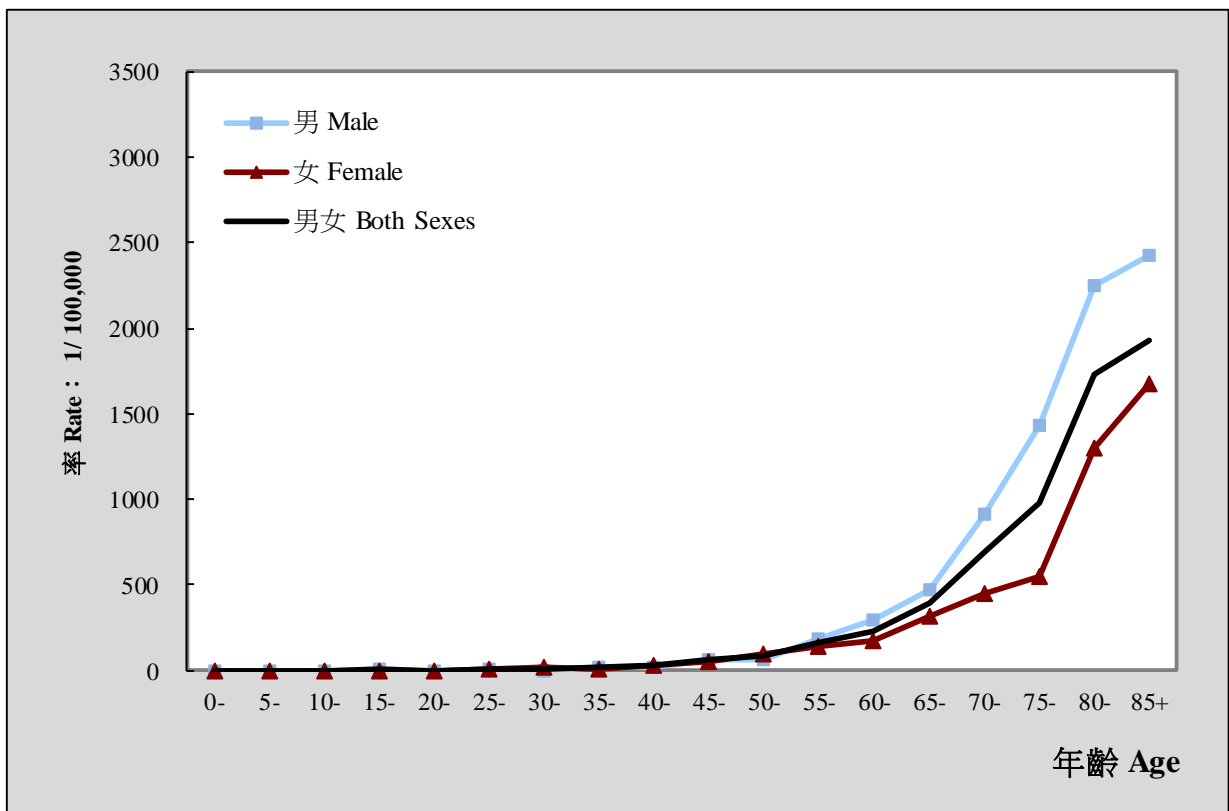
Similarly, cancer mortality increased with age. Cancer mortality rates were higher among males than among females in every age group, and the discrepancies among sexes were prominent for those over 50 years of age. The male cancer mortality rate has climbed sharply after age 65; while the female cancer mortality rate rose slightly between 60 and 74 years old.

Besides, the five commonest cancers occur in different age groups, and sex showed prominent differences. Neoplasms occurring in the 0-19-year-old group were classified by morphology. Among the age groups of 20-49, the most specific cancer sites are female breast and nasopharynx. Among the age groups of 50-69, the most familiar sites are lung, female breast and colorectal cancer. For the elderly over 70 years old, the commonest are also lung, colorectal, female breast and prostate cancer etc.



圖三、澳門 2021 年所有部位癌症之年齡組別發病率

Fig. 3 Age-specific Incidence Rate for All Sites in 2021, Macao



圖四、澳門 2021 年所有部位癌症之年齡組別死亡率

Fig. 4 Age-specific Mortality Rate for All Sites in 2021, Macao

表四、澳門 2021 年不同年齡組別和性別之前五位主要癌症 (以個案數排序)

Table 4 Five Leading Cancer Sites by Age Groups and Sex in 2021, Macao (in descending order of case number)

男性 MALE				女性 FEMALE			
0-19歲 Age 0-19 ¹	例 N	構成比% Proportion		0-19歲 Age 0-19 ¹	例 N	構成比% Proportion	
中樞神經系統及其他顱內和脊髓內腫瘤 CNS & MISCELLANEOUS INTRACRANIAL AND INTRASPINAL NEOPLASMS	1	25.0%		中樞神經系統及其他顱內和脊髓內腫瘤 CNS & MISCELLANEOUS INTRACRANIAL AND INTRASPINAL NEOPLASMS	1	33.3%	
其他及未特指的惡性腫瘤 OTHER & UNSPECIFIED MALIGNANT NEOPLASMS	3	75.0%		肝腫瘤 HEPATIC TUMORS	1	33.3%	
所有部位 ALL SITES	4	100.0%		其他及未特指的惡性腫瘤 OTHER & UNSPECIFIED MALIGNANT NEOPLASMS	1	33.3%	
所有部位 ALL SITES	4	100.0%		所有部位 ALL SITES	3	100.0%	
20-49歲 Age 20-49	例 N	構成比% Proportion		20-49歲 Age 20-49	例 N	構成比% Proportion	
鼻咽 NASOPHARYNX	19	17.4%		乳房 BREAST	76	26.1%	
甲狀腺 THYROID GLAND	12	11.0%		宮頸原位癌 CERVIX UTERI (IN SITU)	53	18.2%	
結腸、直腸及肛門 COLORECTUM	9	8.3%		甲狀腺 THYROID GLAND	45	15.5%	
肝 LIVER	9	8.3%		結腸、直腸及肛門 COLORECTUM	21	7.2%	
氣管、支氣管和肺 BRONCHUS & LUNG	7	6.4%		宮頸 CERVIX UTERI	15	5.2%	
其他部位 OTHER SITES	53	48.6%		其他部位 OTHER SITES	81	27.8%	
所有部位 ALL SITES	109	100.0%		所有部位 ALL SITES	291	100.0%	
50-69歲 Age 50-69	例 N	構成比% Proportion		50-69歲 Age 50-69	例 N	構成比% Proportion	
結腸、直腸及肛門 COLORECTUM	102	16.2%		乳房 BREAST	184	27.4%	
氣管、支氣管和肺 BRONCHUS & LUNG	94	15.0%		氣管、支氣管和肺 BRONCHUS & LUNG	102	15.2%	
前列腺 PROSTATE	90	14.3%		結腸、直腸及肛門 COLORECTUM	70	10.4%	
肝 LIVER	56	8.9%		甲狀腺 THYROID GLAND	46	6.9%	
鼻咽 NASOPHARYNX	34	5.4%		子宮體 CORPUS UTERI	30	4.5%	
其他部位 OTHER SITES	252	40.1%		其他部位 OTHER SITES	239	35.6%	
所有部位 ALL SITES	628	100.0%		所有部位 ALL SITES	671	100.0%	
70歲或以上 Age 70+	例 N	構成比% Proportion		70歲或以上 Age 70+	例 N	構成比% Proportion	
氣管、支氣管和肺 BRONCHUS & LUNG	101	20.3%		氣管、支氣管和肺 BRONCHUS & LUNG	66	17.9%	
前列腺 PROSTATE	92	18.5%		乳房 BREAST	65	17.7%	
結腸、直腸及肛門 COLORECTUM	88	17.7%		結腸、直腸及肛門 COLORECTUM	63	17.1%	
胃 STOMACH	29	5.8%		皮膚 SKIN	19	5.2%	
肝 LIVER	24	4.8%		肝 LIVER	16	4.3%	
其他部位 OTHER SITES	163	32.8%		其他部位 OTHER SITES	139	37.8%	
所有部位 ALL SITES	497	100.0%		所有部位 ALL SITES	368	100.0%	

1. 根據ICCC-3建議用型態學取代部位進行分類 Classified according to morphorlogy suggested by Intemational Classification of Childhood Cancer 3rd Edition (ICCC-3) instead of by sites

5. 癌症隨時間改變的情況?

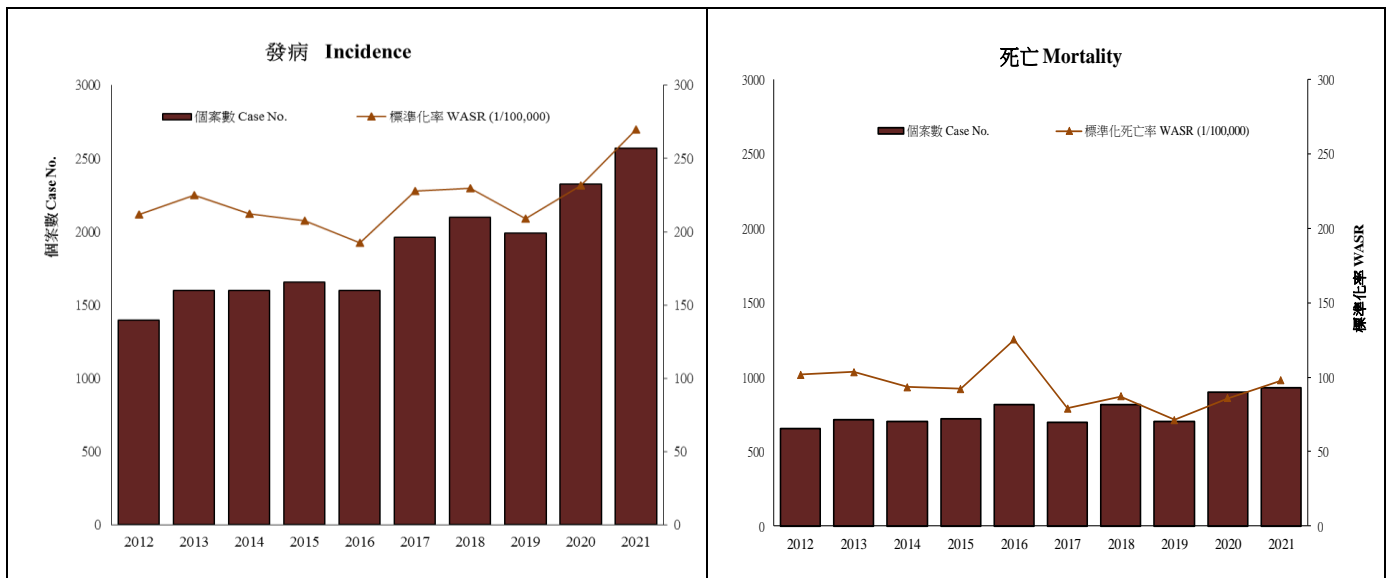
How has the occurrence of cancer changed over TIME?

根據數據顯示，癌症新發個案數隨人口增加而平穩上升，2021 年的新增個案數和發病率為近十年之冠，可能因新冠疫情，市民因邊境限制不方便在外地就醫，而多在澳門境內診療，致在本澳醫療系統內發現的個案數有明顯增加。

死亡個案數隨人口增加而緩慢上升，死亡率卻緩慢下降，2021 年死亡率與往年相若。

From observing the data, the number of new cases has been rising steadily with the pace of population increase. The number of new cases and the incidence rate in 2021 were the highest in the latest ten years. A possible reason may be because of the COVID-19 pandemic and according border restrictions. Citizens are inconvenient to seek medical treatment outside Macao, and more patients are diagnosed and treated in Macao. Hence, there was a prominent increase in the number of cases identified in local medical system.

The number of death cases has been rising steadily with the pace of population increase, and mortality rate tended to decrease slowly. The mortality rate in 2021 was similar to previous years.



圖五、澳門 2012 至 2021 年癌症發病及死亡情況

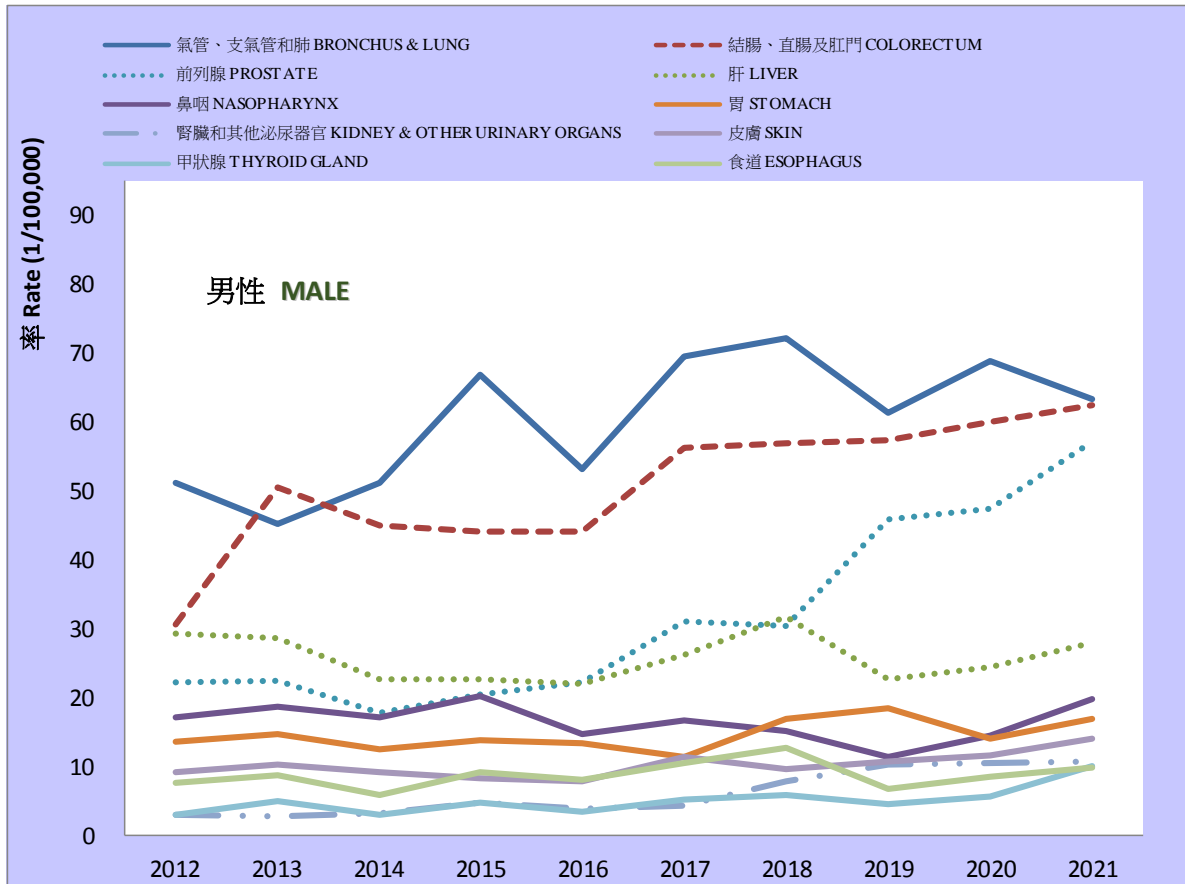
Fig 5. Common Cancers and Cancer Deaths of Macao 2012 to 2021

5.1 常見癌症的情況又怎樣？

What about the occurrence of most commonly diagnosed cancers?

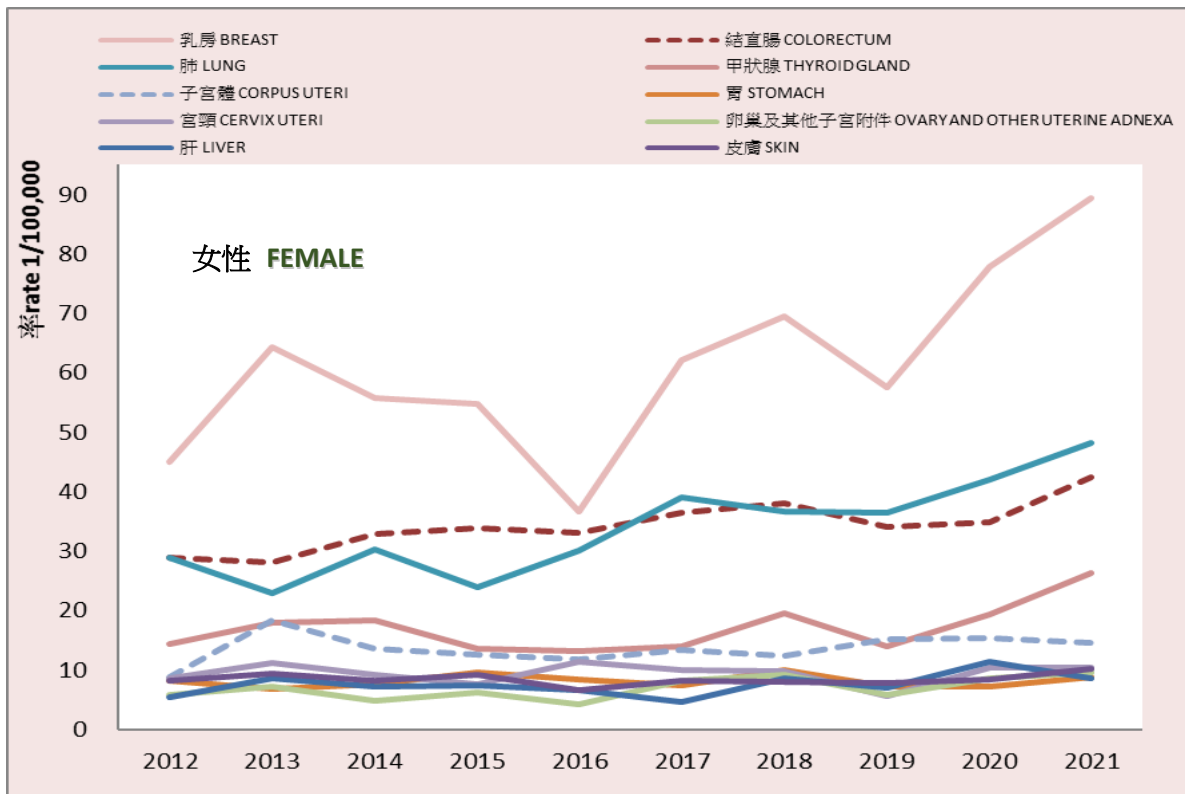
在 2021 年，前十位常見癌症中，男性肺癌和結腸直腸癌的發病率均緩慢地上升。2017 至 2021 年結腸直腸原位癌的數字均上升，可能由於 2016 年底開展了結腸直腸癌的篩查而引起。女性乳癌的發病率在 2020 年開始有反升趨勢，須持續留意和關注趨勢的發展。

Among the top 10 leading common cancers of 2021, the top leading cancers of males, including colorectal and lung cancers, showed a gradual rising incidence over time. The number of colorectal in situ carcinomas is rising in 2017 to 2021, which may be related to the promotion of colorectal cancer screening launched in late 2016. Incidence of breast cancer in women seems to have an upward trend started in 2020. This trend and development are worthy of being attended consistently.



圖六、澳門 2021 年前十位常見癌症發病率於 2012 至 2021 年之變化

Fig 6. Yearly Change of 2021 Macao Top 10 Leading Common Cancers' Incidence Rates over 2012 and 2021

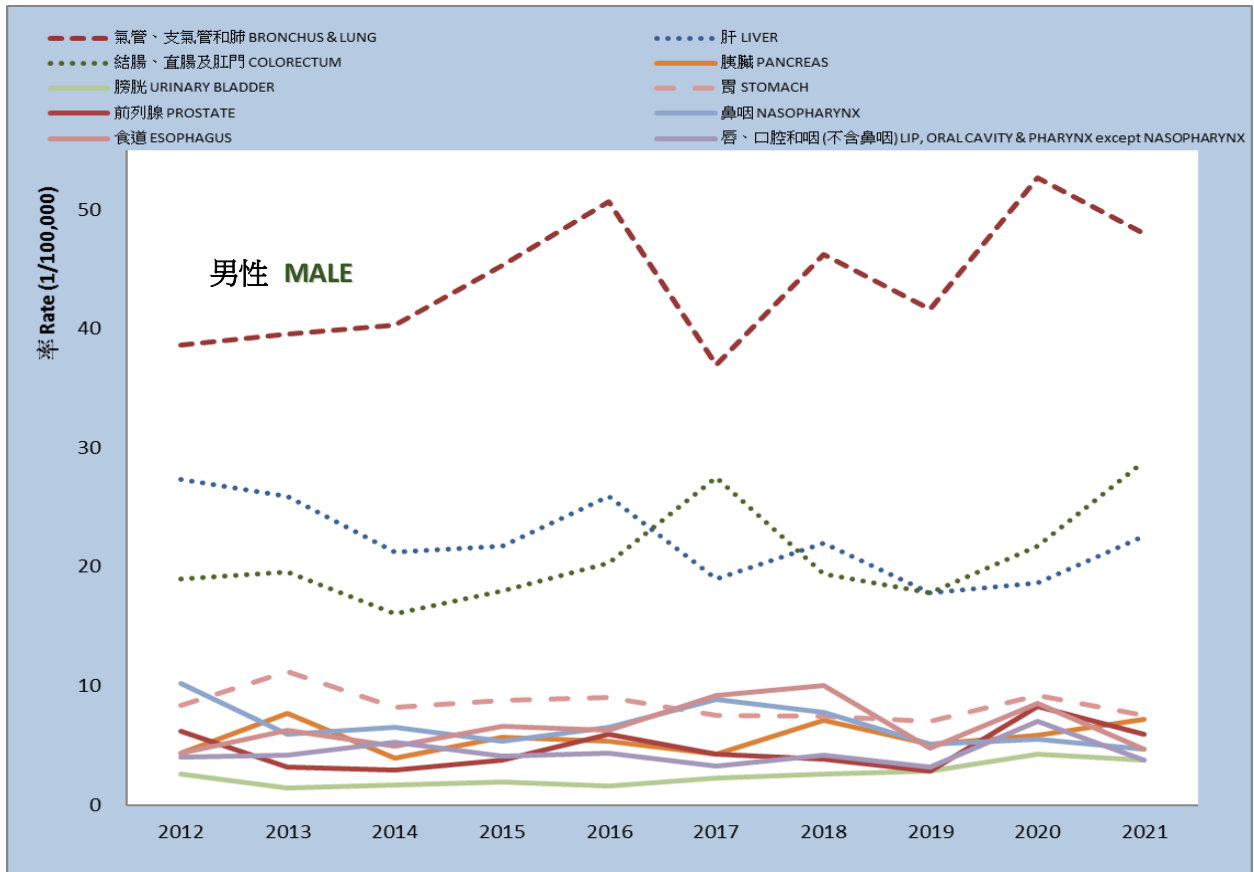


5.2 常見致死癌症的情況又怎樣？

What about the occurrence of the commonest cancers of death?

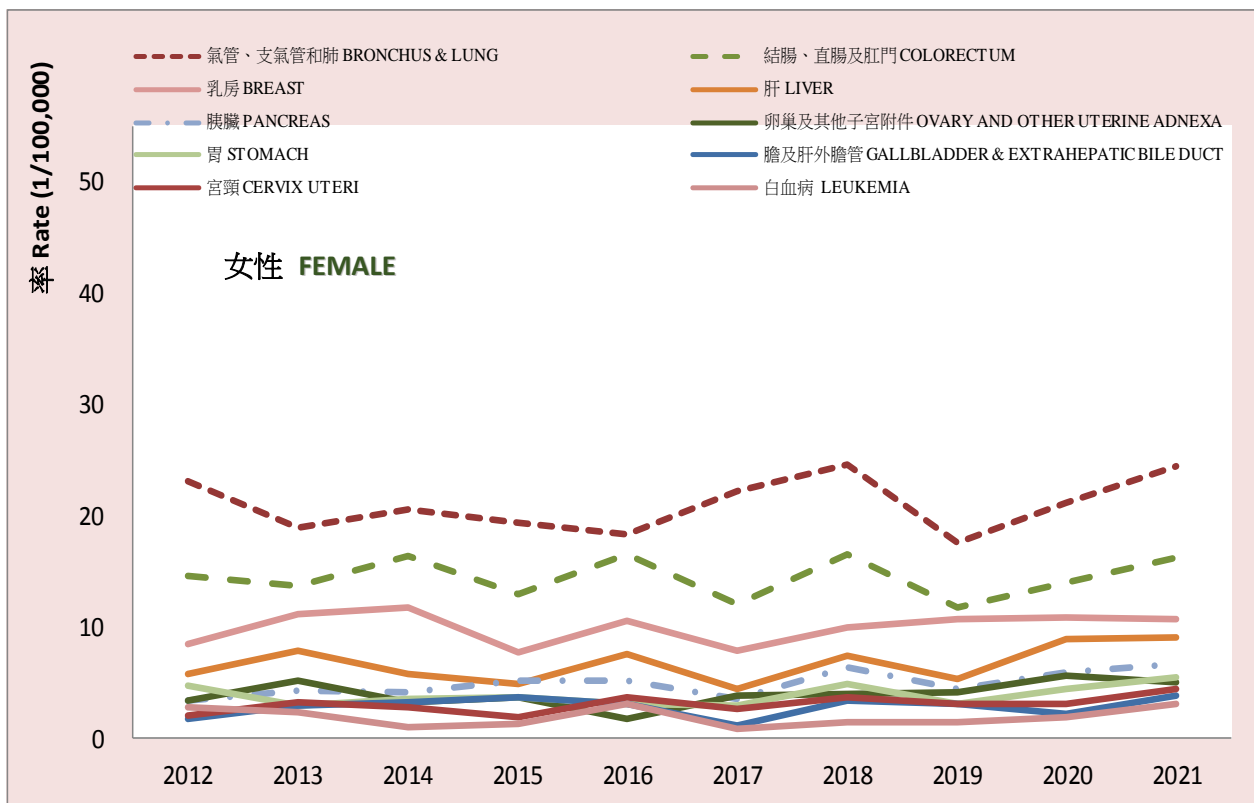
男性和女性的前十位致死癌症死亡率在 2003 至 2021 年間的變化不大，均在同一水平範圍內變動，主要原因是本澳人口少，每個部位癌症死亡個案數相對不多，只有數十例個案，導致每年的隨機性變異均產生較大的波動。

The mortality rates of common fatal cancers did not change prominently among both males and females over 2003 to 2021. Though the lines seem floating up and down, they fluctuated within a bounded level. Since the population of Macao is small, the death number of each cancer site was not many, accounting to only a few tens in quantity, so even a reasonable random variance of each year may cause a fluctuation in the mortality rates.



圖七、澳門 2021 年前十位致死癌症死亡率於 2012 至 2021 年之變化

Fig 7. Yearly Change of 2021 Macao Top 10 Leading Fatal Cancers' Mortality Rates over 2012 and 2021



致謝 *Acknowledgements*

癌症登記工作小組衷心感謝各位工作夥伴，在澳門癌症登記系統的開展、建立和運作階段持續給予積極的支持和配合，及提供寶貴的意見，為癌症登記工作擔當重要的導航角色；同時，非常感謝鏡湖醫院和科大醫院對本登記系統的支援，及持續為我們提供申報資料的各醫護人員、科室及電腦部的工作人員。特別感謝醫護人員在百忙中抽出寶貴時間填寫申報表，讓本登記系統的資料更豐富及詳盡。

工作小組期盼各醫護人員及相關部門繼續支持本澳的癌症登記系統，踴躍申報和提出寶貴意見。

The task force would like to express our gratitude to all partners in the working group of the cancer registry. They provide full support and cooperation during the initiation, establishment and implementation stages of the registration system. They played a navigating role and have offered valuable comments and advice during the whole process of the cancer registry. Besides, we would like to thank our two local hospitals for their continuous support and cooperation. We are thankful to all clinicians, nurses, administrative staffs and technical staffs of the information management service, who have been so loyal and helpful in consistently providing the comprehensive and valuable information required for registration. Special thanks to the clinicians and staff who reported using standard forms for their selfless action in sharing their time and effort in the interest of the details and completeness of the information for surveillance and research.

Continuous support to our local cancer registry, reporting or delivering comments and suggestions, is highly appreciated.

申報及查詢 *Report & enquiry*

申報表格可向衛生局索取，表格格式為 674，或從衛生局網頁下載 (www.ssm.gov.mo)。如對癌症申報有疑問，歡迎隨時與我們聯絡：

The standard reporting forms are available from the Health Bureau. The format number is 674. Alternatively, download the documents from the website of the Health Bureau (www.ssm.gov.mo). Any enquiries concerning cancer reporting or other related matters, please feel free to contact:

澳門特別行政區政府衛生局 Health Bureau, Government of Macao SAR
疾病預防及控制中心 Center for Disease Control & Prevention (CDC)
癌症登記工作小組 Taskforce for Macao Cancer Registry
地址 Mailing address：澳門郵箱 3002 號 Macao P.O. Box: 3002
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數據引用注意事項 *Note on data use*

新發病和死亡個案的數據是反映本地醫療系統疾病負擔之重要指標。由於每年的個案數字會出現隨機波動，故觀察的時間需較長，如最少 5 年或以上的數據變動，才可提供可信和客觀的分析以及評價癌症的發病率和死亡率之趨勢。

Numbers of new cases and deaths are necessary measures of cancer burden imposed on the local healthcare system. As annual random fluctuations can occur, more reliable observation and interpretation of the trends of cancer incidence and mortality can only be made over a more extended period of at least five years or more.