

Incidence of sarcomas of the facial skeleton

Sarcomas of the facial skeleton are rare tumours the management of which should be overseen by a specialist multidisciplinary team (MDT). There are, however, no national statistics on the incidence of facial sarcomas. Although cancer registries record all cancers diagnosed in England, limitations in ICD-10 coding mean that, whilst sarcomas of the mandible are recorded as C41.1, sarcomas of the face cannot be distinguished from sarcomas of the back of the skull which are both coded as C41.0. Audits of cancer registry and Hospital Episode Statistics (HES) data allow the incidence of these tumours to be estimated by distinguishing facial sarcomas from those of the back of the skull.

KEY MESSAGE:

Approximately 25 primary tumours of the facial skeleton are diagnosed in England annually. However, statistics cannot be validated until coding systems are adapted to further reflect sub-sites.

Cases were identified as facial sarcomas by examining locally held pathology data and operational information found in HES for words indicating a tumour's occurrence in facial bones, such as maxilla, nose or orbit. Osteosarcoma, chondrosarcoma, and ameloblastoma were the most predominant diagnoses to the facial skeleton. Figure 1 shows the proportion of sarcomas that were identified from each audit as 'facial' or 'not facial'. The latter group consists of sarcomas relating to the cranium or cases for which no distinguishing information was present.

Figure 1: Proportion of facial sarcomas according to audits of West Midlands cancer registration and HES data

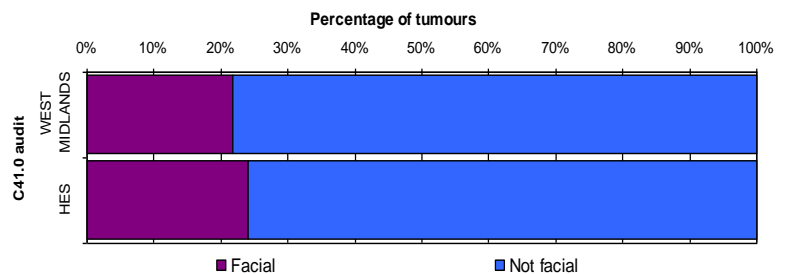
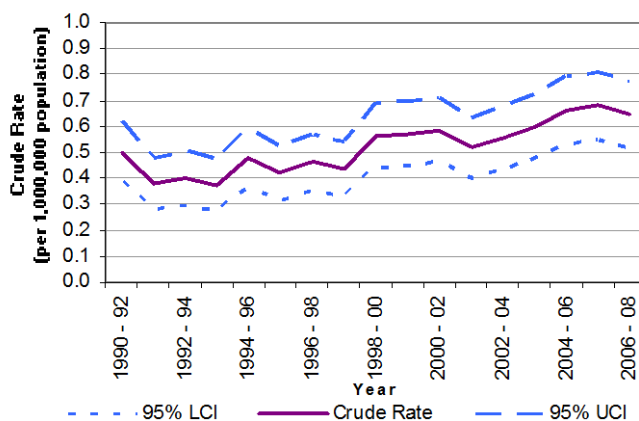


Figure 2: Three year rolling average incidence rates of facial sarcomas (including mandible) based on audits of West Midlands and HES data



The average number of facial sarcomas recorded in England each year in the National Cancer Data Repository over the 19 year period 1990-2008 is 26 (range 13 to 39). Similar results were obtained using HES and locally held pathology data. Crude annual incidence rates of facial sarcomas are shown in Figure 2, with an average rate of 0.5 cases per million population. These rates are based on the average of the incidence estimates from the two sources.

These predictions based on West Midlands data cannot be validated at national level until standard coding systems are able to further reflect sub-sites.

FIND OUT MORE:

West Midlands Cancer Intelligence Unit

The WMCIU is the National Cancer Intelligence Network lead cancer registry for sarcomas

<http://www.wmpho.org.uk/wmciu>

The National Cancer Intelligence Network is a UK-wide initiative, working to drive improvements in standards of cancer care and clinical outcomes by improving and using the information collected about cancer patients for analysis, publication and research. Sitting within the National Cancer Research Institute (NCRI), the NCIN works closely with cancer services in England, Scotland, Wales and Northern Ireland. In England, the NCIN is part of the National Cancer Programme.