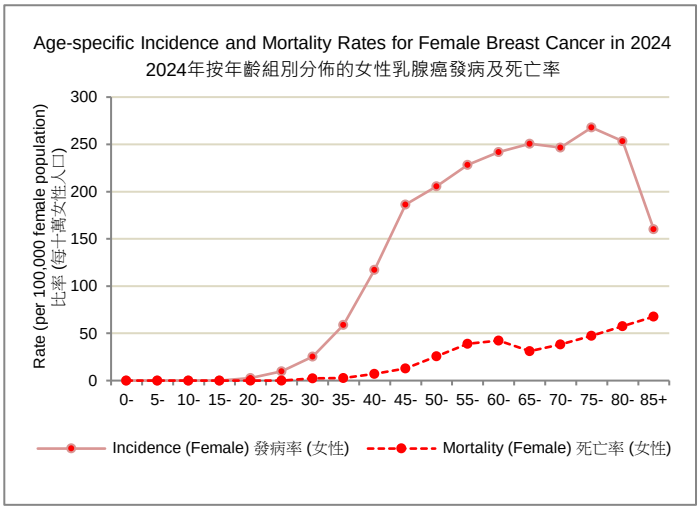
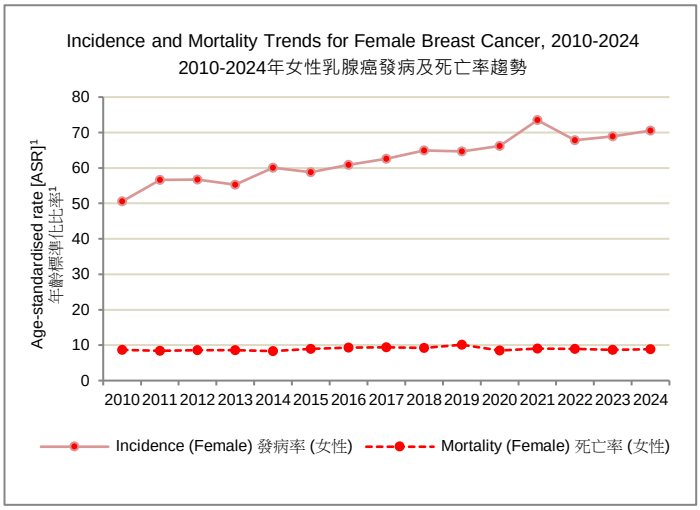
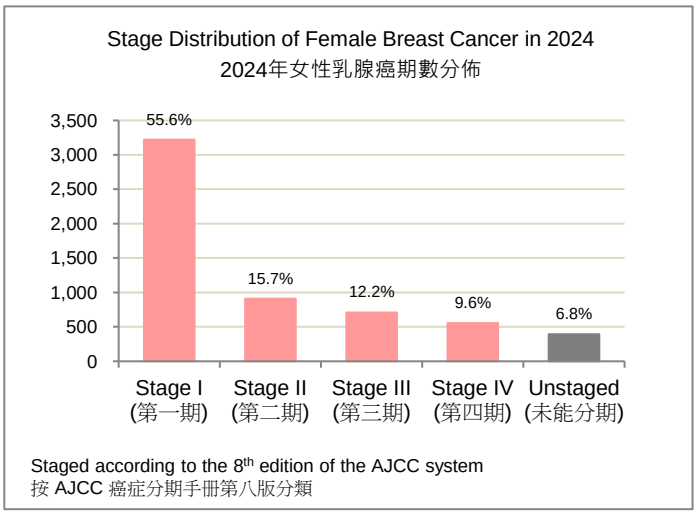
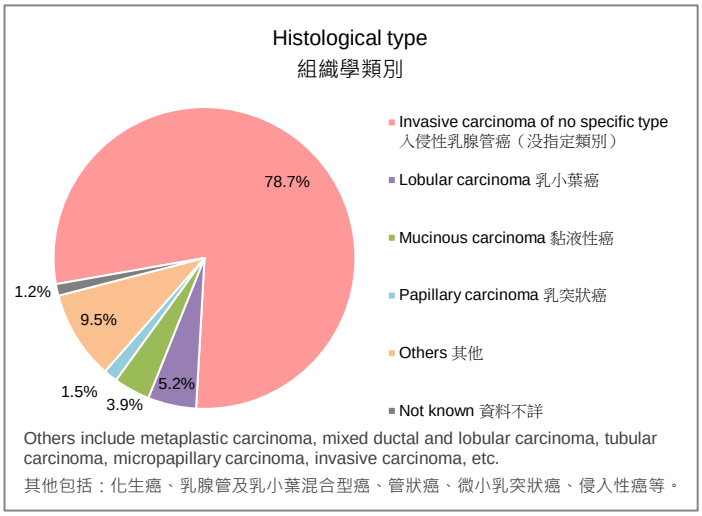
Female Breast Cancer in 2024
2024年女性乳腺癌統計數字

	Incidence 發病	Mortality 死亡
Number of cases registered 登記個案數目	5,789	848
Rank 排名	1	3
Proportion of all cancers 佔總數百分比	28.5%	13.1%
Median age (years) 年齡中位數 (歲)	60	64
Crude rate 粗率	141.0	20.7
Age-standardised rate [ASR][1] 年齡標準化比率[1]	70.5	8.9
Average Annual Percent Change of ASR over the past 10 years[2] 年齡標準化比率在過去十年內的平均每年百分比變化[2]	+2.5%*	+0.2%*
Lifetime risk before age 75 一生累積風險 (0-74歲)	1 in 13	1 in 100
Five-year relative survival[3] 五年相對存活率[3] (2018-2022)	86.0%	









[1] Age-standardised rates (ASR) are age-adjusted to the World Standard Population of Segi (1960) and expressed per 100,000 population. Comparisons with these rates from other sources are valid only under the same standard population for calculations.
年齡標準化比率是根據 Segi (1960) 世界標準人口並以每十萬人口計算。用於進行比較不同族群之間的疾病率時，需以同一標準人口為基準計算才有意義。

[2] Average Annual Percent Change of ASR is a summary measure of the trend over a specified interval (* represents statistically significant at the 0.05 level). For details, please refer to the glossary in HKCaR website (www3.ha.org.hk/cancereg/glossary.html#aapc).
ASR 的平均每年百分比變化是基於特定年期的數據進行計算來總結過往趨勢的測量工具(* 號代表於0.05水平上達至統計顯著)。有關詳情請參閱 HKCaR 網站內的詞彙表 (www3.ha.org.hk/cancereg/tc/glossary.html#aapc)。

[3] Relative survival (RS) is the proportion of cancer patients surviving for a specified time after diagnosis of cancer, compared to people without cancer in general population. RS is the most commonly used method to measure survival of people with cancer in a population.
相對存活率是指與相同性別和年齡的一般人口比較後的存活百分比。這是計算以人口為基礎的癌症患者存活率中最常用的方法。

Female In Situ Breast Cancer
女性原位乳癌

In situ breast cancer is non-invasive, and is considered the earliest form of breast cancer. The incidence of female in situ breast cancer would be of interest in monitoring the number of preinvasive lesions. There were 925 cases of female in situ breast caner newly diagnosed in 2024.

原位乳癌屬非入侵性，可以定性為早期的乳腺癌。中心收集此等數據以協助偵測癌前變異的趨勢。2024年的女性原位乳癌新症數字達 925 宗。

Distribution of Female Breast Cancer by Age Group and Type (Invasive and In situ) in 2024, in terms of number of cases and age-specific incidence rates (per 100,000 women)

2024年按年齡組別及癌症類別 [入侵性乳癌及原位乳癌] 的女性乳腺癌登記個案數目及發病率 (每十萬名女性人口計算)

	Number of cases 個案數目			Age-specific Incidence rates (per 100,000 women) 特定年齡組別發病率 (每十萬名女性人口計算)		
Age (yrs) 年齡(歲)	Invasive 入侵性乳癌	In situ 原位乳癌	Total 總數	Invasive 入侵性乳癌	In situ 原位乳癌	Total 總數
0-4	0	0	0	0	0	0
5-9	0	0	0	0	0	0
10-14	0	0	0	0	0	0
15-19	0	0	0	0	0	0
20-24	4	1	5	2.6	0.6	3.2
25-29	21	2	23	9.7	0.9	10.7
30-34	72	11	83	25.5	3.9	29.4
35-39	195	23	218	58.9	6.9	65.8
40-44	425	80	505	117.0	22.0	139.1
45-49	616	111	727	186.2	33.5	219.7
50-54	707	122	829	205.5	35.5	241.0
55-59	737	106	843	228.2	32.8	261.0
60-64	838	141	979	241.9	40.7	282.6
65-69	754	126	880	250.6	41.9	292.5
70-74	568	92	660	246.6	39.9	286.6
75-79	406	61	467	267.8	40.2	308.0
80-84	207	22	229	253.4	26.9	280.3
85+	239	27	266	160.2	18.1	178.3
All ages# 所有年齡#	5,789	925	6,714	141.0	22.5	163.5
			Lifetime risk* 一生累積風險*	1 in 13	1 in 78	1 in 11
			ASR (Segi)** 年齡標準化比率**	70.5	11.5	82.0

Remarks:

註解：

Cases with unknown ages are included.

包括不明年齡的個案在內。

* Cumulative lifetime risk before the age of 75.

一生累積風險(0-74歲)

** Rates are standardised to the age distribution of the World Standard Population of Segi (1960) and expressed per 100,000 population. Comparisons with these rates from other sources are valid only under the same standard population for calculations.

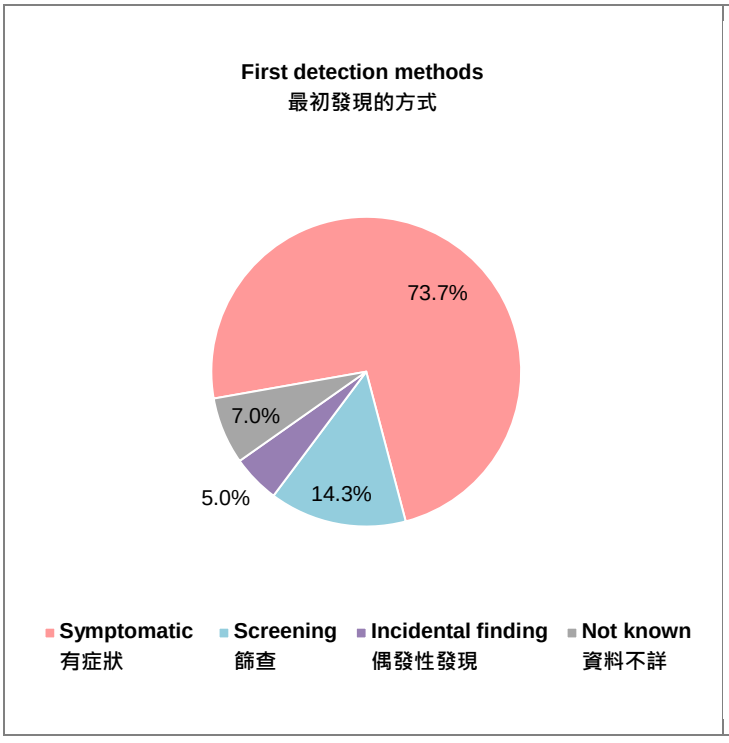
年齡標準化比率是根據 Segi (1960) 世界標準人口並以每十萬人口計算。用於進行比較不同人群之間的疾病率時，需以同一標準人口為基準計算才有意義。

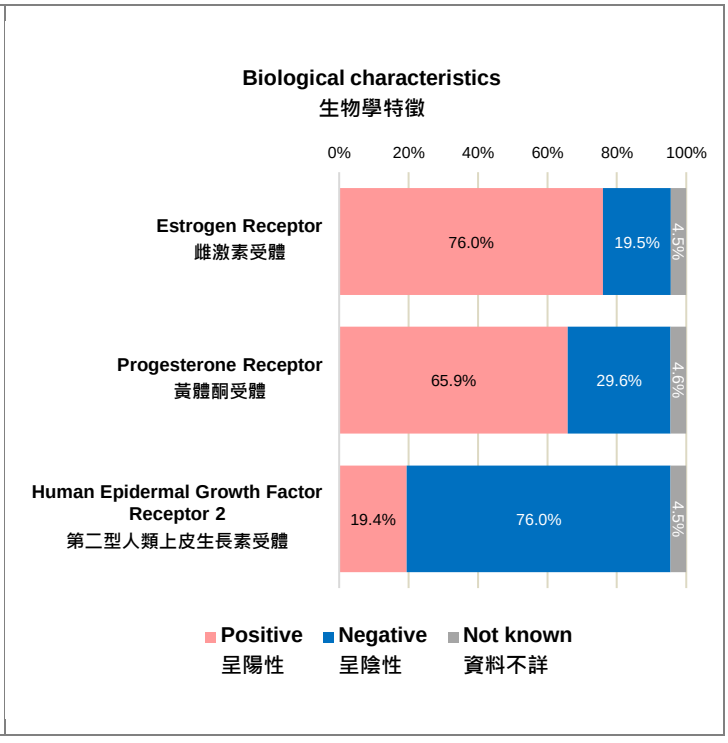
First detection methods and biological characteristics of invasive breast cancer in 2024 (N=5,789)

2024年入侵性乳腺癌最初發現的方式及生物學特徵 (個案總數 = 5,789)

	Invasive 入侵性乳癌	
	N=5,789	%
First breast cancer detection methods 最初發現乳癌的方式		
Symptomatic 有症狀	4,265	73.7%
Screening 篩查*	829	14.3%
Incidental finding 偶發性發現	290	5.0%
Not known 資料不詳	405	7.0%
Biological characteristics 生物學特徵		
Estrogen Receptor 雌激素受體		
Positive 呈陽性	4,399	76.0%
Negative 呈陰性	1,131	19.5%
Not known 資料不詳	259	4.5%
Progesterone Receptor 黃體酮受體		
Positive 呈陽性	3,813	65.9%
Negative 呈陰性	1,711	29.6%
Not known 資料不詳	265	4.6%
Human Epidermal Growth Factor Receptor 2 第二型人類上皮生長素受體		
Positive 呈陽性	1,124	19.4%
Negative 呈陰性	4,402	76.0%
Not known 資料不詳	263	4.5%

* Screening refers to asymptomatic breast cancer patients whose diagnoses are attributed to regular body check, clinical breast examination (CBE), mammography screening (MMG) or breast ultrasound (USG) etc.
篩檢是指對沒有症狀的乳腺癌患者進行診斷，診斷依據定期體檢、臨床乳房檢查 (CBE)、乳房X光造影檢查 (MMG) 或乳房超聲波檢查 (USG) 等。

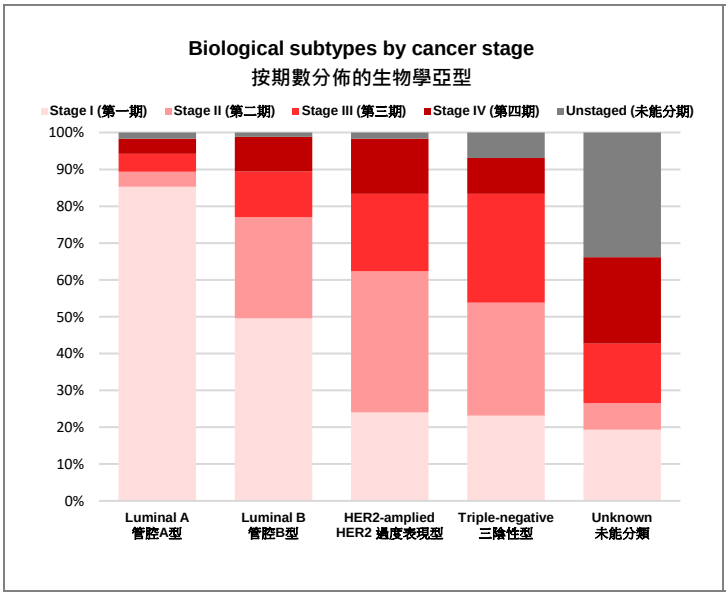


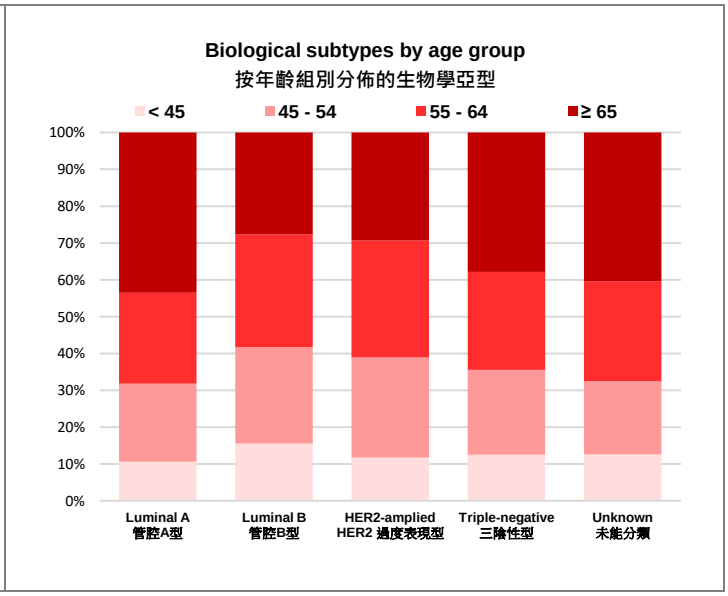


Biological subtypes[4] of invasive breast tumours by cancer stage and age group in 2024 (N=5,789)

2024年按癌症期數及年齡組別劃分入侵性乳腺腫瘤的生物學亞型[4] (個案總數 = 5,789)

		Biological subtypes 生物學亞型									
		Luminal A 管腔A型		Luminal B 管腔B型		HER2-amplied HER2 過度表現型		Triple-negative 三陰性型		Unknown 未能分類	
		N=2,485	%	N=1,386	%	N=470	%	N=608	%	N=840	%
Cancer stage 癌症期數											
Stage I	第一期	2,118	85.2%	687	49.6%	113	24.0%	141	23.2%	162	19.3%
Stage II	第二期	102	4.1%	381	27.5%	180	38.3%	186	30.6%	61	7.3%
Stage III	第三期	122	4.9%	172	12.4%	99	21.1%	180	29.6%	136	16.2%
Stage IV	第四期	100	4.0%	130	9.4%	70	14.9%	59	9.7%	197	23.5%
Unstaged	未能分期	43	1.7%	16	1.2%	8	1.7%	42	6.9%	284	33.8%
Age group 年齡組別											
< 45		264	10.6%	216	15.6%	55	11.7%	76	12.5%	106	12.6%
45 – 54		526	21.2%	362	26.1%	128	27.2%	140	23.0%	167	19.9%
55 – 64		613	24.7%	424	30.6%	149	31.7%	162	26.6%	227	27.0%
≥ 65		1,082	43.5%	384	27.7%	138	29.4%	230	37.8%	340	40.5%





[4] Breast cancer can be generally classified into four major biological subtypes, based on the status of Estrogen Receptor (ER), Progesterone Receptor (PR), Human Epidermal Growth Factor Receptor 2 (HER2) and Tumour Grade (G):

1) Luminal A: ER/ PR +, HER2 -, G 1/ 2
2) Luminal B: ER/ PR +, G 3 or ER/ PR +, HER2 +
3) HER2-amplied: Both ER and PR -, HER2 +
4) Triple-negative: All ER, PR and HER2 -

乳腺癌一般可按照雌激素受體 (ER)、黃體酮受體 (PR)、第二型人類上皮生長素受體 (HER2) 的型態，及腫瘤級別 (G)，大概分為四個主要生物學亞型：

1) 管腔 A 型： ER/ PR +，HER2 - ，G 1/ 2
2) 管腔 B 型： ER/ PR +，G 3 或 ER/ PR +，HER2 +
3) HER2 過度表現型：ER 及PR - ，HER2 +
4) 三陰性型：ER, PR 及 HER2 -

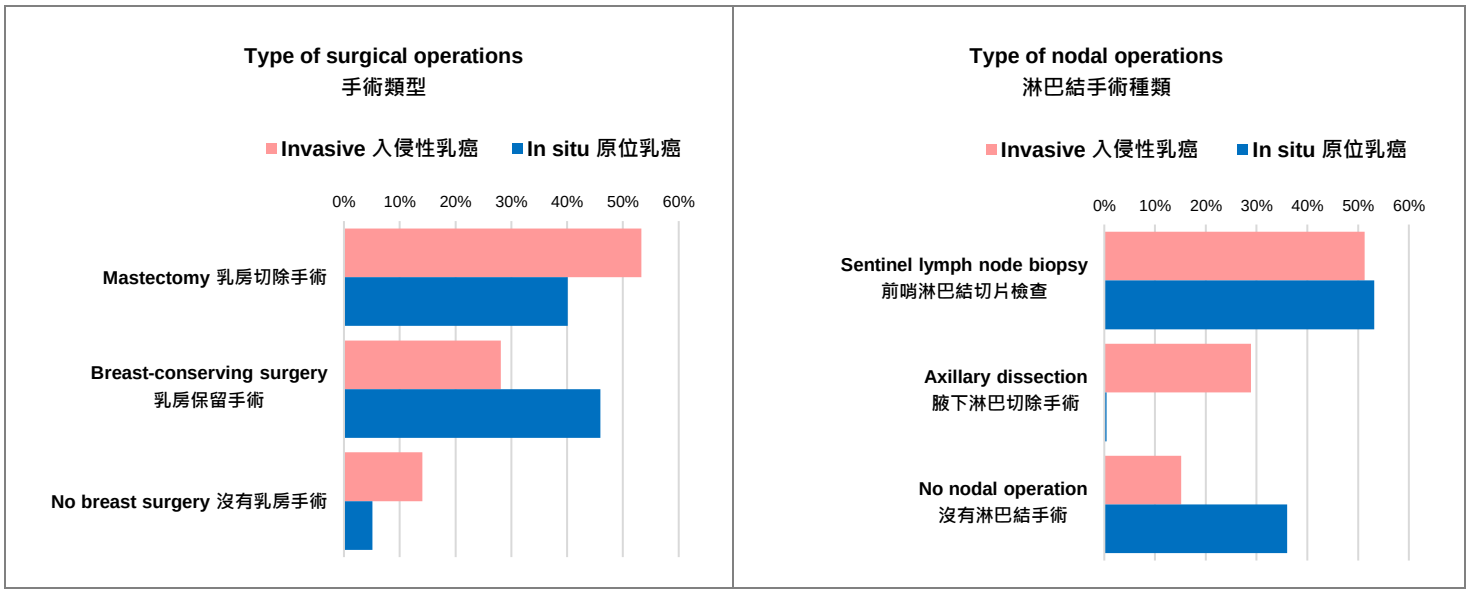
Treatment methods for female patients with invasive and in situ cancer in 2024 (N=6,714)

2024年女性入侵性乳癌及原位乳癌患者的治療方案 (個案總數 = 6,714)

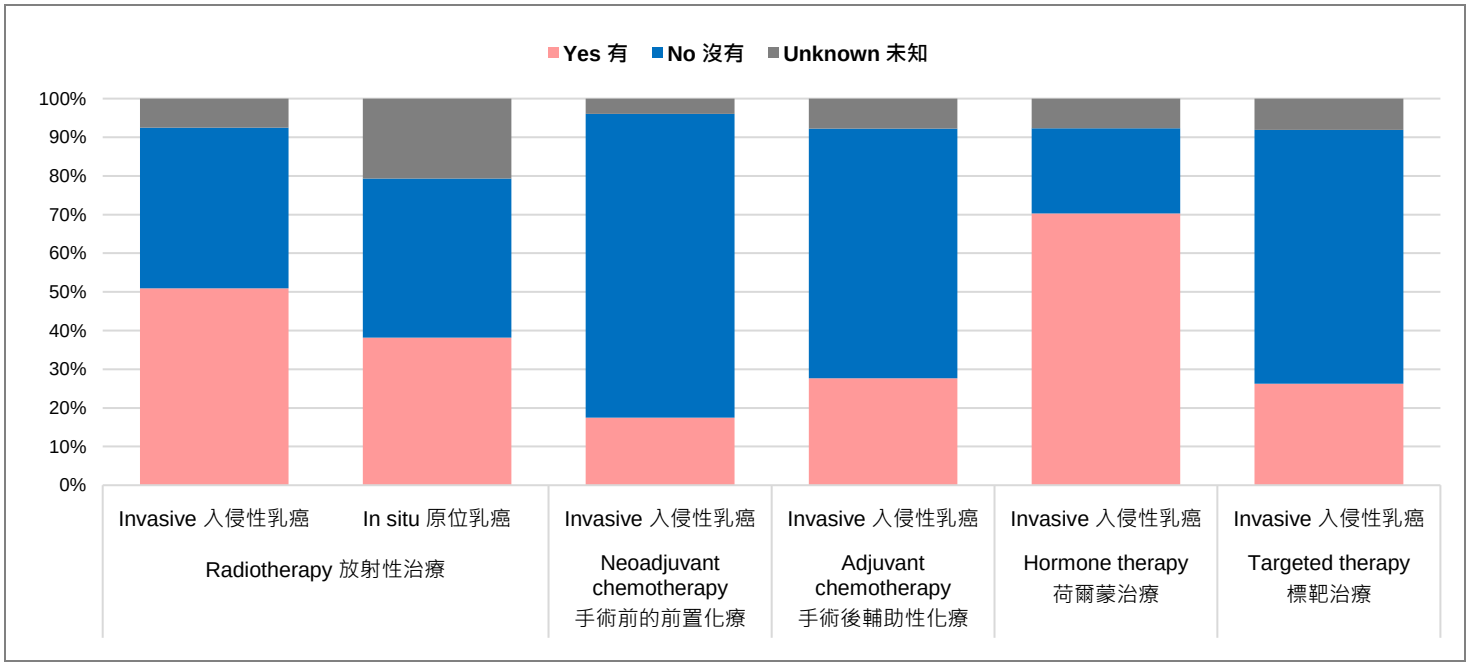
	Invasive 入侵性乳癌		In situ 原位乳癌	
	N=5,789	%	N=925	%
Surgical treatment 手術治療				
Type of surgical operations 手術類型				
Mastectomy 乳房切除手術	3,085	53.3%	371	40.1%
Breast-conserving surgery 乳房保留手術	1,626	28.1%	425	45.9%
Excisional biopsy 切除活組織檢查	1	0.02%	6	0.6%
Type not known 類型未知	16	0.3%	3	0.3%
Unknown if surgery was done 未知有否進行手術	248	4.3%	73	7.9%
No breast surgery 沒有乳房手術	813	14.0%	47	5.1%
Type of nodal operations 淋巴結手術種類				
Sentinel lymph node biopsy 前哨淋巴結切片檢查	2,968	51.3%	492	53.2%
Axillary dissection 腋下淋巴切除手術	1,674	28.9%	4	0.4%
Type not known 類型未知	16	0.3%	1	0.1%
Unknown if surgery was done 未知有否進行手術	255	4.4%	95	10.3%
No nodal operation 沒有淋巴結手術	876	15.1%	333	36.0%
Non-surgical treatment 非手術治療				
Radiotherapy 放射性治療				
Yes 有	2,949	50.9%	353	38.2%
No 沒有	2,404	41.5%	381	41.2%
Unknown 未知	436	7.5%	191	20.6%
Neoadjuvant chemotherapy 手術前的前置化療				
Yes 有	1,011	17.5%	1	0.1%
No 沒有	4,548	78.6%	851	92.0%
Unknown 未知	230	4.0%	73	7.9%
Adjuvant chemotherapy 手術後輔助性化療				
Yes 有	1,600	27.6%	4	0.4%
No 沒有	3,742	64.6%	720	77.8%
Unknown 未知	447	7.7%	201	21.7%
Hormone therapy 荷爾蒙治療				
Yes 有	4,072	70.3%	73	7.9%
No 沒有	1,274	22.0%	653	70.6%
Unknown 未知	443	7.7%	199	21.5%
Targeted therapy 標靶治療				
Yes 有	1,518	26.2%	5	0.5%
No 沒有	3,803	65.7%	719	77.7%
Unknown 未知	468	8.1%	201	21.7%
Multimodality treatment[5] 綜合治療[5]				
Number of treatment modalities 治療方法的使用數目				
0	372	6.4%	106	11.5%
1	639	11.0%	428	46.3%
2	1,487	25.7%	363	39.2%
≥ 3	3,291	56.8%	28	3.0%

[5] Combinations of treatment modalities, including surgery, radiotherapy, chemotherapy, hormone therapy and targeted therapy, are usually used to treat bresat cancer effectively.
綜合使用多種療法（包括手術、放射性治療、化療、荷爾蒙治療及標靶治療）能夠有效治療乳腺癌。

(I) Surgical treatment
手術治療



(II) Non-surgical treatment
非手術治療



(III) Multimodality treatment
綜合治療

