



## Non-melanoma skin cancers in England

# National Cancer Intelligence Network Data Briefing

### Background

While many people have heard of melanoma of the skin, fewer people are aware of non-melanoma skin cancer (NMSC), which is far more common but less often fatal. This data briefing summarises information about NMSC in England in order to highlight its considerable impact.

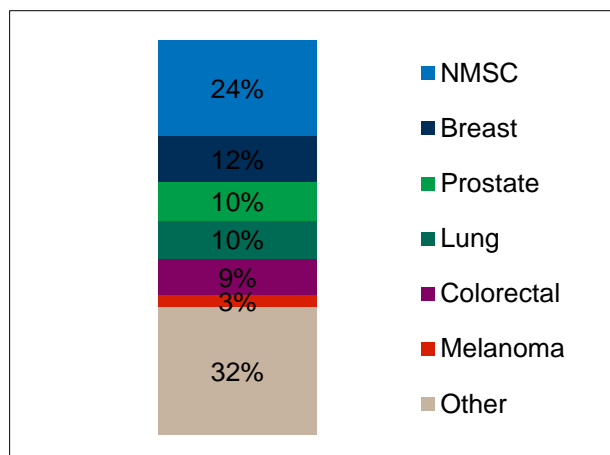
### Incidence of non-melanoma skin cancer

Non-melanoma skin cancer is the most common type of cancer, but because it is rarely fatal many cancer registries do not register all cases. NMSC accounted for nearly a quarter (24%; over 86,500 tumours) of all new malignancies recorded in England in 2010 (see Figure 1), which is similar to the proportion in Northern Ireland and Ireland, where all new cases are recorded. The incidence of NMSC has increased by over 40% in England over the last decade, partly due to improved recording. The two major types of NMSC are basal cell carcinoma (around 75% of all NMSC) and squamous cell carcinoma (over 20%). Only the first tumour of each type is recorded by the national cancer registry in England; however, patients often have multiple tumours so the true incidence is likely to be much higher than that reported here. The main risk factors for NMSC are ultraviolet (UV) radiation exposure from the sun and sunbeds, fair skin, age, a weakened immune system (eg following immunosuppressive medication or radiotherapy) and a family history of NMSC.

### Key messages

- non-melanoma skin cancer accounted for nearly 24% of skin cancer diagnoses in England in 2010
- treatment mostly involves surgical excision, which can be disfiguring and may require skin grafts for larger areas. In very extreme circumstances, amputation is necessary to prevent spreading
- check suspicious lesions with your GP as soon as possible to avoid the distress

Figure 1: Percentage of new diagnoses of different cancers, England, 2010



Source: NCDR

Figure 2: Examples of basal cell (top left; more advanced) and squamous cell (bottom left and right) carcinomas.

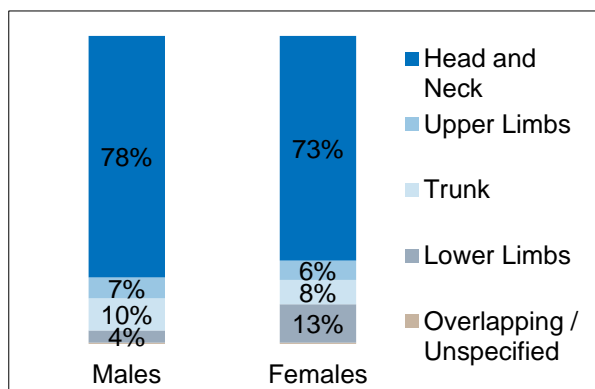


Source: Klaus D. Peter for Wikimedia

### Treatment for non-melanoma skin cancers

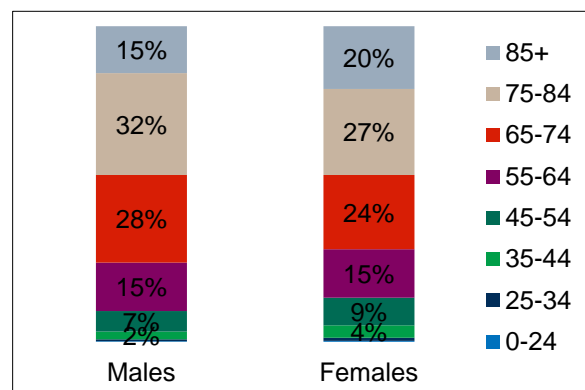
NMSC is rarely fatal; however, some patients require complex surgery. Nearly 80% of NMSC day case and inpatient admissions involve surgical excision of the tumour. Because most NMSC is on the head and neck (Figure 3), surgery can have significant consequences for patients' appearance and self-esteem. Non-melanoma skin cancer can appear like a shiny red lump or a cut that does not heal (Figure 2), and people do not always report this to their GP immediately. Where the cancer has spread over a sizeable area, surgery may be followed by a skin 'graft' from another part of the body to cover the excised area. This can take time to heal, especially among the predominantly elderly population with NMSC (Figure 4). In extreme circumstances and particularly for squamous cell carcinomas, which can metastasize if left untreated, surgery to prevent spreading may involve amputation of a finger, toe or larger part of a limb (there were over 110 amputations for NMSC in 2011).

Figure 3: Percentage of treated NMSCs at different anatomical locations, by sex, England, 2011



Source: Inpatient HES

Figure 4: Percentage of new NMSC diagnoses at different age groups (years), by sex, England, 2010



Source: NCDR

## Conclusion

Non-melanoma skin cancers are the most common group of cancers in England. While not generally fatal, their management can involve serious surgery which can have a negative impact on patients. Due to their high and increasing incidence, this also places a significant burden on health services in England.

With low mortality rates, non-melanoma skin cancers are often overlooked when compared to the more fatal melanoma. This data briefing demonstrates that a strong focus on prevention and early diagnosis of non-melanoma skin cancer could relieve many people from the significant distress associated with serious treatment and disfigurement.

### FIND OUT MORE:

The PHE Knowledge and Intelligence Team South West is the lead KIT for urological cancer. <https://www.gov.uk/government/organisations/public-health-england> (Do you want to replace 'urological' with non-melanoma skin cancer, or something else?)

### Other useful resources within the NCIN partnership:

What cancer statistics are available and where can I find them?

<http://www.ncin.org.uk/publications/reports/>

Public Health England's National Cancer Intelligence Network (NCIN) is a UK-wide initiative, working to drive improvements in cancer awareness, prevention, diagnosis and clinical outcomes by improving and using the information collected about cancer patients for analysis, publication and research.