

Trends in Cancer incidence in rural Eastern Cape Provinces, South Africa, 1998-2012.

The National Cancer Registry of South Africa records pathology diagnoses of cancer, from laboratories around the country, and since 1990 has issued several reports, although the most recent was for 2004 (<http://www.afcrn.org/membership/members/87-ncrsa>). Currently, the only population-based cancer registry is in the former Transkei region of the Eastern Cape Province of South Africa, founded in the early 1980s. Originally focused on esophageal cancer, in 1998 the registry expanded its scope (to collect data on all cancers), and geographic coverage.

Material and Methods

The registry collects data on cancer cases resident in the eight magisterial areas from all hospitals in which they are likely to have been diagnosed (and treated), both within the surveillance area as well as the major public sector centres to the north and south of it, to which patients from the area would be expected to be referred. In total, 15 hospitals (eight district, six referral) and a regional laboratory under the National Health Laboratory Services (NHLS) are used in case finding. Data are manually abstracted from the records and include demographic variables, tumor characteristics including the site, type and behaviour.



Population

The 1996, 2001 and 2011 censuses provide age-sex specific counts of the population of each of the eight magisterial areas.⁵ The annual rates of change (by age, sex and area) in between these years were used to prepare annual estimates for 1998–2000, 2002–2010, and (based on annual change 2001–2011) for 2012.



Results

The biggest change in cancer incidence over the 15 year period is the marked increase in Kaposi sarcoma. However, despite the high prevalence of HIV in the region incidence rates are surprisingly low when compared to sub-Saharan Africa and southern Africa rates. In both Uganda (Kampala) and Zimbabwe (Harare), the incidence of Kaposi sarcoma has declined in the last decade, coinciding with a decline in HIV prevalence and increasing availability of anti-retroviral therapy.

Conclusions

There are few data on temporal trends of cancer in Africa, and these are the only ones to document changes in incidence in a rural population. Current wisdom is that, with westernization of lifestyles (tobacco use, dietary habits, fertility, body weight, physical

activity), there will be an increase in the incidence of cancers common in populations of European origin (breast, large bowel, lung).