Overview of Hong Kong Cancer Statistics of 2022

About the Hong Kong Cancer Registry

The Hong Kong Cancer Registry ("HKCaR") is a population-based registry committed to conducting routine cancer surveillance through the systematic collection, analysis, interpretation and dissemination of information on all diagnosed cases of cancer from both public and major private hospitals and laboratories in Hong Kong. Robust cancer registry data provide the foundation for governments to prioritise resources in cancer control according to the burden of various cancers in the communities. This information is also essential for healthcare planners and researchers in developing healthcare policies aimed at improving the quality of cancer care, prioritising costly cancer treatments, and implementing cost-effective cancer prevention strategies, such as cancer screening programmes and other public health interventions.

This report is a compilation of the latest available cancer statistics for 2022 in Hong Kong, along with survival and prevalence statistics for major cancers, intended for local cancer surveillance. In recent years, the HKCaR has also enhanced the collection and compilation of more comprehensive cancer surveillance data, including complete and accurate stage-specific data on ten prevalent cancers in Hong Kong, analyses of the stage-specific survival rates of these cancers, and the consolidation and release of the most common biomarkers for three cancers. Stage-specific survival reports for ten common cancers have already been released. This year's report on liver cancer, along with reports on breast, colorectal, gynaecological (including cervical, corpus uteri and ovarian), nasopharyngeal, prostate, thyroid and lung cancers released in previous years, is available on the HKCaR's website.

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Key points at-a-glance

- In 2022, Hong Kong recorded 35,373 new cancer cases (18,134 females and 17,239 males). Overall, new cases decreased by 8% compared to 2021, likely due to unusual patterns in cancer testing and diagnosis during the fifth wave of COVID-19. On average, 97 new cases were diagnosed each day.
- The five most common cancers were Lung cancer (5,707 cases), breast cancer (5,208 cases), colorectal cancer (5,190 cases), prostate cancer (2,758 cases) and liver cancer (1,612 cases), together accounting for 58% of all new cases in 2022. For the first time, breast cancer (including male breast cancer) surpassed colorectal cancer to become the second most common cancer.
- After adjusting for age, the overall cancer incidence trends appear stable among men, while an increasing trend has been observed among women over the past decade. With the ageing and growing population, the number of cancer cases is expected to rise substantially in the near future.
- The risk of dying from cancer has continued to decline for both genders, although the mortality rate in females has decreased less than in males. Overall, this indicates that our healthcare delivery system is still making progress against cancer.
- The overall 5-year survival rate for cancer patients has steadily increased over the past two decades, rising from 42% in the early 2000s to nearly 55% in recent years. Today, about one in every 30 people in Hong Kong is living with or has survived cancer in the past 20 years. This group of survivors is likely to have ongoing healthcare needs throughout their journey.
- Surveillance data emphasise the importance of early cancer detection and treatment to enhance survival. For many cancers diagnosed at an early stage, the 5-year survival rate is 90% or above. The 5-year survival rates for certain cancers diagnosed at stage I, such as female breast cancer, prostate cancer, and thyroid cancer, are nearly identical to those of the general population without cancer.

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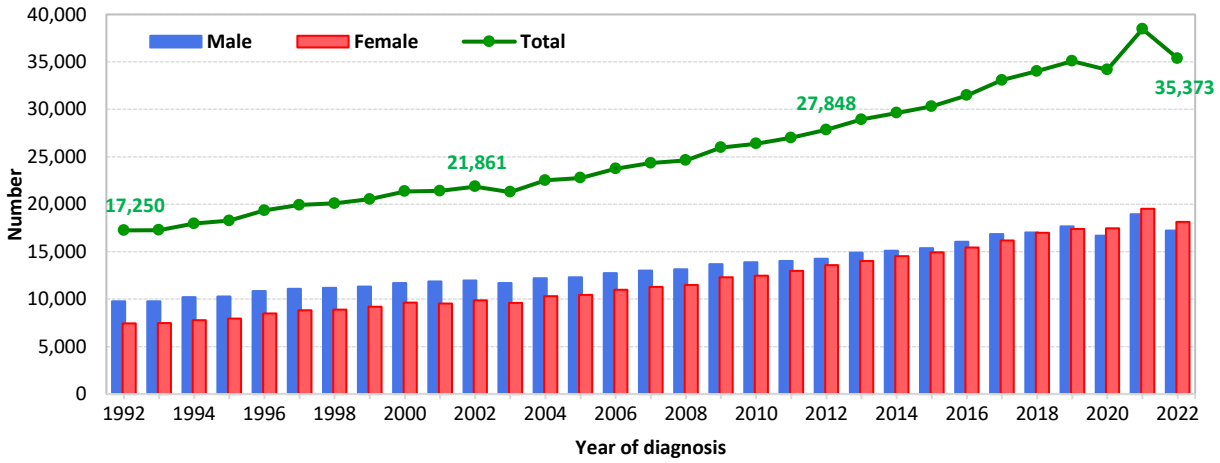
Chapter 1. Number of people diagnosed with/ dying from cancer

Incidence and Mortality by gender, year and cancer type

1.1 In 2022, there were 35,373 new cases of cancer diagnosed in Hong Kong, of which 51.3% (18,134 cases) were women and 48.7% (17,239 cases) were men. On average, 97 new cases were diagnosed with cancer each day. The crude incidence rates of all cancers were about 482 per 100,000 (514 for men and 454 for women).

1.2 The number of new cancer cases in 2022 was 3,089 (or 8%) fewer than in 2021, but it was higher than the number reported in 2020. The chart below shows the annual figures since 1992, indicating a general upward trend, except for the years 2020 and 2022 (**Figure 1**). However, the incidence numbers for these years should be interpreted with caution, as they may be influenced by atypical patterns in cancer testing and diagnoses during the fifth wave of COVID-19. Nevertheless, more women than men have been diagnosed with cancer since 2020, and this gap in 2022 was slightly larger than in the previous two years.

Figure 1. Cancer incidence in Hong Kong since 1992



1.3 Over half (58%) of cancers fall into five categories. Lung cancer (5,707 cases) was the most commonly diagnosed cancer in Hong Kong. Breast cancer, including male breast cancer (5,208 cases), surpassed colorectal cancer (5,190 cases) to become the second most common cancer for the first time, followed by prostate cancer (2,758 cases) and liver cancer (1,612 cases), respectively.

1.4 In men, the five most common cancers were Lung cancer (3,340 cases), colorectal cancer (2,928 cases), prostate cancer (2,758 cases), liver cancer (1,173 cases) and stomach cancer (720 cases), accounting for 63.3% of all new cancers in men.

1.5 In women, breast cancer (5,182 cases) was still the most common cancer, followed by lung cancer (2,367 cases), colorectal cancer (2,262 cases), corpus uteri cancer (1,188 cases) and thyroid cancer (820 cases). These five cancers accounted for 65.2% of all new cancers in women.

1.6 Over the past three decades, the number of new cancer cases has doubled at an average annual rate of 2.4%. During the same period, the overall population grew slowly at an annual rate of 0.8%, while the population aged 65 and older increased at a rate of 3.6% per year.

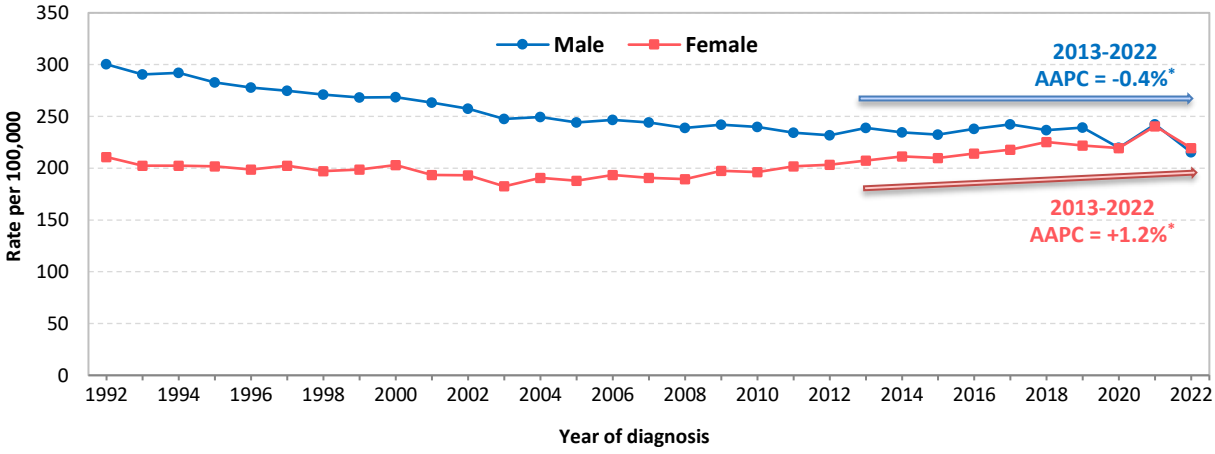
1.7 The distribution and ranking of the five leading cancers have remained relatively stable over the past decade. The largest increases in the number of new cases were observed in prostate cancer and breast cancer, which rose by 69% and 48%, respectively. Conversely, the number of new cases of liver cancer decreased by 10% over this period (**Table 1**).

Table 1. Leading new cancers (both genders combined)

Cancer type	2012		2022		*Cumulative change (%)*
	Number	Rank	Number	Rank	
Lung	4,610	1	5,707	1	*+23.8%*
Breast	3,522	3	5,208	2	*+47.9%*
Colorectum	4,563	2	5,190	3	*+13.7%*
Prostate	1,631	5	2,758	4	*+69.1%*
Liver	1,790	4	1,612	5	*-9.9%*
All cancers	**27,848**	**-**	**35,373**	**-**	***+27.0%***

1.8 Over the years, the increases in the overall number of new cancer cases in Hong Kong can largely be attributed to the population ageing and growth, as well as changes in cancer risks such as improvements in diagnostic practices and the implementation of cancer control programmes and awareness initiatives. After adjusting for changes in population composition, the age-standardised incidence rates for all cancers have remained relatively stable in men and have increased slightly in women over the past decade. Compared to 2021, the age-standardised incidence rates declined by 11.1% in males and 8.8% in females in 2022. However, these rates were similar for both genders in 2020 (**Figure 2**).

Figure 2. Age-standardised incidence rates of all cancers, 1992-2022



Rates are standardised to the Segi's world standard population (Segi, 1960).

- Average Annual Percent Change (AAPC) is used to summarise the trends over the past decade (2013-2022).

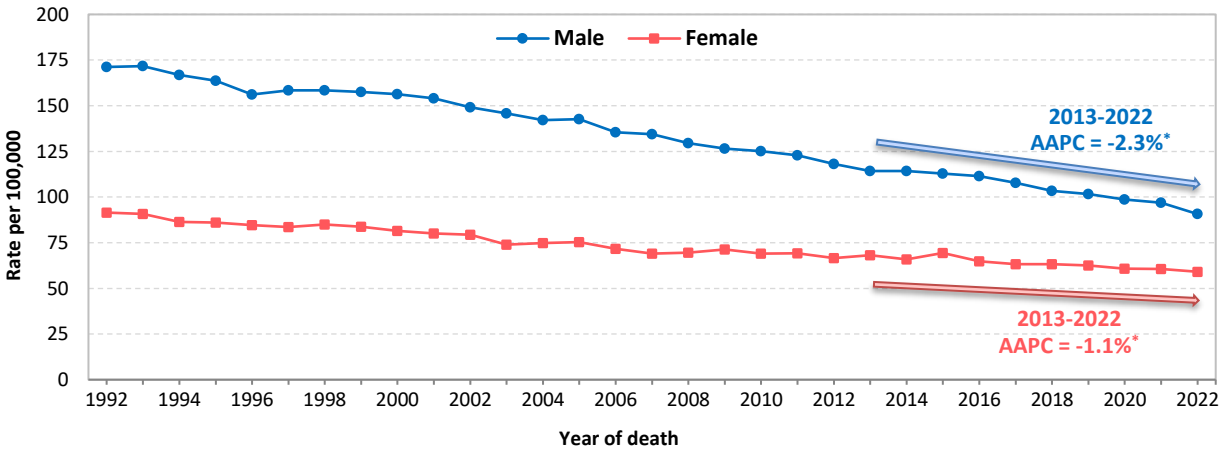
* Statistically significant change in trend ($p<0.05$)

1.9 For many years, cancer has been the leading cause of death in Hong Kong. In 2022, the number of deaths from cancer was 14,717, with an average of 40 people dying from the disease each day. Almost 57% of cancer deaths occurred in men. Compared to 2021, there were 391 fewer cancer deaths recorded in 2022.

1.10 The cancers causing the most deaths in 2022 were lung cancer (3,782 deaths), followed by colorectal cancer (2,270 deaths) and liver cancer (1,412 deaths), which together accounted for just over half (50.7%) of all cancer deaths. Pancreatic cancer (920 deaths) and breast cancer (804 deaths) ranked fourth and fifth, respectively.

1.11 Over the past three decades. the overall cancer mortality rates have been decreasing for both men and women after accounting for demographic changes. The age-standardised mortality rates from cancer have fallen, showing a significant decrease of 2.3% per year for men and 1.1% for women in the recent decade. This indicates that our cancer care delivery system is still making progress against cancer (**Figure 3**).

Figure 3. Age-standardised mortality rates of all cancers, 1992-2022



Rates are standardised to the Segi's world standard population (Segi, 1960).

- Average Annual Percent Change (AAPC) is used to summarise the trends over the past decade (2013-2022).

* Statistically significant change in trend ($p<0.05$)

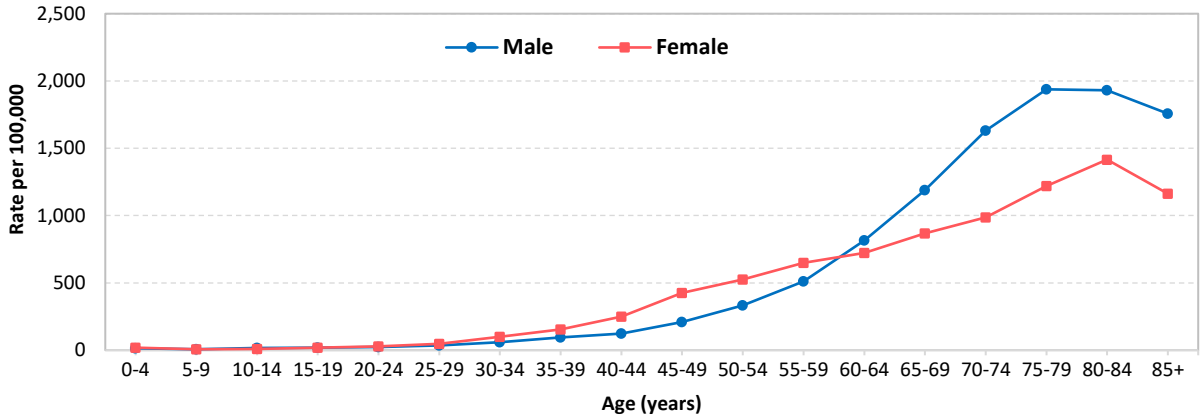
1.12 The ten cancers with the highest number of new cases diagnosed and cancer deaths by gender in 2022 are presented in **Appendix I**.

Chapter 2. Age of cancer onset

Incidence by gender and age

2.1 The risk of developing cancer increases with age for both genders. Females have higher cancer incidence rates than males between the ages of 30 and 59. However, males exhibit significantly higher age-specific rates starting around 60 years of age (**Figure 4**).

Figure 4. Age-specific cancer incidence rates, all sites combined by gender, in 2022



2.2 The median age at diagnosis was 66 years (69 years for males and 64 years for females). This means that half of the cancer cases occurred in individuals younger than this age, while the other half occurred in those older than this age.

2.3 Cancer in children and adolescents is rare, accounting for about 0.5% of all cancer cases each year. In 2022, there were 141 newly diagnosed cancer cases among children and adolescents under the age of 20, with 75 cases in males and 66 cases in females. The most common cancers were leukaemia (47 cases), germ cell and gonadal cancers (21 cases), and malignant brain and spinal tumours, as well as lymphomas (17 cases each). These four types of cancer accounted for 72% of all cases in this age group.

2.4 A person's risk of developing or dying from cancer is age-dependent. Based on the statistics from 2022,

- about 1 in 4 men and 1 in 5 women will likely develop cancer by the age of 75.
- about 1 in 10 men and 1 in 17 women will likely die from cancer by the age of 75.

2.5 The relative frequency of the five most common cancers by gender and age groups in 2022 is shown in **Appendix II**.

Chapter 3. Probability of surviving cancer

Relative survival by cancer type and trend over time

3.1 Cancer survival serves as an indicator of prognosis at the population level and is also used to assess the effectiveness of treatments provided. The stage at diagnosis is a crucial prognostic factor for individuals diagnosed with cancer. In response, the HKCaR has enhanced the collection and compilation of stage and clinicopathological information on more prevalent cancers, thereby improving the comprehensiveness of surveillance data. This includes providing stage information, relative survival rates and specific clinicopathological data for some common cancers at the population level in recent years.

3.2 In Hong Kong, the 5-year relative survival rate (hereafter referred to as "survival") for all cancer sites combined has steadily increased over the past two decades, rising from 41.9% for the period 2002-2004 to 54.9% for 2017-2021. This rate is generally higher among females than males across all time periods. Among females, the 5-year survival rose from 49.1% for 2002-2004 to 60.8% for 2017-2021. Among males, the 5-year survival also increased from 36.0% for 2002-2004 to 48.3% for 2017-2021.

3.3 Among the common cancer types analysed for the period between 2010 and 2021, the 5-year survival was the highest for thyroid cancer (91.5%), followed by prostate cancer and female breast cancer (84% each), while it was lowest for lung cancer (21.8%) and liver cancer (29.5%) (**Table 2**).

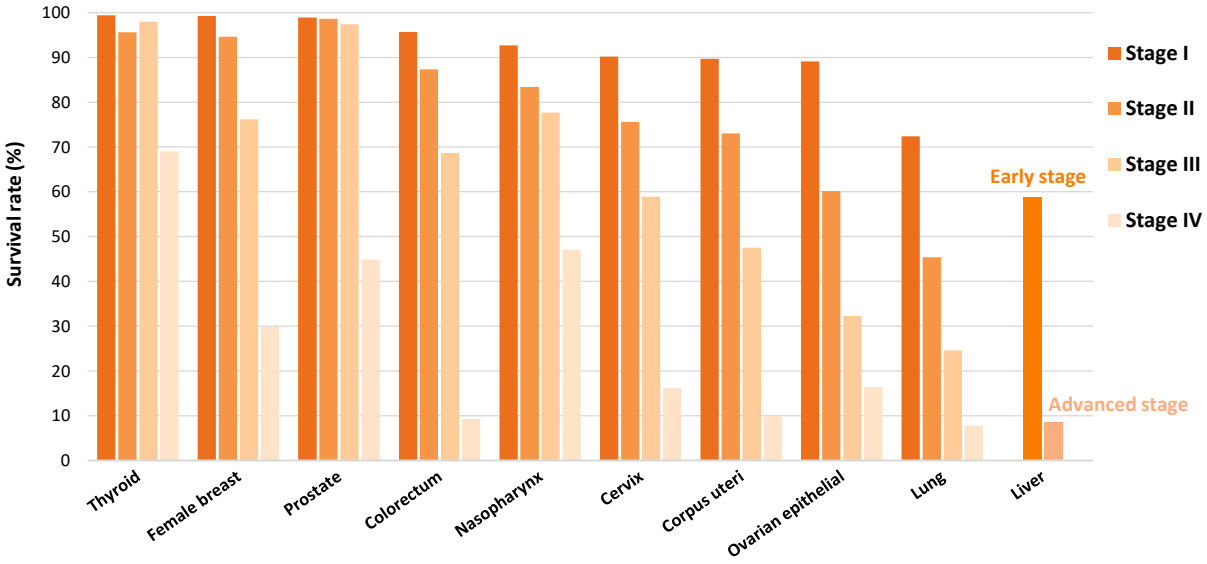
Table 2. Overall one- and five-year relative survival rates for common cancers

Cancer type	Period of diagnosis	Number of cases*	Relative survival 1-year	Relative survival 5-year
High 5-year survival				
Thyroid	2010-2019	7,630	95.7%	91.5%
Prostate	2010-2019	18,330	96.7%	84.0%
Female breast	2010-2017	28,470	96.1%	84.0%
Intermediate 5-year survival				
Corpus uteri	2010-2018	7,870	87.9%	70.4%
Nasopharynx	2010-2018	7,300	89.3%	68.7%
Cervix	2010-2018	4,120	87.3%	65.8%
Colorectum	2010-2017	37,790	81.4%	58.2%
Ovarian epithelial	2010-2018	3,710	78.3%	44.5%
Low 5-year survival				
Liver	2010-2021	22,250	54.2%	29.5%
Lung	2010-2020	54,400	54.0%	21.8%

* Numbers are rounded to the nearest ten.

3.4 Survival rates vary significantly across different cancer types and are influenced by the stage of cancer at diagnosis. Among the ten common cancers for which stage data are currently available, the 5-year survival is close to 100% for people diagnosed at stage I with thyroid, female breast and prostate cancers. This suggests that people diagnosed with these early-stage cancers are as likely to survive five years after diagnosis as those in a similar population without cancer. Additionally, the 5-year survival is close to or exceeds 90% for colorectal, nasopharyngeal, cervical, corpus uteri and ovarian epithelial cancers when diagnosed at stage I (**Figure 5**).

Figure 5. Five-year relative survival for common cancers by stage at diagnosis

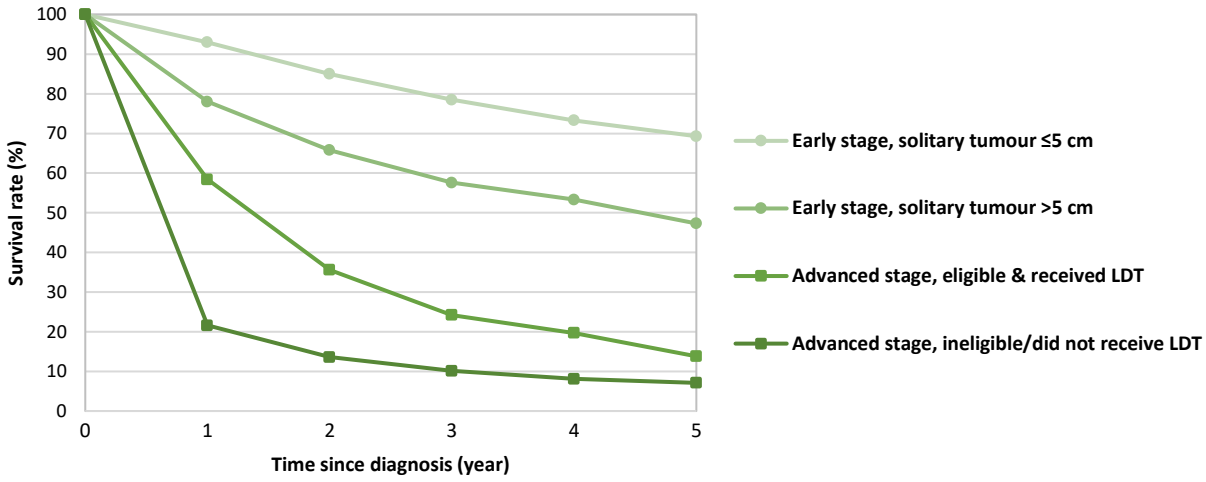


- The term "Ovarian epithelial" includes fallopian tubes and primary peritoneal cancers.

3.5 This year, the HKCaR conducted a survival study involving over 22,000 liver cancer patients diagnosed between 2010 and 2021. The overall 5-year survival for liver cancer during this period was close to 30%. Among the two most common types of liver cancer, patients with hepatocellular carcinoma ("HCC") had better 5-year survival (31.8%) compared to those with intrahepatic bile duct carcinoma (11.0%).

3.6 The 5-year survival rate for patients with HCC has been improving in recent years, rising from 27.4% in 2010-2012 to 35.1% in 2016-2021. Among 9,650 patients with HCC for which stage data were compiled between 2016 and 2021, the 5-year survival rates for early-stage and advanced-stage HCC were 58.8% and 8.7%, respectively. Although the prognosis for advanced-stage HCC is relatively poor, the 5-year survival rates for patients who were eligible and received liver-directed therapies (13.8%) was nearly double that of those who were ineligible or did not receive liver-directed therapies (7.1%) during the period 2016-2021 (**Figure 6**).

Figure 6. One- to five-year relative survival for liver cell carcinoma by stage group, 2016-2021



3.7 Since 2019, the HKCaR has published overall and stage-specific survival data for ten types of prevalent cancers: female breast, colorectal, nasopharyngeal, cervical, corpus uteri, ovarian, thyroid, prostate, lung and liver cancers. These have covered nearly 70% of all new cancer cases. For more details, please refer to the relevant reports on the HKCaR's website.

Chapter 4. Number of people living with cancer

Cancer prevalence by type and gender

4.1 Cancer prevalence measures the number of people who have been diagnosed with cancer and are still alive at a specific point in time. Regardless of whether they are still receiving treatment, this group is likely to have ongoing healthcare needs throughout their journey.

4.2 At the start of 2022, just over 242,000 people in the population had been diagnosed with cancer in the previous 20 years, which is referred to as "20-year prevalence". This means that about one in every 30 people in Hong Kong is living with or beyond cancer. Breast cancer was the most prevalent, affecting 54,680 people, followed by colorectal cancer (41,450 people), gynaecological cancers (24,800 people), prostate cancer (20,550 people) and lung cancer (17,110 people) (**Table 3**).

4.3 Among men, colorectal cancer (23,000 people) was the most prevalent cancer, followed by prostate cancer (20,550 people). Among women, breast cancer (54,420 people) was the most prevalent type, followed by gynaecological cancers (24,800 people), which include cervical, corpus uteri and ovarian cancers.

Table 3. 20-year prevalence estimates for all cancers, and the most common cancers, as of 1 January 2022

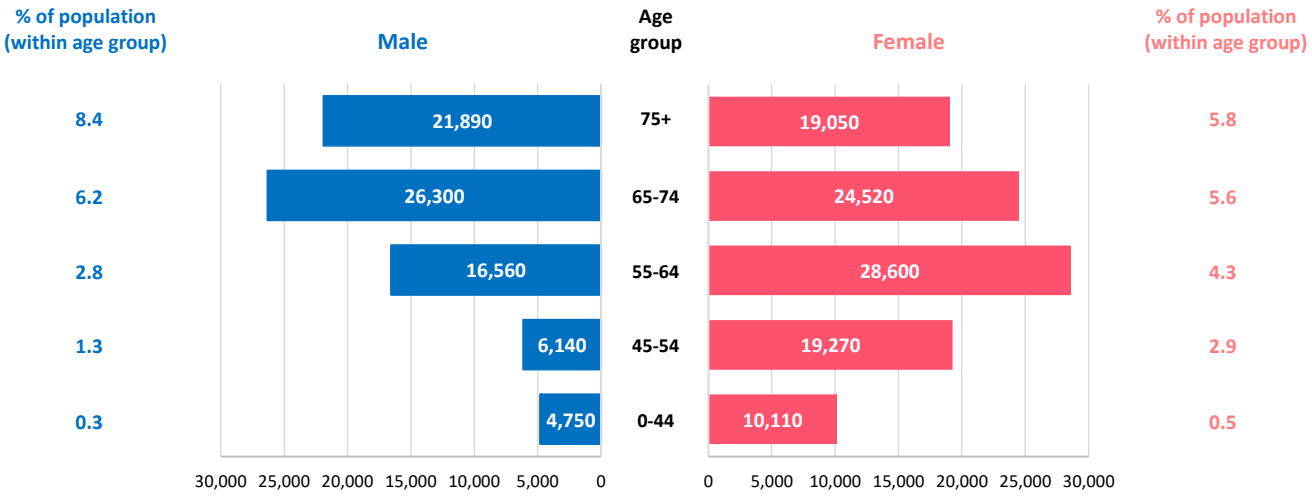
Cancer type	Male*	Female*	Both*	% of total	Persons per 1,000
Breast	250	54,420	54,680	22.6%	7.4
Colorectum	23,000	18,450	41,450	17.1%	5.6
Gynaecologic#	-	24,800	24,800	10.2%	6.2
Prostate	20,550	-	20,550	8.5%	6.1
Lung	8,520	8,590	17,110	7.1%	2.3
Thyroid	2,500	10,590	13,080	5.4%	1.8
Non-melanoma skin	5,470	5,360	10,820	4.5%	1.5
Nasopharynx	7,160	2,990	10,140	4.2%	1.4
Non-Hodgkin lymphoma	4,340	4,000	8,340	3.4%	1.1
Liver	6,220	1,910	8,130	3.4%	1.1
Stomach	3,500	2,760	6,260	2.6%	0.8
Kidney & other urinary organs	3,930	2,170	6,100	2.5%	0.8
Pancreas	720	720	1,440	0.6%	0.2
All cancers	**99,400**	**142,660**	**242,050**	**100%**	**32.7**

The term "cancer of gynaecologic" includes cervical, corpus uteri, and ovarian cancers.

* Counts are rounded to the nearest 10.

4.4 People diagnosed with cancer in the previous ten years ("10-year prevalence") generally place the greatest burden on the healthcare system. At the beginning of 2022, about 177,210 people were alive after being diagnosed within the previous ten years. The majority (77.3%) of these cases were in people aged 55 and over. Notable differences were observed between genders: the most prevalent age group for men was 65-74 years, while for women, it was the younger age group of 55-64 years. This difference is likely due to the peak incidence of early-stage female breast and gynaecological cancers in the 55-64 age group, along with a more favourable prognosis for these cancers (**Figure 7**).

Figure 7. Number of people living with cancer in the past 10 years, by gender and age group, as of 1 January 2022



Appendix I. Leading Cancer Sites in Hong Kong in 2022

10 Most Common Cancers

Male

Rank	Site	No. of new cases	Relative frequency	Crude incidence rate*	Median age (yr)
1	Lung	3,340	19.4%	99.6	70
2	Colorectum	2,928	17.0%	87.3	69
3	Prostate	2,758	16.0%	82.2	71
4	Liver	1,173	6.8%	35.0	66
5	Stomach	720	4.2%	21.5	72
6	Non-Hodgkin lymphoma	567	3.3%	16.9	66
7	Kidney & other urinary organs except bladder	562	3.3%	16.8	65
8	Pancreas	537	3.1%	16.0	69
9	Non-melanoma skin	535	3.1%	15.9	71
10	Nasopharynx	522	3.0%	15.6	57
	All sites	**17,239**	**100%**	**513.9**	**69**

Female

Rank	Site	No. of new cases	Relative frequency	Crude incidence rate*	Median age (yr)
1	Breast	5,182	28.6%	129.8	58
2	Lung	2,367	13.1%	59.3	68
3	Colorectum	2,262	12.5%	56.7	69
4	Corpus uteri	1,188	6.6%	29.8	57.5
5	Thyroid	820	4.5%	20.5	51
6	Ovary & Peritoneum	603	3.3%	15.1	56
7	Stomach	552	3.0%	13.8	68
8	Non-Hodgkin lymphoma	533	2.9%	13.4	65
9	Cervix	522	2.9%	13.1	56
10	Pancreas	500	2.8%	12.5	71
	All sites	**18,134**	**100%**	**454.3**	**64**

Both sexes

Rank	Site	No. of new cases	Relative frequency	Crude incidence rate*	Median age (yr)
1	Lung	5,707	16.1%	77.7	70
2	Breast	5,208	14.7%	70.9	59
3	Colorectum	5,190	14.7%	70.6	69
4	Prostate	2,758	7.8%	82.2	71
5	Liver	1,612	4.6%	21.9	68
6	Stomach	1,272	3.6%	17.3	70
7	Corpus uteri	1,188	3.4%	29.8	57.5
8	Non-Hodgkin lymphoma	1,100	3.1%	15.0	66
9	Thyroid	1,049	3.0%	14.3	53
10	Pancreas	1,037	2.9%	14.1	70
	All sites	**35,373**	**100%**	**481.5**	**66**

10 Major Causes of Cancer Deaths

Male

Rank	Site	No. of deaths	Relative frequency	Crude mortality rate*	Median age (yr)
1	Lung	2,405	28.6%	71.7	72
2	Colorectum	1,291	15.4%	38.5	72
3	Liver	1,005	12.0%	30.0	70
4	Prostate	519	6.2%	15.5	81
5	Pancreas	472	5.6%	14.1	71
6	Stomach	380	4.5%	11.3	75
7	Oesophagus	229	2.7%	6.8	69
8	Non-Hodgkin lymphoma	221	2.6%	6.6	73
9	Leukaemia	210	2.5%	6.3	73
10	Nasopharynx	192	2.3%	5.7	62
	All sites	**8,399**	**100%**	**250.4**	**72**

Female

Rank	Site	No. of deaths	Relative frequency	Crude mortality rate*	Median age (yr)
1	Lung	1,377	21.8%	34.5	75
2	Colorectum	979	15.5%	24.5	76
3	Breast	792	12.5%	19.8	64
4	Pancreas	448	7.1%	11.2	73
5	Liver	407	6.4%	10.2	76
6	Stomach	254	4.0%	6.4	73
7	Ovary & Peritoneum	242	3.8%	6.1	63.5
8	Non-Hodgkin lymphoma	174	2.8%	4.4	75
9	Cervix	167	2.6%	4.2	64
10	Leukaemia	158	2.5%	4.0	75
	All sites	**6,318**	**100%**	**158.3**	**72**

Both sexes

Rank	Site	No. of deaths	Relative frequency	Crude mortality rate*	Median age (yr)
1	Lung	3,782	25.7%	51.5	73
2	Colorectum	2,270	15.4%	30.9	74
3	Liver	1,412	9.6%	19.2	72
4	Pancreas	920	6.3%	12.5	72
5	Breast	804	5.5%	10.9	64
6	Stomach	634	4.3%	8.6	74
7	Prostate	519	3.5%	15.5	81
8	Non-Hodgkin lymphoma	395	2.7%	5.4	74
9	Leukaemia	368	2.5%	5.0	74
10	Oesophagus	286	1.9%	3.9	72.5
	All sites	**14,717**	**100%**	**200.3**	**72**

* All rates are expressed per 100,000 population. Rates for gender-specific sites are per 100,000 male or female population.

The figures on deaths are based on deaths registered under the Births and Deaths Registration Ordinance (Cap. 174, Laws of Hong Kong).

Appendix II. Five Most Common Cancers by Gender and Age Group in 2022

Male			Female		
Age 0-19*			**Age 0-19***		
Site	**No. of cases**	**% of all sites**	**Site**	**No. of cases**	**% of all sites**
Leukaemia	24	32.0%	Leukaemia	23	34.8%
Brain & spinal tumours	12	16.0%	Germ-cell & gonadal tumours	14	21.2%
Lymphoma	8	10.7%	Lymphoma	9	13.6%
Germ-cell & gonadal tumours	7	9.3%	Carcinomas & epithelial neoplasms	8	12.1%
Soft tissue sarcoma	6	8.0%	Brain & spinal tumours	5	7.6%
Carcinomas & epithelial neoplasms	6	8.0%			
All sites	**75**	**100%**	**All sites**	**66**	**100%**
Age 20-44			**Age 20-44**		
Site	**No. of cases**	**% of all sites**	**Site**	**No. of cases**	**% of all sites**
Colorectum	112	15.0%	Breast	692	37.7%
Nasopharynx	105	14.0%	Thyroid	257	14.0%
Testis	66	8.8%	Corpus uteri	119	6.5%
Thyroid	54	7.2%	Cervix	115	6.3%
Lung	44	5.9%	Ovary & Peritoneum	104	5.7%
Non-Hodgkin lymphoma	44	5.9%			
All sites	**749**	**100%**	**All sites**	**1,834**	**100%**
Age 45-64			**Age 45-64**		
Site	**No. of cases**	**% of all sites**	**Site**	**No. of cases**	**% of all sites**
Lung	917	17.8%	Breast	2,754	35.9%
Colorectum	911	17.7%	Lung	865	11.3%
Prostate	554	10.7%	Corpus uteri	760	9.9%
Liver	445	8.6%	Colorectum	733	9.5%
Nasopharynx	273	5.3%	Thyroid	385	5.0%
All sites	**5,161**	**100%**	**All sites**	**7,680**	**100%**
Age 65-74			**Age 65-74**		
Site	**No. of cases**	**% of all sites**	**Site**	**No. of cases**	**% of all sites**
Prostate	1,337	21.7%	Breast	1,115	25.8%
Lung	1,261	20.4%	Lung	686	15.8%
Colorectum	1,001	16.2%	Colorectum	626	14.5%
Liver	422	6.8%	Corpus uteri	219	5.1%
Stomach	246	4.0%	Pancreas	166	3.8%
All sites	**6,172**	**100%**	**All sites**	**4,329**	**100%**
Age 75 and Over			**Age 75 and Over**		
Site	**No. of cases**	**% of all sites**	**Site**	**No. of cases**	**% of all sites**
Lung	1,117	22.0%	Colorectum	804	19.0%
Colorectum	904	17.8%	Lung	761	18.0%
Prostate	866	17.0%	Breast	620	14.7%
Stomach	281	5.5%	Non-melanoma skin	245	5.8%
Liver	264	5.2%	Liver	199	4.7%
All sites	**5,082**	**100%**	**All sites**	**4,224**	**100%**

* The classification of cancers in children and adolescents (0-19 years) is based on the morphology according to the "International Classification for Childhood Cancer, Third edition (IARC 2017).", rather than the site of tumour.

Notes on the use of data:

1. Cancer surveillance data are important parameters to measure the burden of cancer on local healthcare system. One should keep in mind that the figures are subject to random fluctuations from year to year. Experience tells us that a more reliable comment on the trends in various indicators can only be made after observing over a longer period or preferably at least 5 years or more.

2. The survival statistics are based on the information of cancer patients who were diagnosed in the past and may not reflect individual situation.

3. Assessment of trends in data for the years between 2020 and 2022 should be interpreted with caution due to the impact of the COVID-19 epidemic on people's health-seeking behaviour and healthcare activities in the community.

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For more cancer statistics, including access to the Cancer Statistics Query System (CanSQS), please visit our website: https://www3.ha.org.hk/cancereg