

Statistics on Cancer Incidence 2021

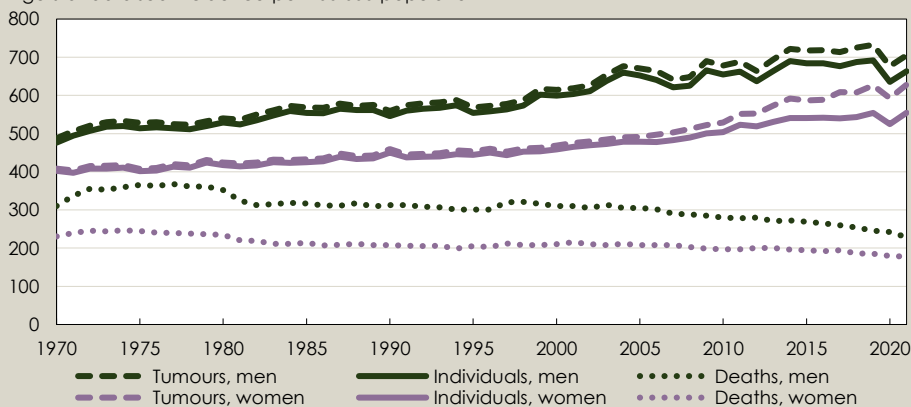
In 2021, 75,313 malignant tumours for 68,810 people were reported to the National Cancer Registry. The number of people who receive a cancer diagnosis is considerably higher than the number of deaths from cancer. The number of newly diagnosed malignant tumours has increased compared to previous years, but not for all cancer sites. For example, in 2021 there was an increase of 3.9 percent for the number of women with breast cancer, and a decrease of 8.2 percent for the number of men with prostate cancer compared to the three year average prior to the Covid-19 pandemic.

Incidence and mortality over time

Figure 1 shows the incidence rates for all causes of cancer (per capita and per tumour) and cancer mortality for the years 1970–2021. The measures are given in numbers per 100,000 residents and are age standardized. The number of new cases, both number of people and tumours, has increased since 1970, while the mortality has decreased. There was a decrease in the number of new cases for 2020, which was described in last year's publication, most probably, as a Covid-19 pandemic effect. For the year 2021, an increase in newly diagnosed cancer was observed for both men and women compared to 2020. It is likely that the pandemic still exerted an effect on newly diagnosed cancer for 2021. The number of newly diagnosed tumours was not exceptionally large, which would have been the case if those tumours that were not diagnosed in 2020 were detected in 2021. The implications might be that a larger amount of people than usual would have undiagnosed cancer by the end of 2021. It is impossible, however, to draw such conclusions with great certainty, because of the delay in reporting newly-diagnosed tumours to the National Cancer Registry.

Figure 1. Incidence and mortality in cancer. Number of newly diagnosed tumours, individuals, and cancer deaths

Age standardised incidence per 100 000 population

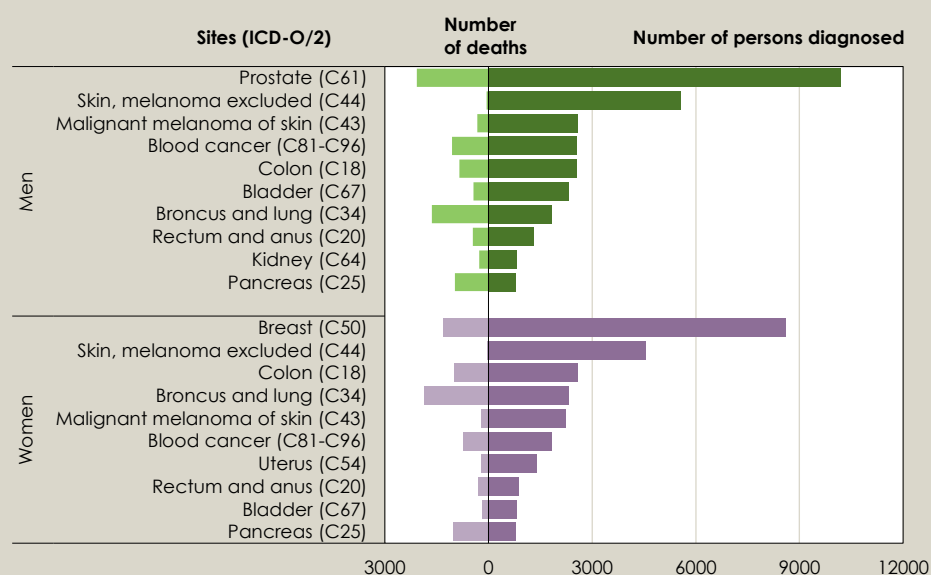


Source: The National Cancer Registry and the National Cause of Death Registry.
The National Board of Health and Welfare

The most common types of cancer

Figure 1 shows the number of people diagnosed with cancer during 2021 for the 10 most common types of cancer, as well as the number of deaths where the different types of cancer are the underlying cause of death. Breast cancer is the most common type of cancer among women. In 2021, 8,619 women were diagnosed with breast cancer and 1,326 women died with breast cancer as the underlying cause of death. The number of newly diagnosed women with breast cancer increased by 3.9 percent, compared to the average of the three years prior to the start of the pandemic in 2020 (see the Excel tables). Prostate cancer is the most common cancer among men. During 2021, 10,199 men were diagnosed with prostate cancer and 2,077 men died from it. The number of newly diagnosed men with prostate cancer decreased by 8.2 percent compared to the average during 2017–2019. Lung cancer was the largest cause of cancer deaths among women, with 1,873 deaths in 2021. Lung cancer caused 1,638 deaths among men in 2021. Note that the people who died from cancer in a certain year could have had their cancer diagnosed several years earlier. Comparing the incidence for one year with the mortality for the same year still gives a general idea of mortality in relation to the incidence of various types of cancer.

Figure 2. The ten most common cancer sites, 2021
Number of persons diagnosed and number of deaths



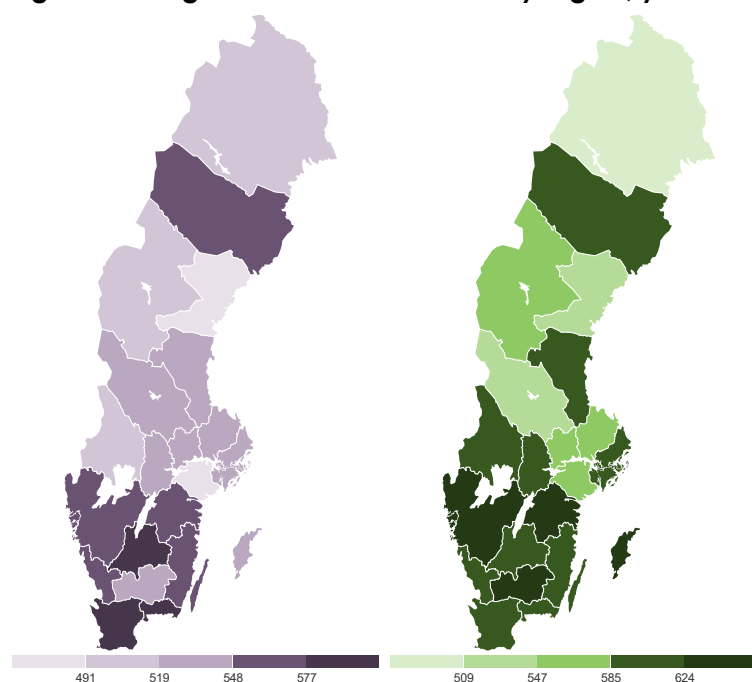
* The group includes lymphomas, leukemias and related cancers.

Source: The Swedish Cancer Registry and Cause of Death Registry, The National Board of Health and Welfare

Regional differences in cancer incidence and mortality

Figure 3 shows the regional distribution of age standardised malignant cancer incidence. Skin tumours that are not malignant melanoma have been excluded from these figures. Non-melanoma skin cancer has low mortality and disease burden but relatively high incidence. Besides, these cancers have a strong relationship with sun exposure, which is higher in the south of Sweden compared to the northern parts. This pattern would otherwise overshadow other regional differences in cancer incidence. The observed results show a relatively high incidence for women in Skåne (605.0 per 100,000 population), Blekinge (591.2), and Jönköping (588.4). For men, higher incidence was observed in Gotland (661.9), Östergötland (657.6), Västra Götaland (626.2) and Kronoberg (625.8). Lower incidence was observed for women in Västernorrland (462.3) and Södermanland (483.1), and for men in Norrbotten (470.7), Dalarna (542.6), and Västernorrland (544.0).

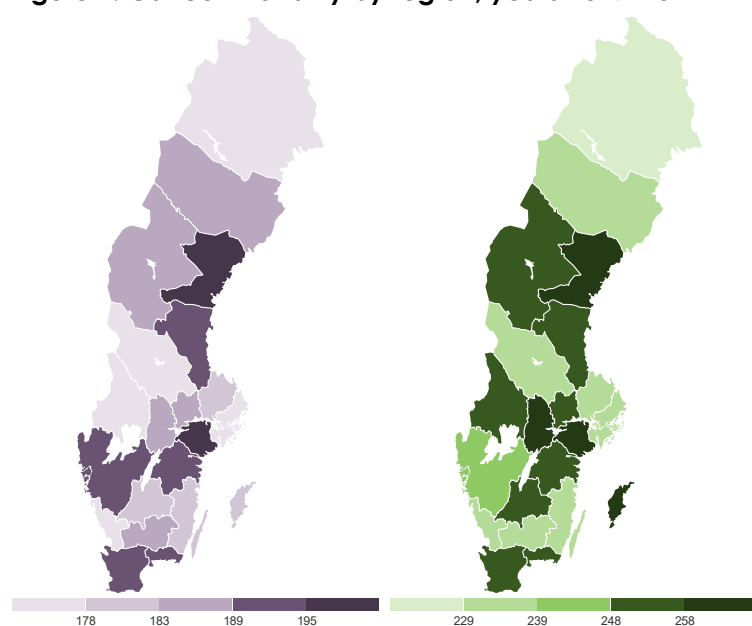
Figure 3. Malignant cancer incidence by region, years 2017–2021



Note: Age standardised cancer incidence per 100,000 population, without skin tumours, non-malignant melanoma (ICD-10; C44). Source: The Cancer Registry, The National Board of Health and Welfare.

Figure 4 shows a regional distribution in age-standardised cancer mortality (ICD-10 koder: C00–D48). Because mortality in non-malignant skin tumours only marginally affects the regional distribution, these tumours were included in the maps shown below. For women, highest mortality was observed in Södermanland (200.1 per 100,000 population) and Västernorrland (196.0); for men the highest mortality was observed in Västernorrland (267.7), Örebro (261.2), and Södermanland (258.1). Lowest mortality was observed for women in Värmland (172.1), Halland (172.9), Norrbotten (175.3), Stockholm (175.8), and Dalarna (176.7). Among men, lowest mortality was observed in Norrbotten with 219.2 deaths per 100,000 population.

Figure 4. Cancer mortality by region, years 2017–2021



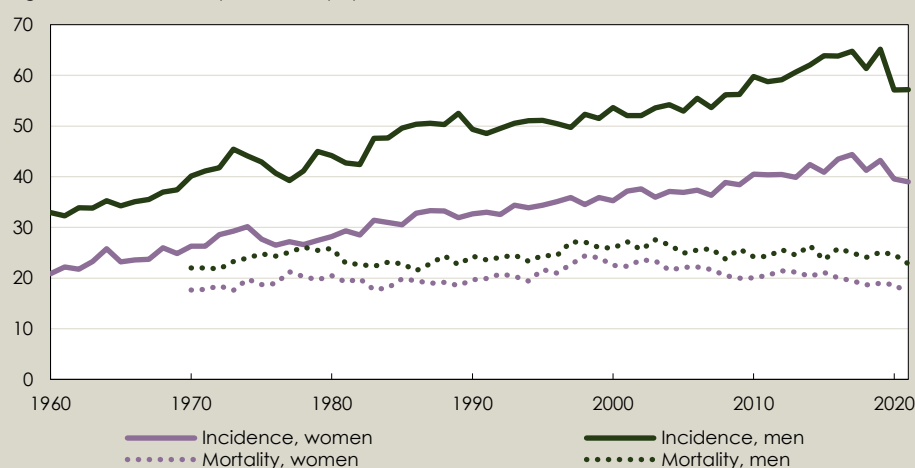
Note: Age standardised cancer mortality per 100,000 population. Source: The National Cause of Death Registry, The National Board of Health and Welfare

Hematologic cancer

Figure 5 shows hematologic cancer as a group (other names often used are hematologic malignancies and blood cancer, ICD-10: C81–C96), and includes lymphoma, leukemia, and myeloma. Age-standardised incidence has doubled from 1969 to the period before 2020. Age-standardised mortality has been at a relatively stable level since 1970, even though hospital care and survival rates have improved substantially since that time. Because there is a substantial delay in diagnosing these cases, the decrease that is observed for 2021 should not be interpreted as a change in trend. The year 2020, however, does stand out with unusually low numbers of newly diagnosed blood cancers.

Figur 5. Hematologic cancer. Incidence and mortality, men and women, 1960–2021

Age standardised rate per 100 000 population



Note: 16,7 percent of newly diagnosed hematologic tumours had a date of diagnosis before 2021

Source: The National Cancer Registry and The National Cause of Death Registry. The National Board of Health and Welfare.

Further information

More tables, graphs and other information are available in the Excel file:
www.socialstyrelsen.se/en/statistics-and-data/statistics/

You can produce your own tables and graphs with our Statistical Database:
www.socialstyrelsen.se/en/statistics-and-data/statistics/statistical-databases/

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