

Report of Survival of Gynaecological Cancer in Hong Kong, 2010-2018

本港婦科癌存活率彙報 (2010-2018)

Preface 前言

The stage of cancer provides important prognostic information and early-stage cancers are usually associated with a favourable prognosis. As such, the Hong Kong Cancer Registry (HKCaR) has made considerable efforts to improve the collection of staging data for prevalent cancers in recent years. As the quality and completeness of the staging data of gynaecological cancers have reached a high level, the HKCaR compiled and analyzed the relevant data to publish their stage-specific survival rates, providing indicators for cancer control surveillance at population level. This report presents an analysis of survival for patients diagnosed with major gynaecological cancers during 2010-2018, according to age, histological type, stage and time at diagnosis, with follow-up until the end of 2020.

對癌症患者而言，癌症分期提供重要的預後資訊，而早期癌症患者一般比晚期患者的存活率較高。有見及此，香港癌症資料統計中心（“中心”）近年來致力收集本港常見癌症的分期數據。隨著婦科癌分期數據的質量和完整性達至高水平，中心整理和分析了相關數據，從而發布上述癌症以全港人口為基礎的存活率作為癌症監控指標。本報告提供 2010-2018 年期間確診主要婦科癌的患者按年齡、組織形態、分期、及確診時間進行了一系列相對存活率統計分析，並追溯至 2020 年底。

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Statistical Terminology 統計學詞彙

The two commonly used measures of cancer survival are described in this report:

本報告描述了兩種常用的癌症存活率指標：

- **Observed survival (OS)** is the proportion of patients surviving for a specified time interval after diagnosis of cancer, regardless of the cause of death.

整體存活率是指從確診至若干年後的存活百分比。

- **Relative survival (RS)** is the proportion of cancer patients surviving for a specified time after diagnosis of cancer, compared to people without cancer in the general population. RS is the most commonly used method to measure survival of people with cancer in a population.¹

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。¹

Examples for a particular cancer 範例：

Period of diagnosis 確診年份	Observed survival 整體存活率		Relative survival 相對存活率	
	1-year 一年	5-year 五年	1-year 一年	5-year 五年
2010-2018	75%	50%	80%	55%

Observed survival 整體存活率

Among patients diagnosed with a particular cancer in 2010-2018, 75% were alive after one year and 50% survived five years or more.

在 2010-2018 年確診某種癌症的患者中，一年後仍然活著的佔 75%，而當中仍存活五年或更久的患者佔 50%。

Relative survival 相對存活率

Compared to people without cancer in the general population, 80% of the patients who were diagnosed with this cancer during 2010-2018 would survive after one year and 55% would survive five years or longer.

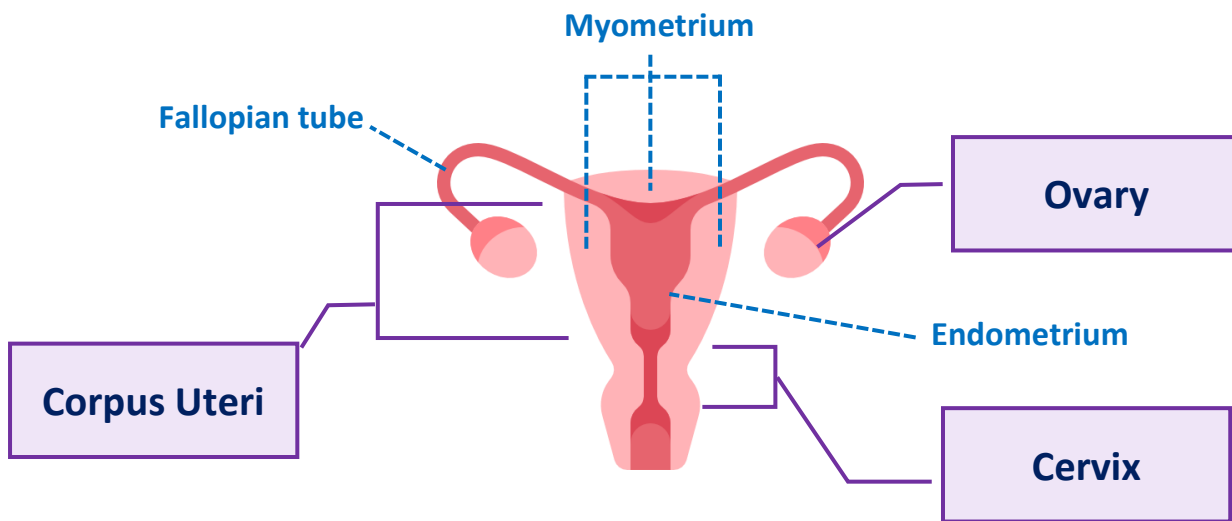
與一般人口比較後，在 2010-2018 年期間確診某種癌症的患者中，有 80% 可以存活一年，而 55% 的患者可以存活五年或更久。

For more statistical terminology, please refer to the website of Hong Kong Cancer Registry, Glossary:

更多統計學詞彙的詳解，請瀏覽本中心網站：

<https://www3.ha.org.hk/cancereg/glossary.html>

¹ Relative survival rates are age-standardised with the International Cancer Survival Standard (ICSS) weights
相對存活率以國際癌症存活標準 (ICSS) 的年齡比重作出調整



Uterus

The uterus is a female reproductive organ. It is located between the pelvic bone cavity and the hip. The bladder locates anterior to it and the rectum is posterior to it. The upper part of the uterus connects to ovaries on both sides by the fallopian tubes; while the lower part of the uterus is the cervix.

Cervix

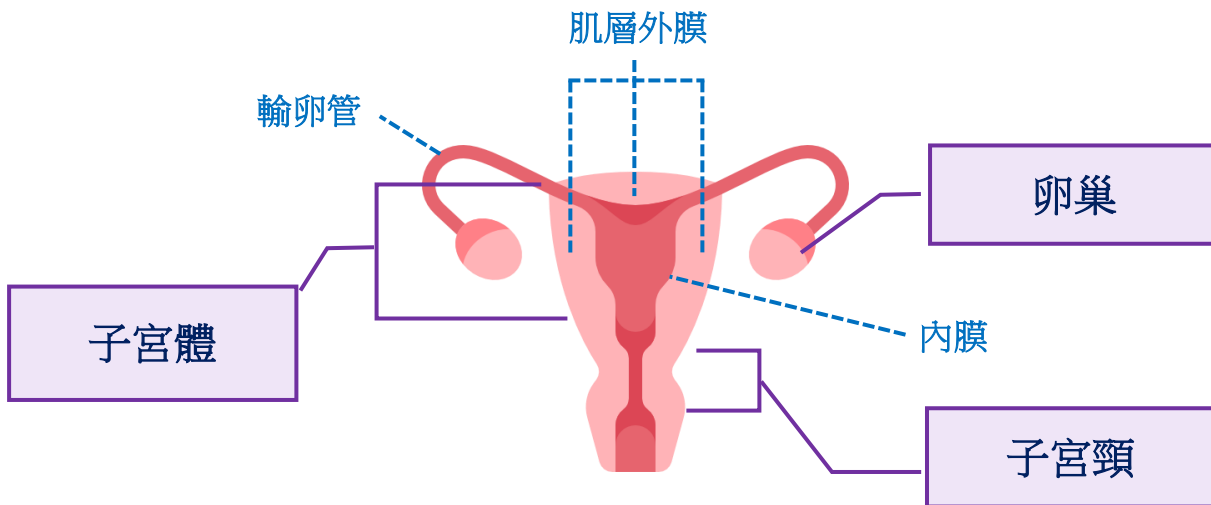
The cervix connects the corpus uteri and the vagina. It is the passage where the menses and the birth of the fetus must go through.

Corpus Uteri

The corpus uteri is the major part of the uterus, consisting inner lining (endometrium) and muscle outer layer (myometrium). During the menstrual cycle, if there is no fertilized ovum, the endometrium thickens and then shed, which is menstruation.

Ovary

The ovaries are a pair of small organs located in the pelvis, and connected to the fallopian tubes. In addition to production and storage of ovum, the ovaries release female hormones (oestrogen and progesterone).



子宮

子宮是女性生殖器官。它是位於骨盆腔和臀部之間。前面是膀胱，後面是直腸。子宮較上方的位置通過輸卵管連接左右兩側的卵巢；而子宮下方的部份為子宮頸。

子宮頸

子宮頸連接子宮體和陰道，是經血和胎兒的出生必須經過的通道。

子宮體

子宮體是子宮的主要部分，由內膜及肌層外膜組成。在月經週期，若沒有受精卵，子宮內膜變厚而脫落，即為月經。

卵巢

卵巢是一對位於盆腔的小器官，連接輸卵管。卵巢除了製造和儲存卵子外，還釋放女性荷爾蒙（雌激素和黃體酮）。

Cancer Facts: Cervical, Corpus Uteri, Ovarian & Peritoneal Cancers

癌症實況：子宮頸、子宮體、卵巢及腹膜癌

Cervical Cancer 子宮頸癌		Incidence 確診	Mortality 死亡
2010	Number of cases registered 登記個案數目	400	146
2019	Number of cases registered 登記個案數目	520	162
	Rank 排名	8	8
	Proportion of all cancers 佔總數百分比	3.0%	2.6%

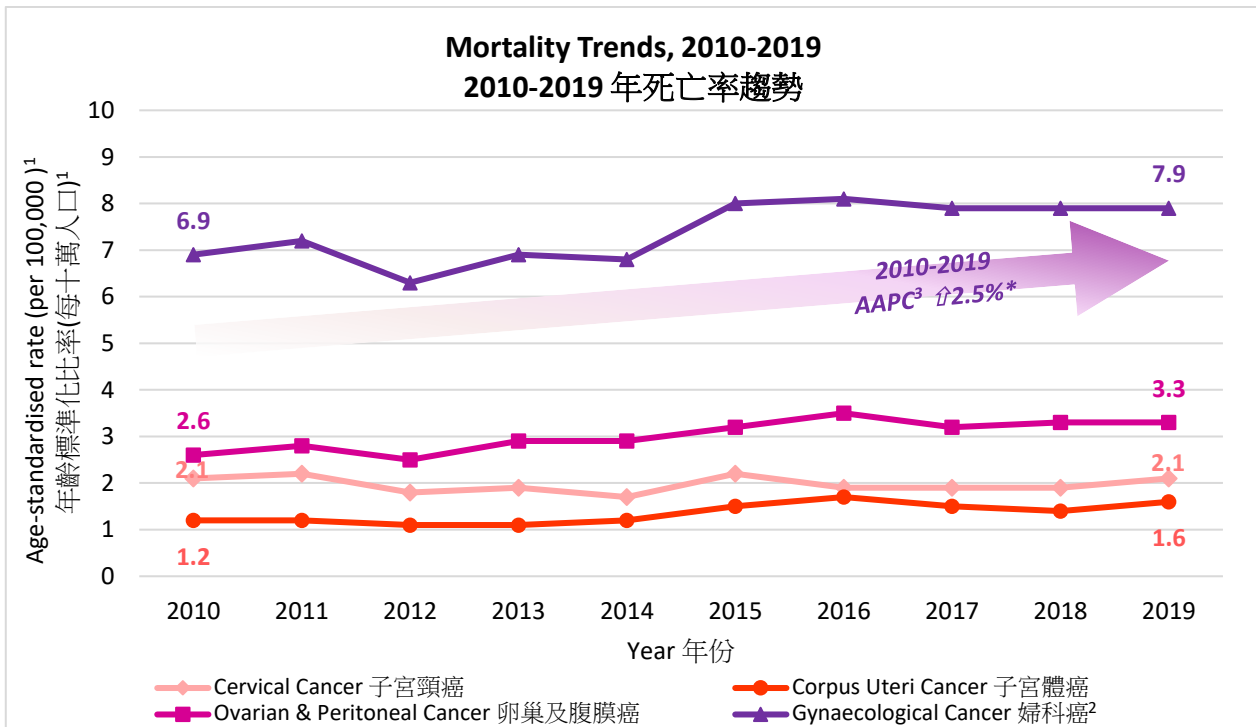
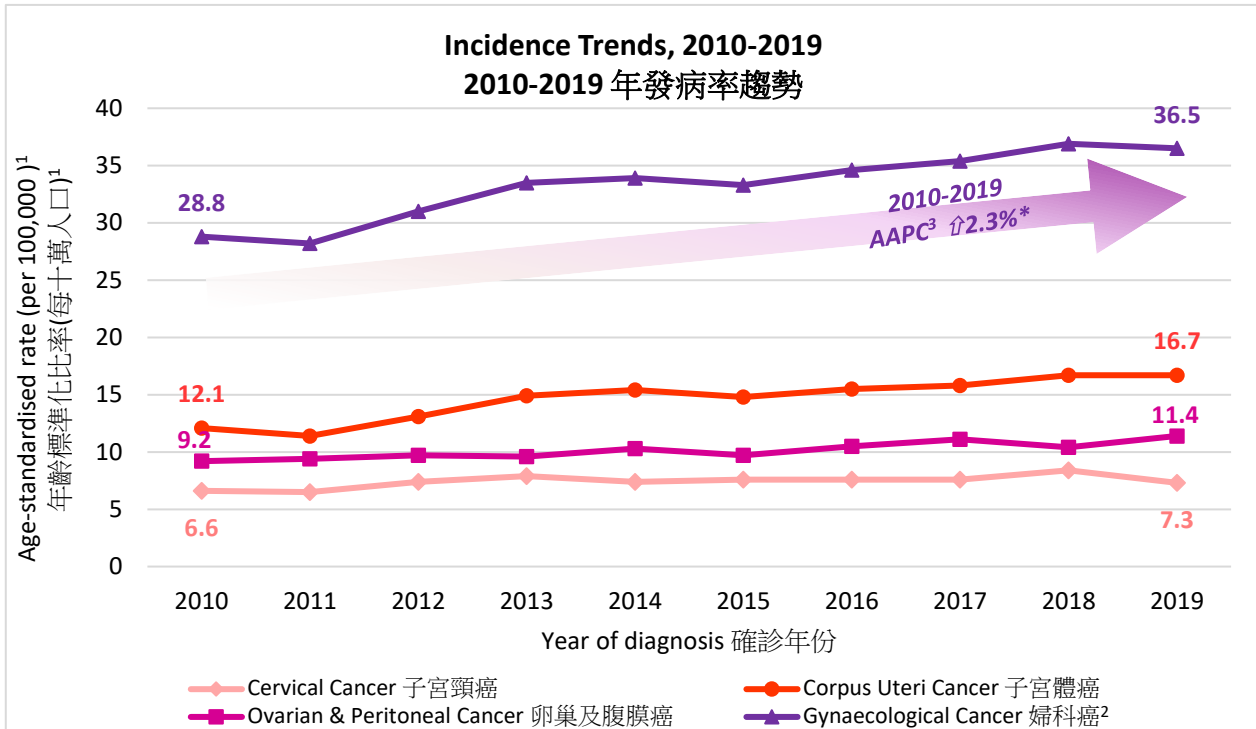
Corpus Uteri Cancer 子宮體癌		Incidence 確診	Mortality 死亡
2010	Number of cases registered 登記個案數目	713	73
2019	Number of cases registered 登記個案數目	1,198	134
	Rank 排名	4	11
	Proportion of all cancers 佔總數百分比	6.9%	2.2%

Ovarian & Peritoneal Cancer [#] 卵巢及腹膜癌 [#]		Incidence 確診	Mortality 死亡
2010	Number of cases registered 登記個案數目	495	166
2019	Number of cases registered 登記個案數目	732	261
	Rank 排名	6	7
	Proportion of all cancers 佔總數百分比	4.2%	4.2%

[#] Starting from 2018, "Ovarian etc." is replaced by "Ovarian & Peritoneal Cancer (OPC)" in HKCaR's reporting. Figures of prior year under "Ovarian etc." are provided for reference only, and are not suitable for comparison with the present data.

由 2018 年開始，香港癌症資料中心報告「卵巢及腹膜癌」的數據，以取代「卵巢癌等」。過去「卵巢癌等」的數據只供參考，並不適合與現在的數據作比較。

Incidence and Mortality Trends 發病及死亡率趨勢



1. Rates are standardised to the age distribution of the World Standard Population of Segi (1960). Comparisons with these rates from other sources are valid only under the same standard population for calculations.
年齡標準化發病/死亡率是根據 Segi (1960) 世界標準人口計算。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。
 2. Gynaecological Cancer includes cancers of cervix, corpus uteri, ovary, fallopian tube, primary peritoneum and other gynaecological cancers.
婦科癌包括子宮頸癌、子宮體癌、卵巢癌、輸卵管癌、原發性腹膜癌、及其他婦科癌。
 3. The average annual percentage change (AAPC) is used to summarise the trends in ASRs over the past ten years (i.e. 2010-2019).
平均每年百分比變化 (AAPC) 是用作總結過去十年 (i.e. 2010-2019) 年齡標準化的變化趨勢。
- * represents a statistically significant difference (*p<0.05).
代表在統計學上有顯著的差異(*p<0.05)。

Survival of Cervical Cancer 子宮頸癌存活率

The following table and chart show the survival rates of cervical cancer patients who were diagnosed in 2010-2018:

以下圖表顯示在 2010-2018 年間確診子宮頸癌患者的存活率：

Period of diagnosis 確診年份	Number of patients 確診人數	Observed survival 整體存活率		Relative survival 相對存活率	
		1-year 一年	5-year 五年	1-year 一年	5-year 五年
2010-2018	4,121	86.8%	63.8%	87.3%	65.8%

5-year Relative Survival 五年相對存活率 65.8%

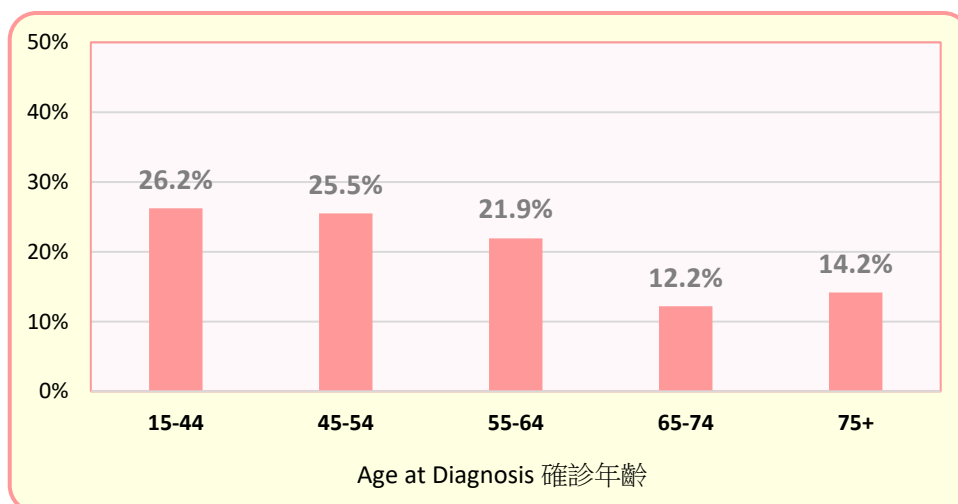


Age at Diagnosis: Cervical Cancer in 2010-2018

確診年齡分佈：2010-2018 年子宮頸癌患者

The following chart shows the distribution of patients' age at diagnosis:

下圖顯示患者確診時的年齡分佈：



Cervical Cancer is most common in women aged 15-44.

子宮頸癌在 15-44 歲的婦女中最为常見。

Median Age at Diagnosis
確診年齡中位數

54

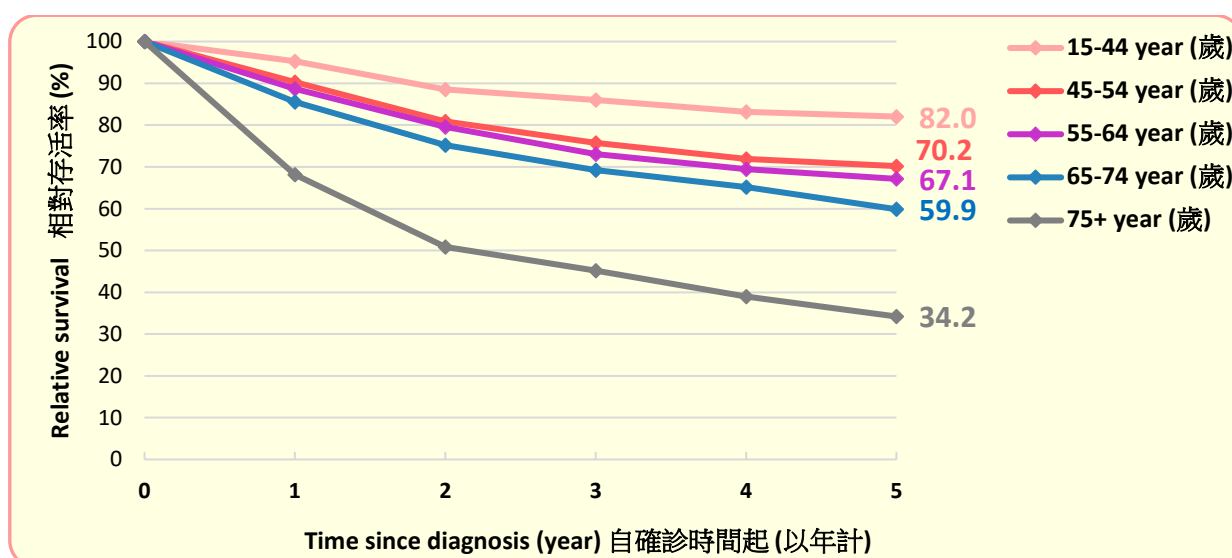
Survival of Cervical Cancer 子宮頸癌存活率

Survival by Age at Diagnosis: Cervical Cancer in 2010-2018

按年齡分佈存活率：2010-2018 年子宮頸癌患者

The following graph shows the one- to five-year relative survival rates by age at diagnosis:

下圖顯示患者不同年齡組別的一至五年相對存活率：



- Survival from cervical cancer is related to age at diagnosis with reduction of the five-year relative survival as age increases.

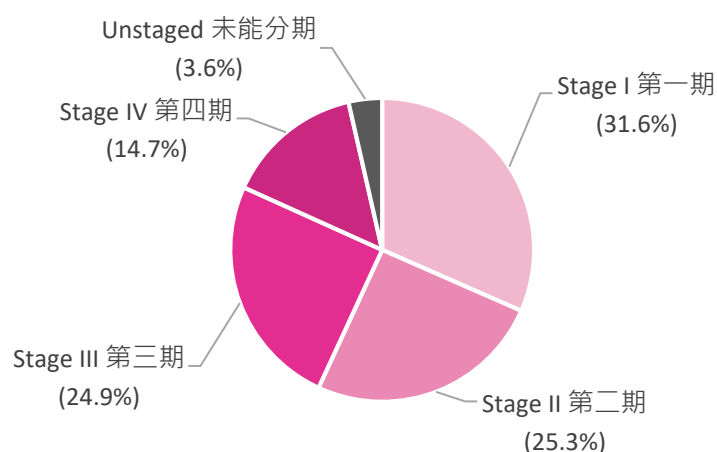
子宮頸癌的存活率與確診年齡有關，隨著患者的年齡增長，五年相對存活率相繼下降。

Stage at Diagnosis: Cervical Cancer in 2010-2017

期數分佈：2010-2017 年子宮頸癌患者

The following chart shows the proportion of cervical cancer patients who were diagnosed in 2010-2017 with different stages:

下圖顯示在 2010-2017 年間確診不同期數的子宮頸癌患者百分比：



Survival of Cervical Cancer 子宮頸癌存活率

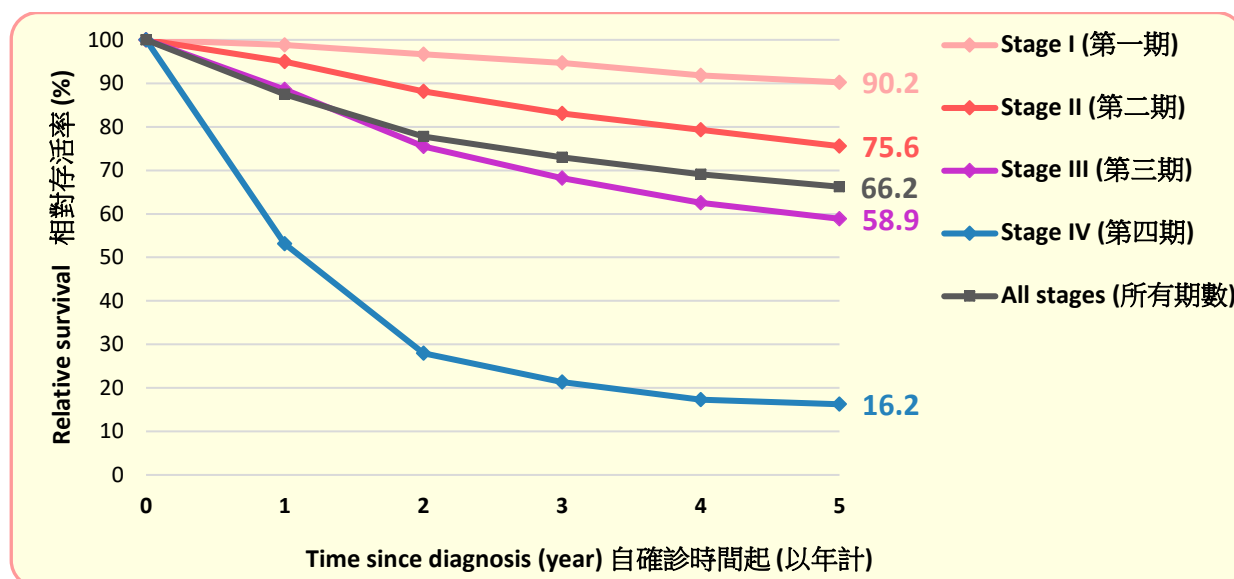
Survival by Stage at Diagnosis: Cervical Cancer in 2010-2017

按期數分佈存活率：2010-2017 年子宮頸癌患者

The following table and graph show the one- to five-year relative survival rates by stage at diagnosis:

以下圖表顯示患者確診不同期數的一至五年相對存活率：

Stage at diagnosis 期數	Time since diagnosis 自確診時間起				
	1-year 第一年	2-year 第二年	3-year 第三年	4-year 第四年	5-year 第五年
Stage I 第一期	98.8	96.7	94.7	91.9	90.2
Stage II 第二期	95.0	88.1	83.1	79.3	75.6
Stage III 第三期	88.6	75.5	68.2	62.5	58.9
Stage IV 第四期	53.1	27.9	21.3	17.3	16.2
All stages 所有期數	87.5	77.8	73.0	69.1	66.2



- ◆ Stage at diagnosis is one of the most important factors in cervical cancer survival. Survival time at all years after diagnosis decreases with increasing stage.

發病期數是影響子宮頸癌存活率最重要的因素之一，期數越高存活率越低。

- ◆ The five-year relative survival rate of cervical cancer was 90.2% for stage I, but dramatically fell to 16.2% for stage IV.

子宮頸癌的五年相對存活率在第一期確診為 90.2%，但到第四期確診時會急劇下跌，降至 16.2%。

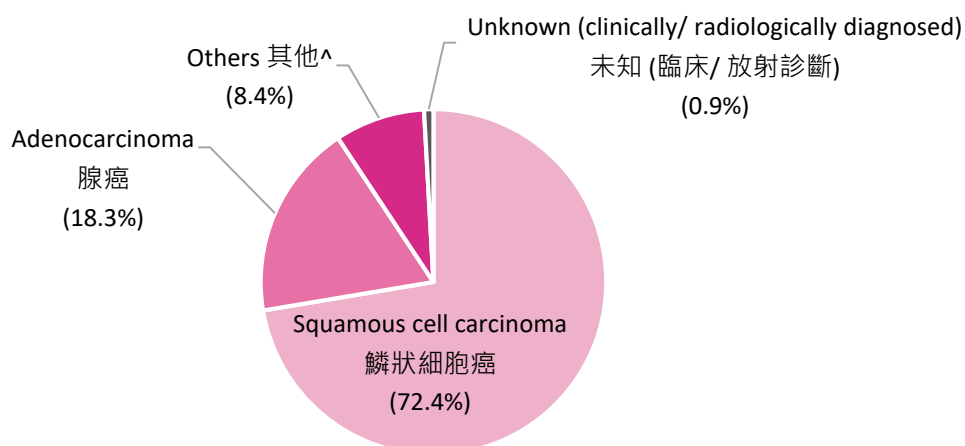
Survival of Cervical Cancer 子宮頸癌存活率

Histological type: Cervical Cancer in 2010-2018

組織形態分佈：2010-2018 年子宮頸癌患者

The following chart shows the proportion of cervical cancer patients who were diagnosed in 2010-2018 with different histological types:

下圖顯示在 2010-2018 年間確診不同組織形態的子宮頸癌患者百分比：



*Others included adenosquamous carcinoma, small cell carcinoma, sarcoma, etc.
其他包括腺鱗癌、小細胞癌、肉瘤等。

Survival by Histological type: Cervical Cancer in 2010-2018

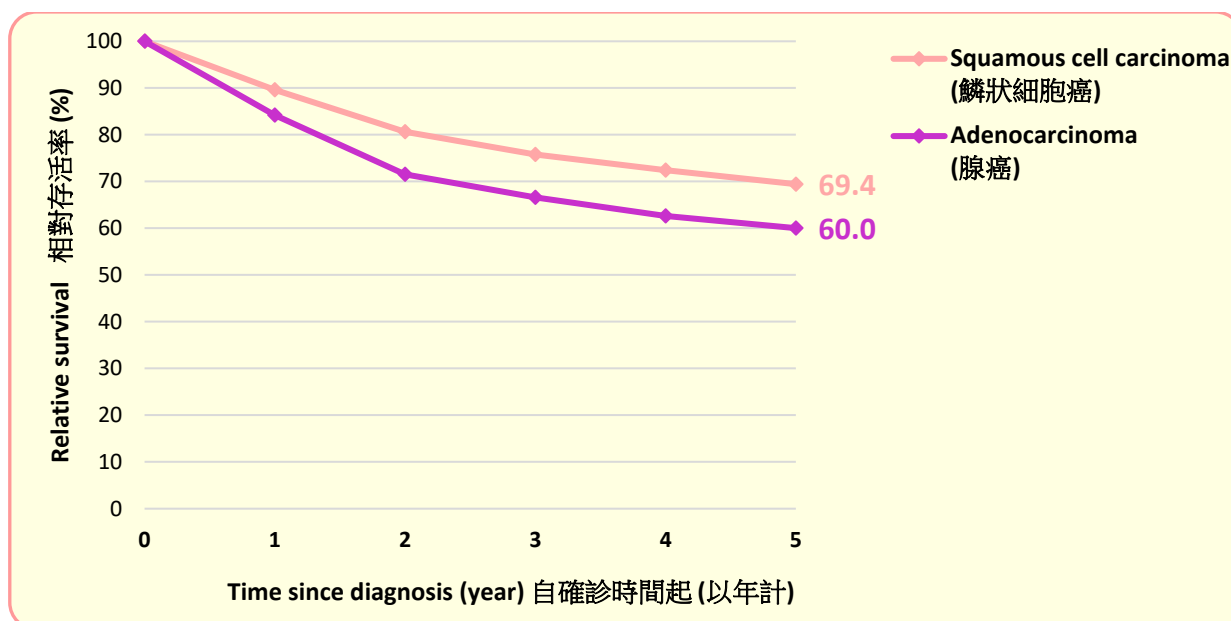
按組織形態分佈存活率：2010-2018 年子宮頸癌患者

The following table and graph show the one- to five-year relative survival rates by histological type:

以下圖表顯示患者不同組織形態的一至五年相對存活率：

Histological type 組織形態	Time since diagnosis 自確診時間起				
	1-year 第一年	2-year 第二年	3-year 第三年	4-year 第四年	5-year 第五年
Squamous cell carcinoma 鱗狀細胞癌	89.6	80.6	75.8	72.4	69.4
Adenocarcinoma 腺癌	84.2	71.5	66.6	62.6	60.0

Survival of Cervical Cancer 子宮頸癌存活率



- ◆ Histology type is another important factor in cervical cancer survival.

組織形態是另一影響子宮頸癌存活率的重要因素。

- ◆ The overall five-year relative survival rate of squamous cell carcinoma of the cervix was 69.4% (95% CI: 67.5-71.3); whereas, the rate of adenocarcinoma was 60.0% (95% CI: 55.5-64.2). The difference was statistically significant.

子宮頸癌中的鱗狀細胞癌五年相對存活率為 69.4% (95% CI: 67.5-71.3)；而腺癌則為 60.0% (95% CI: 55.5-64.2)，其差異在統計學上有顯著分別。

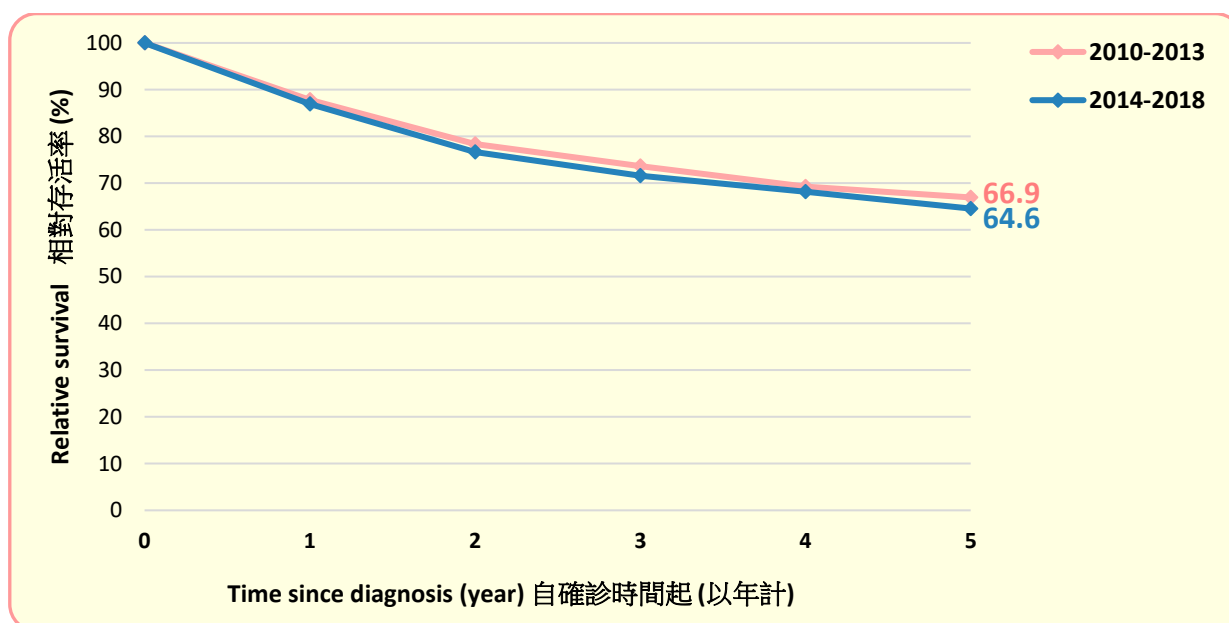
Survival of Cervical Cancer 子宮頸癌存活率

Trends in Relative Survival: Cervical Cancer in 2010-2018

相對存活率近年趨勢：2010-2018 年子宮頸癌患者

The following graph shows the trend of relative survival rates of cervical cancer patients diagnosed in 2010-2013 and 2014-2018:

下圖顯示 2010-2013 年及 2014-2018 年確診子宮頸癌患者的相對存活率：



- ◆ The five-year relative survival of cervical cancer slightly decreased from 66.9% (95% CI: 64.4-69.3) for those diagnosed in 2010-2013 to 64.6% (95% CI: 62.1-66.9) for those diagnosed in 2014-2018. The difference was not statistically significant.

子宮頸癌的五年相對存活率由 2010-2013 年的 66.9% (95% CI: 64.4-69.3) 輕微下降至 2014-2018 年的 64.6% (95% CI: 62.1-66.9)，唯在統計學上沒有顯著的差異。

Survival of Corpus Uteri Cancer 子宮體癌存活率

The following table and chart show the survival rates of corpus uteri cancer patients who were diagnosed in 2010-2018:

以下圖表顯示在 2010-2018 年間確診子宮體癌患者的存活率：

Period of diagnosis 確診年份	Number of patients 確診人數	Observed survival 整體存活率		Relative survival 相對存活率	
		1-year 一年	5-year 五年	1-year 一年	5-year 五年
2010-2018	7,871	91.7%	78.1%	87.9%	70.4%

5-year Relative Survival 五年相對存活率 70.4%

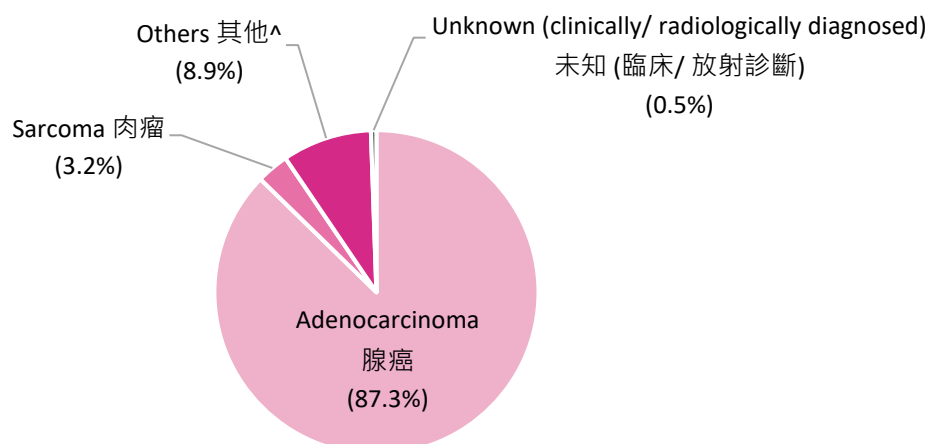


Histological type: Corpus Uteri Cancer in 2010-2018

組織形態分佈：2010-2018 年子宮體癌患者

The following chart shows the proportion of corpus uteri cancer patients who were diagnosed in 2010-2018 with different histological types:

下圖顯示在 2010-2018 年間確診不同組織形態的子宮體癌患者百分比：



^Others included histological types other than adenocarcinoma and sarcoma.
其他包括除腺癌及肉瘤以外的組織型態。

Survival of Corpus Uteri Cancer 子宮體癌存活率

All of the following survival analysis excludes patients with histology of sarcoma or no related pathology report.

以下所有存活率分析不包括組織型態為肉瘤或沒有相關病理報告的患者。

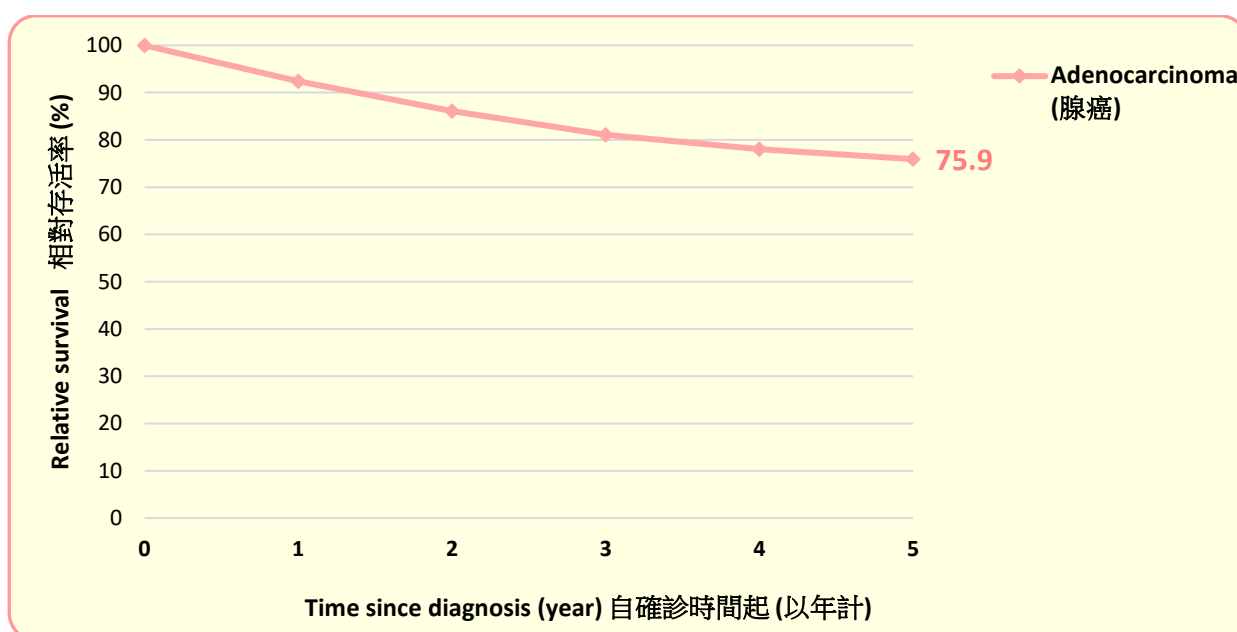
Survival by Histological type: Corpus Uteri Cancer in 2010-2018

按組織形態分佈存活率：2010-2018 年子宮體癌患者

The following table and graph show the one- to five-year relative survival rates of patients who were diagnosed with adenocarcinoma in 2010-2018:

以下圖表顯示在 2010-2018 年確診腺癌患者的一至五年相對存活率：

Histological type 組織形態	Time since diagnosis 自確診時間起				
	1-year 第一年	2-year 第二年	3-year 第三年	4-year 第四年	5-year 第五年
Adenocarcinoma 腺癌	92.4	86.1	81.1	78.1	75.9



- ◆ The overall five-year relative survival rate of adenocarcinoma of the corpus uteri was 75.9%.
子宮體癌中的腺癌五年相對存活率為 75.9%。

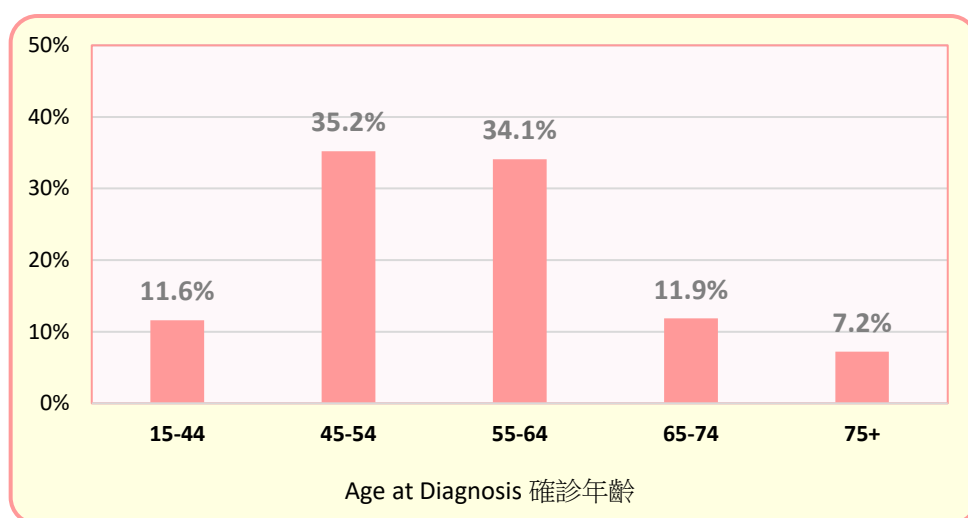
Survival of Corpus Uteri Cancer 子宮體癌存活率

Age at Diagnosis: Corpus Uteri Cancer in 2010-2018

年齡分佈：2010-2018 年子宮體癌患者

The following chart shows the distribution of patients' age at diagnosis:

下圖顯示患者確診時的年齡分佈：



Corpus Uteri Cancer is most common in women aged 45-54.

子宮體癌在 45-54 歲的婦女中為最常見。

Median Age at Diagnosis
確診年齡中位數

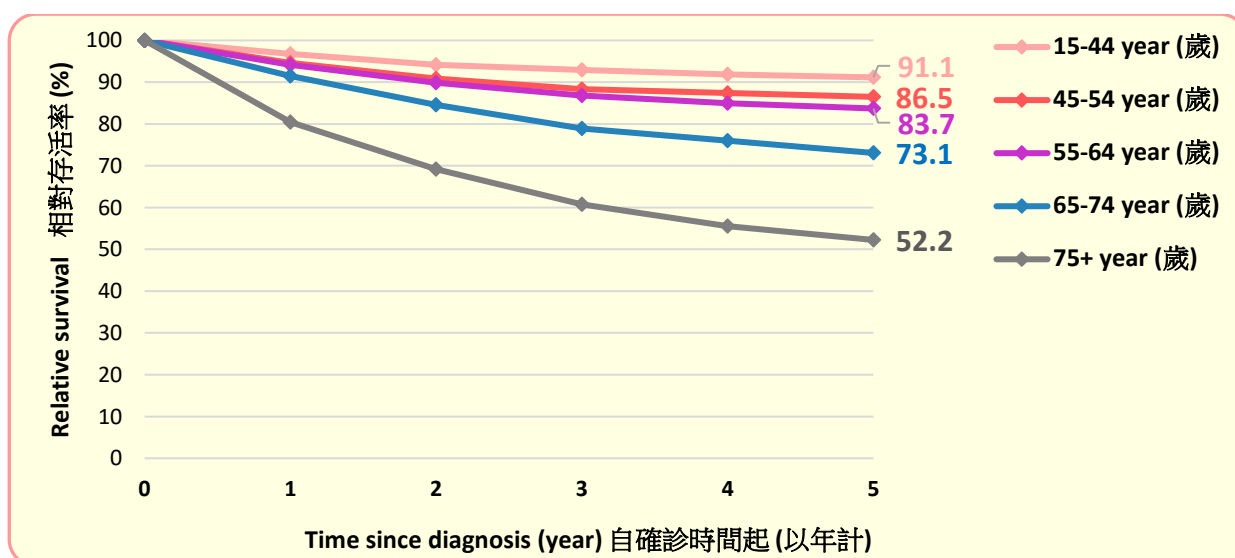
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Survival by Age at Diagnosis: Corpus Uteri Cancer in 2010-2018

按年齡分佈存活率：2010-2018 年子宮體癌患者

The following graph shows the one- to five-year relative survival rates by age at diagnosis:

下圖顯示患者不同年齡組別的一至五年相對存活率：



- ◆ Survival from corpus uteri cancer is related to age at diagnosis with reduction of the five-year relative survival as age increases.

子宮體癌的存活率與確診年齡有關，隨著患者的年齡增長，五年相對存活率相繼下降。

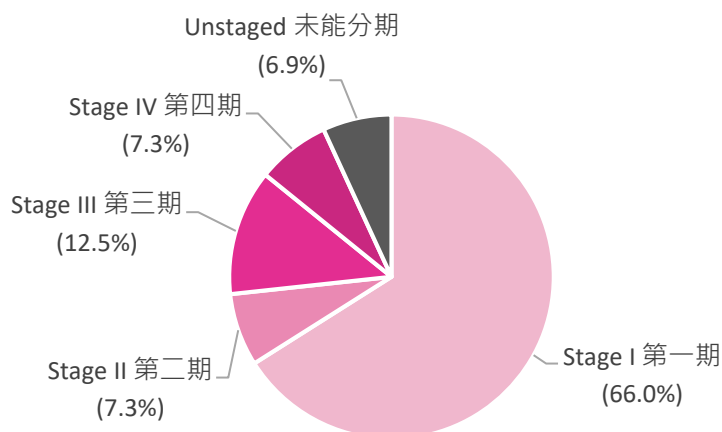
Survival of Corpus Uteri Cancer 子宮體癌存活率

Stage at Diagnosis: Corpus Uteri Cancer in 2010-2017

期數分佈：2010-2017 年子宮體癌患者

The following chart shows the proportion of corpus uteri cancer patients who were diagnosed in 2010-2017 with different stages:

下圖顯示在 2010-2017 年間確診不同期數的子宮體癌患者百分比：



Survival by Stage at Diagnosis: Corpus Uteri Cancer in 2010-2017

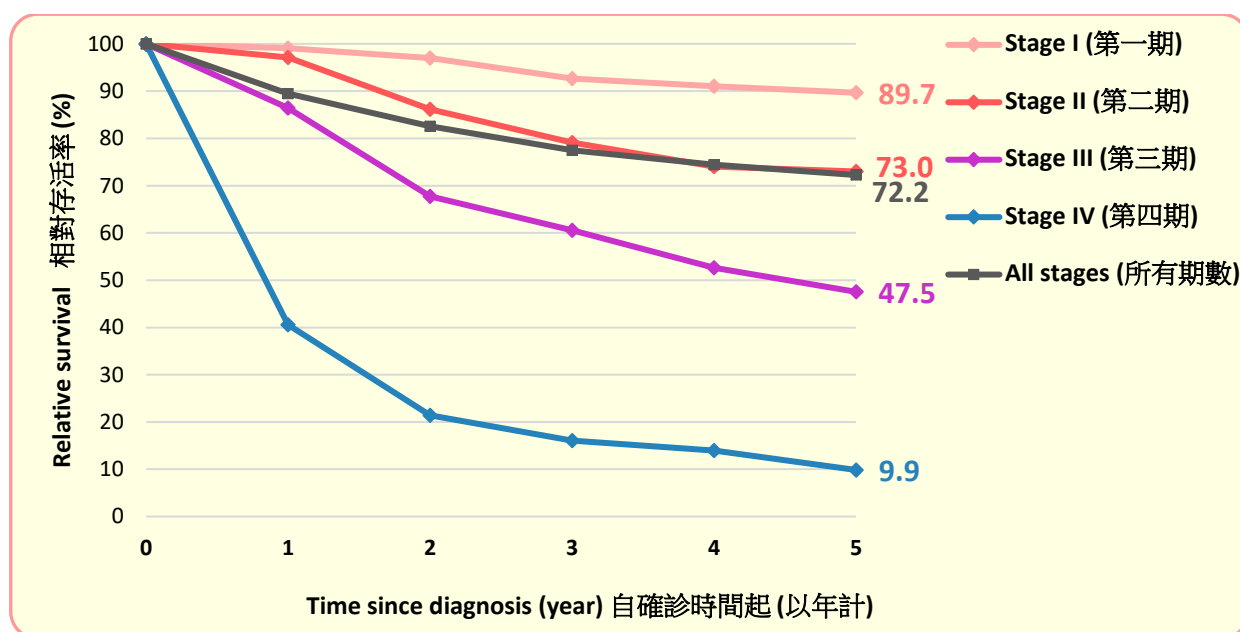
按期數分佈存活率：2010-2017 年子宮體癌患者

The following table and graph show the one- to five-year relative survival rates by stage at diagnosis:

以下圖表顯示患者確診不同期數的一至五年相對存活率：

Stage at diagnosis 期數	Time since diagnosis 自確診時間起				
	1-year 第一年	2-year 第二年	3-year 第三年	4-year 第四年	5-year 第五年
Stage I 第一期	99.1	97.0	92.6	91.0	89.7
Stage II 第二期	97.2	86.2	79.1	74.1	73.0
Stage III 第三期	86.5	67.7	60.5	52.7	47.5
Stage IV 第四期	40.6	21.4	16.0	14.0	9.9
All stages 所有期數	89.5	82.6	77.5	74.5	72.2

Survival of Corpus Uteri Cancer 子宮體癌存活率



- ◆ Stage at diagnosis is one of the most important factors in corpus uteri cancer survival. Survival time at all years after diagnosis decreases with increasing stage.

發病期數是影響子宮體癌存活率最重要的因素之一，期數越高存活率越低。

- ◆ The five-year relative survival rate of corpus uteri cancer was 89.7% for stage I, but dramatically fell to 9.9% for stage IV.

子宮體癌的五年相對存活率在第一期確診為 89.7%，但到第四期確診時會急劇下跌，降至 9.9%。

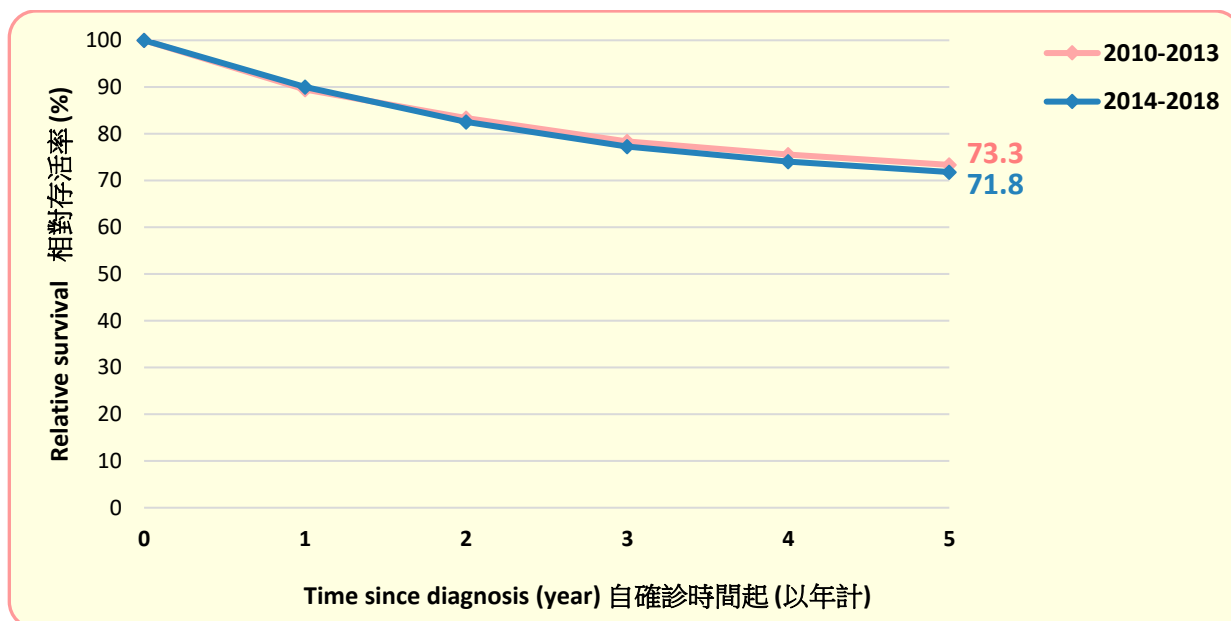
Survival of Corpus Uteri Cancer 子宮體癌存活率

Trends in Relative Survival: Corpus Uteri Cancer in 2010-2018

相對存活率近年趨勢：2010-2018 年子宮體癌患者

The following graph shows the trend of relative survival rates of corpus uteri cancer patients diagnosed in 2010-2013 and 2014-2018:

下圖顯示 2010-2013 年及 2014-2018 年確診子宮體癌患者的相對存活率：



- ◆ The five-year relative survival of corpus uteri cancer slightly decreased from 73.3% (95% CI: 70.3-76.1) for those diagnosed in 2010-2013 to 71.8% (95% CI: 69.0-74.5) for those diagnosed in 2014-2018. The difference was not statistically significant.

子宮體癌的五年相對存活率由 2010-2013 年的 73.3% (95% CI: 70.3-76.1) 輕微下降至 2014-2018 年的 71.8% (95% CI: 69.0-74.5)，唯在統計學上沒有顯著的差異。

Survival of Ovarian & Peritoneal Cancer 卵巢及腹膜癌存活率

“Ovarian & Peritoneal Cancer (OPC)” refers to the cohort of cancers in the ovary (ICD10 C56), fallopian tube (C57.0) and primary peritoneum (C48.1-48.8 excluding sarcomas).

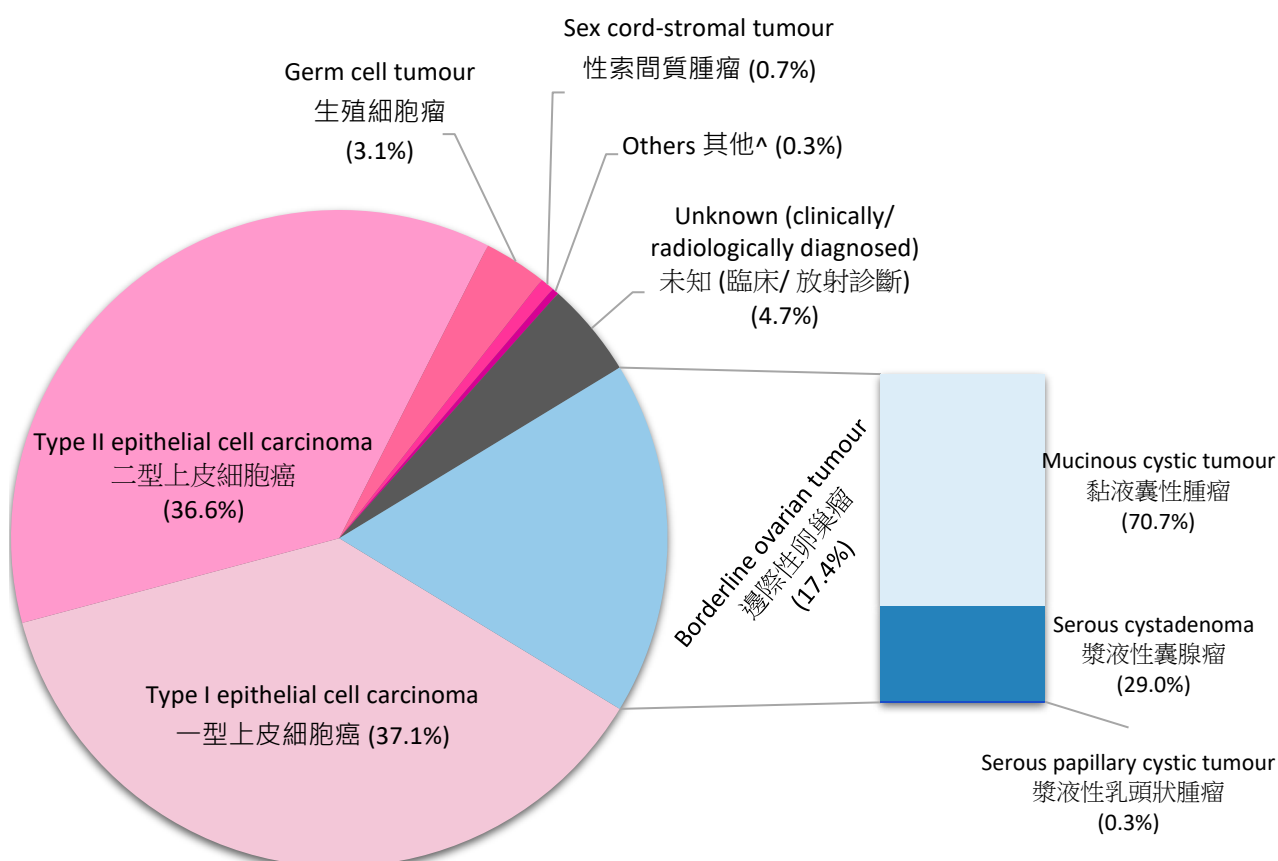
“卵巢及腹膜癌”是指卵巢 (ICD10 C56)、輸卵管 (C57.0) 和原發性腹膜 (C48.1-48.8，不包括肉瘤) 的癌症群組。

Histological type: Ovarian & Peritoneal Cancer in 2010-2018

組織形態分佈：2010-2018 年卵巢及腹膜癌患者

The following graph shows the proportion of OPC patients who were diagnosed in 2010-2018 with different histological types:

下圖顯示在 2010-2018 年間確診不同組織形態的卵巢及腹膜癌患者百分比：



[^]Others included non-epithelial specified and non-specified histological type.
其他包括非上皮性的特定和非特定的組織型態。

Survival of Ovarian & Peritoneal Cancer 卵巢及腹膜癌存活率

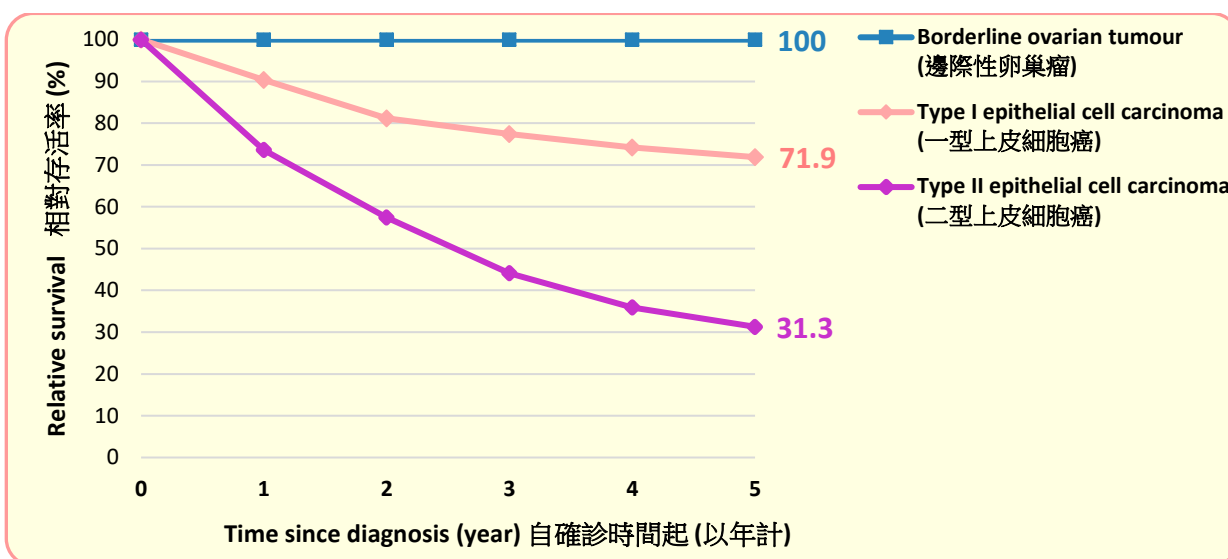
Survival by Histological type: Ovarian & Peritoneal Cancer in 2010-2018

按組織形態分佈存活率：2010-2018 年卵巢及腹膜癌患者

The following table and graph show the one- to five-year relative survival rates by histological type:

以下圖表顯示患者不同組織形態的一至五年相對存活率：

Histological type 組織形態	Time since diagnosis 自確診時間起				
	1-year 第一年	2-year 第二年	3-year 第三年	4-year 第四年	5-year 第五年
Borderline ovarian tumour 邊際性卵巢瘤	100	100	100	100	100
Type I epithelial cell carcinoma 一型上皮細胞癌	90.4	81.2	77.4	74.2	71.9
Type II epithelial cell carcinoma 二型上皮細胞癌	73.6	57.4	44.1	35.9	31.3



- ◆ Histology type is another important factor in the survival of OPC.

組織形態是另一影響卵巢及腹膜癌存活率的重要因素。

- ◆ The five-year relative survival rates of type I and type II epithelial cell carcinomas were 71.9% and 31.3%, respectively; whereas, the rate for borderline ovarian tumour was much higher, reaching 100%.

一型和二型上皮細胞癌的五年相對存活率分別為 71.9% 和 31.3%；然而，邊際性卵巢瘤的五年存活率比較高，達到 100%。

Survival of Ovarian & Peritoneal Cancer 卵巢及腹膜癌存活率

All of the following survival analysis only includes patients with epithelial OPC.

以下所有存活率分析只包括上皮性卵巢及腹膜癌的患者。

The following table and chart show the survival rates of epithelial OPC patients who were diagnosed in 2010-2018:

以下圖表顯示在 2010-2018 年間確診上皮性卵巢及腹膜癌患者的存活率：

Period of diagnosis 確診年份	Number of patients 確診人數	Observed survival 整體存活率		Relative survival 相對存活率	
		1-year 一年	5-year 五年	1-year 一年	5-year 五年
2010-2018	3,714	86.3%	56.9%	78.3%	44.5%

5-year Relative Survival 五年相對存活率 **44.5%**



Purple figures represent those who would survive five years or more
紫色圖案代表五年後可以存活的人

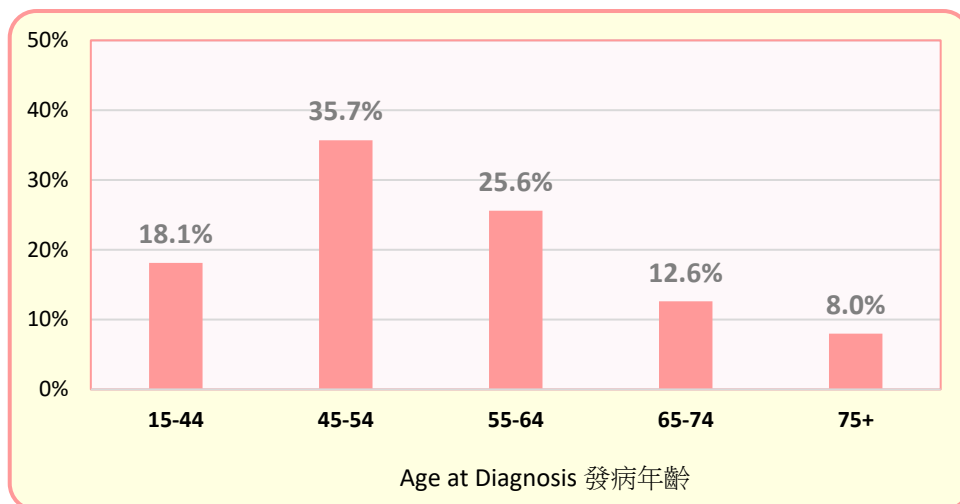
Survival of Ovarian & Peritoneal Cancer 卵巢及腹膜癌存活率

Age at Diagnosis: Epithelial Ovarian & Peritoneal Cancer in 2010-2018

年齡分佈：2010-2018 年上皮性卵巢及腹膜癌患者

The following chart shows the distribution of patients' age at diagnosis:

下圖顯示患者確診時的年齡分佈：



Epithelial OPC is most common in women aged 45-54.

上皮性卵巢及腹膜癌在 45-54 歲的婦女中最為常見。

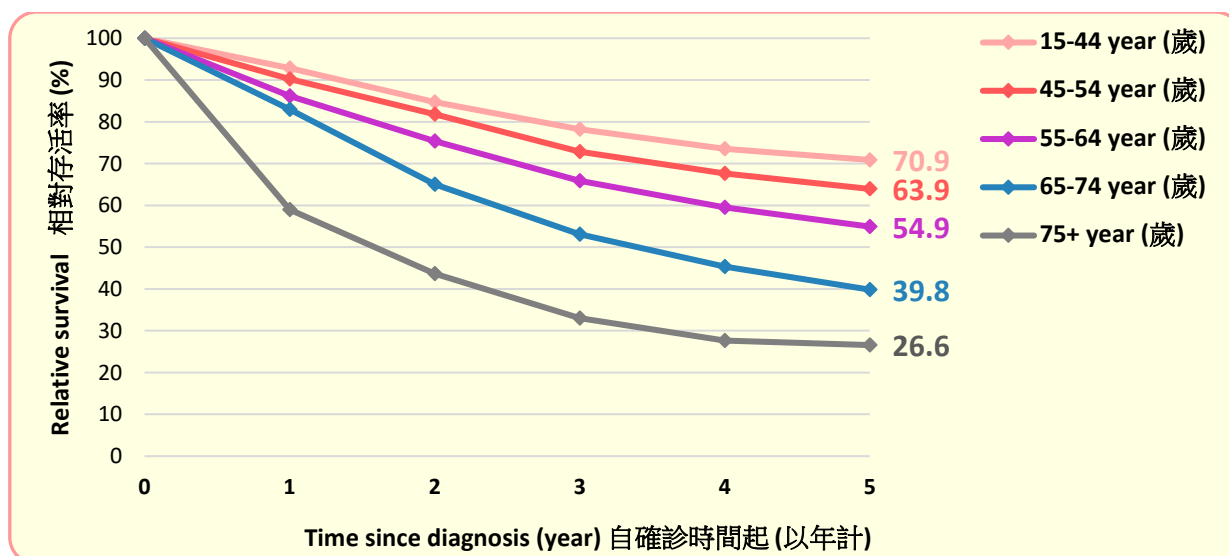
Median Age at Diagnosis
確診年齡中位數
54

Survival by Age at Diagnosis: Epithelial Ovarian & Peritoneal Cancer in 2010-2018

按年齡分佈存活率：2010-2018 年上皮性卵巢及腹膜癌患者

The following graph shows the one- to five-year relative survival rates by age at diagnosis:

下圖顯示患者按確診時年齡組別的一至五年相對存活率：



- ◆ Survival from epithelial OPC is related to age at diagnosis with reduction of the five-year relative survival as age increases.

上皮性卵巢及腹膜癌的存活率與確診年齡有關，隨著患者的年齡增長，五年相對存活率相繼下降。

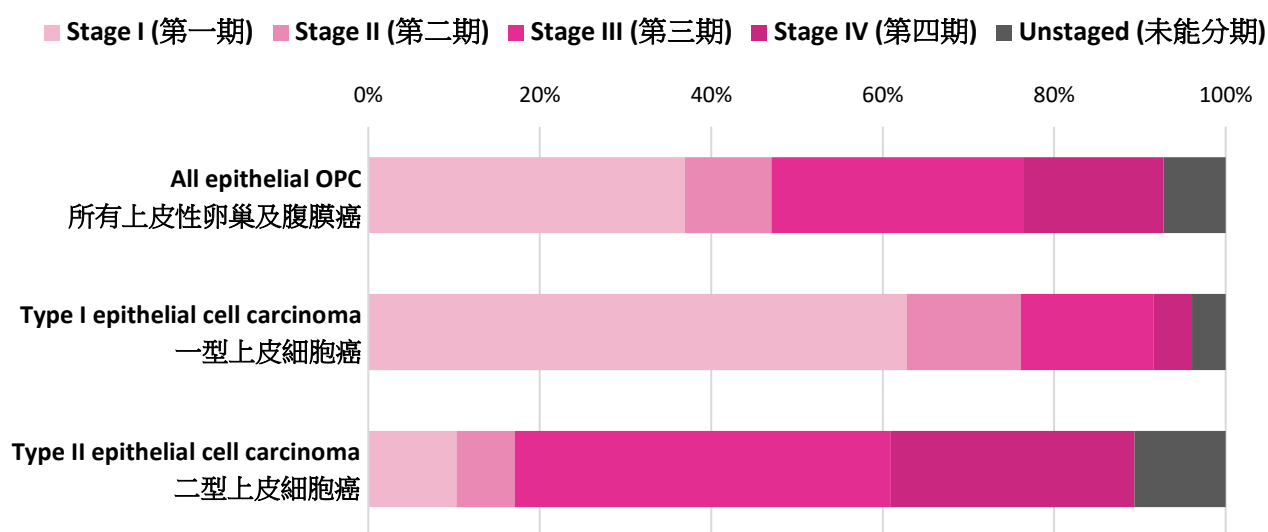
Survival of Ovarian & Peritoneal Cancer 卵巢及腹膜癌存活率

Stage at Diagnosis: Epithelial Ovarian & Peritoneal Cancer in 2010-2017

期數分佈：2010-2017 年上皮性卵巢及腹膜癌患者

The following chart and table show the stage distribution among different types of epithelial OPC patients who were diagnosed in 2010-2017:

以下圖表顯示在 2010-2017 年間確診各種上皮性卵巢及腹膜癌患者之期數分佈：



	All epithelial OPC 所有上皮性卵巢及腹膜癌	Type I epithelial cell carcinoma 一型上皮細胞癌	Type II epithelial cell carcinoma 二型上皮細胞癌
Stage I 第一期	36.9%	62.8%	10.3%
Stage II 第二期	10.1%	13.3%	6.8%
Stage III 第三期	29.5%	15.5%	43.9%
Stage IV 第四期	16.3%	4.5%	28.4%
Unstaged 未能分期	7.3%	3.9%	10.7%

Survival of Ovarian & Peritoneal Cancer 卵巢及腹膜癌存活率

Survival by Stage at Diagnosis: Epithelial Ovarian & Peritoneal Cancer in 2010-2017 按期數分佈存活率：2010-2017 年上皮性卵巢及腹膜癌患者

The following table and graphs show the one- to five-year relative survival rates by stage at diagnosis for **all epithelial OPC (including type I and type II epithelial cell carcinoma) patients**:

以下圖表顯示**所有上皮性卵巢及腹膜癌（包括一型及二型上皮細胞癌）**患者不同期數的一至五年相對存活率：

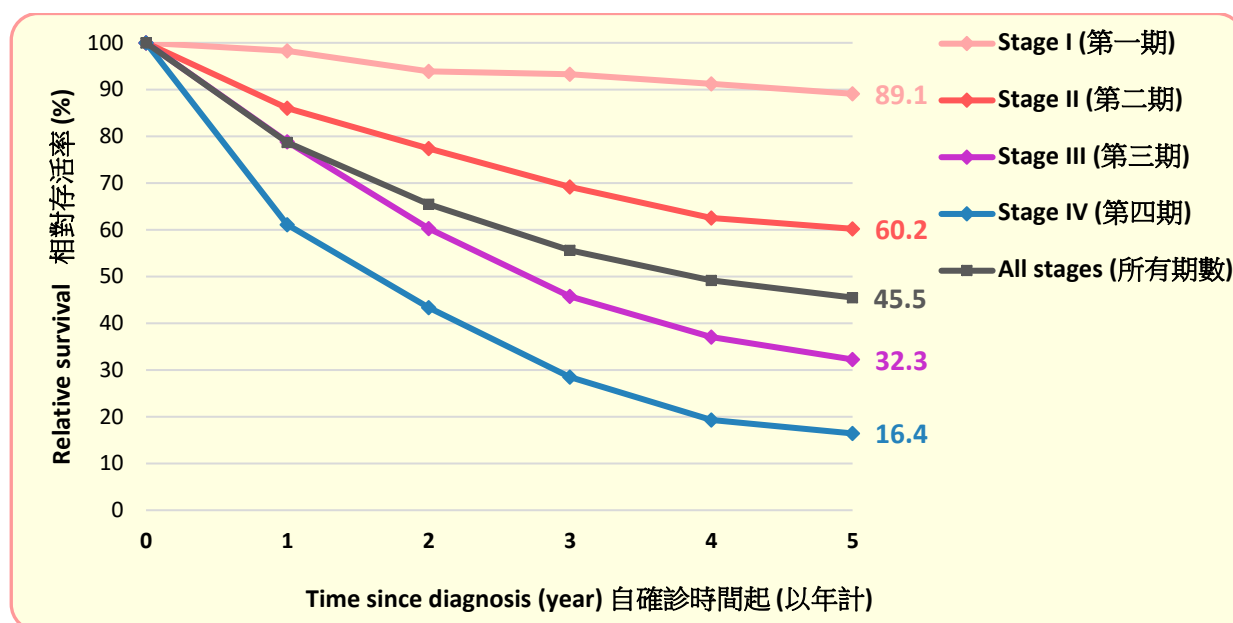
All epithelial OPC 所有上皮性卵巢及腹膜癌	Time since diagnosis 自確診時間起				
	1-year 第一年	2-year 第二年	3-year 第三年	4-year 第四年	5-year 第五年
Stage I 第一期	98.2	93.9	93.2	91.2	89.1
Stage II 第二期	86.0	77.4	69.2	62.5	60.2
Stage III 第三期	78.9	60.2	45.7	37.1	32.3
Stage IV 第四期	61.1	43.3	28.5	19.3	16.4
All stages 所有期數	78.7	65.5	55.6	49.2	45.5
Type I epithelial cell carcinoma 一型上皮細胞癌	Time since diagnosis 自確診時間起				
	1-year 第一年	2-year 第二年	3-year 第三年	4-year 第四年	5-year 第五年
Stage I 第一期	98.6	94.8	94.0	91.8	89.5
Stage II 第二期	84.1	80.3	76.1	67.0	66.2
Stage III 第三期	73.7	45.8	38.9	36.3	30.0
Stage IV 第四期	50.8	31.4	24.3	13.0	13.1
All stages 所有期數	90.4	81.2	77.4	74.2	71.9
Type II epithelial cell carcinoma 二型上皮細胞癌	Time since diagnosis 自確診時間起				
	1-year 第一年	2-year 第二年	3-year 第三年	4-year 第四年	5-year 第五年
Stage I 第一期	97.2	90.9	91.2	89.3	87.6
Stage II 第二期	87.7	75.3	63.8	61.0	NA*
Stage III 第三期	80.3	63.1	47.2	37.4	32.4
Stage IV 第四期	62.8	45.0	29.7	20.1	16.6
All stages 所有期數	73.6	57.4	44.1	35.9	31.3

* NA: Not applicable due to insufficient numbers of events for analysis of cases

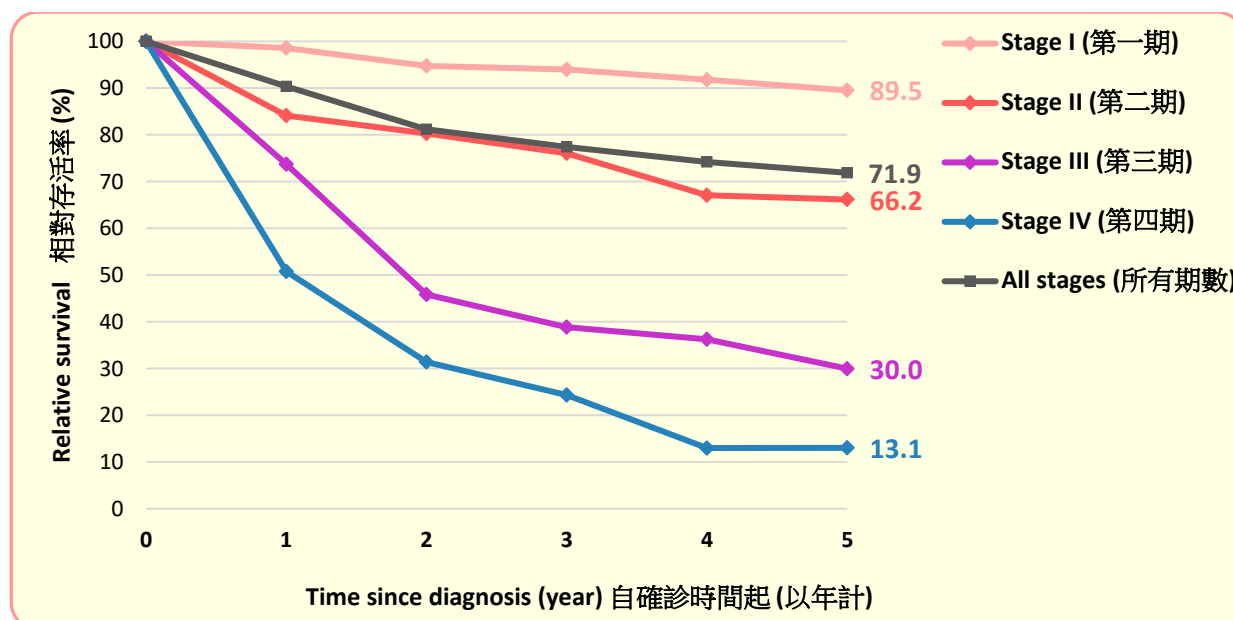
* 沒有足夠案例進行分析

Survival of Ovarian & Peritoneal Cancer 卵巢及腹膜癌存活率

Among all epithelial OPC
所有上皮性卵巢及腹膜癌

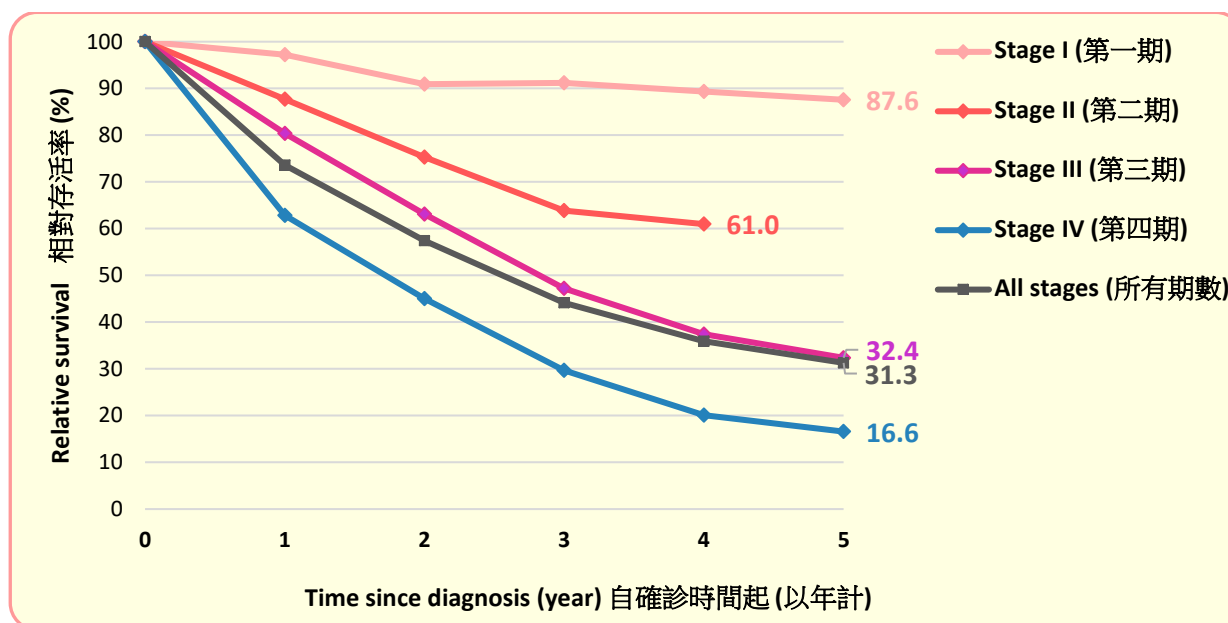


Type I epithelial cell carcinoma
一型上皮細胞癌



Survival of Ovarian & Peritoneal Cancer 卵巢及腹膜癌存活率

Type II epithelial cell carcinoma 二型上皮細胞癌



- ◆ Stage at diagnosis is one of the most important factors in epithelial OPC survival. Survival time at all years after diagnosis decreases with increasing stage.

發病期數是影響上皮性卵巢及腹膜癌存活率最重要的因素之一，期數越高存活率越低。

- ◆ The five-year relative survival rate of epithelial OPC was 89.1% for stage I, but dramatically fell to 16.4% for stage IV.

上皮性卵巢及腹膜癌的五年相對存活率在第一期確診為 89.1%，到第四期確診時的五年存活率會急劇下跌，降至 16.4%。

- ◆ The five-year relative survival rates of type I and type II epithelial cell carcinomas were 89.5% and 87.6% respectively for stage I, but dramatically fell to 13.1% and 16.6% respectively for stage IV.

一型及二型上皮細胞癌的五年相對存活率在第一期確診分別為 89.5%及 87.6%，到第四期確診時會急劇下跌，分別降至 13.1%及 16.6%。

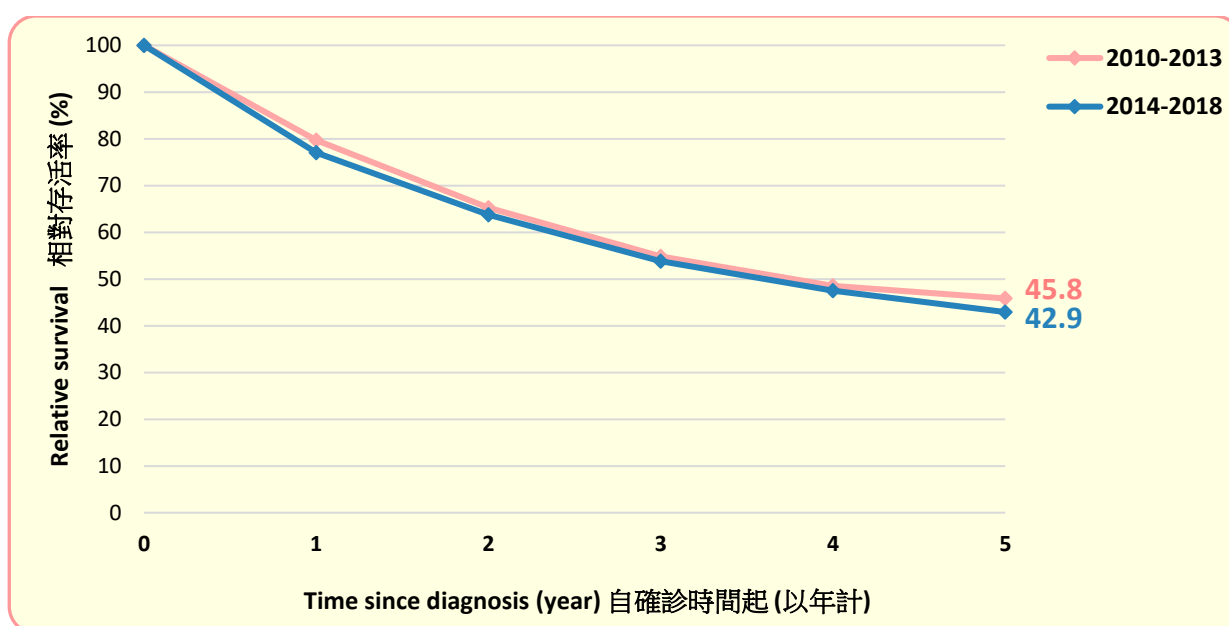
Survival of Ovarian & Peritoneal Cancer 卵巢及腹膜癌存活率

Trends in Relative Survival: Epithelial Ovarian & Peritoneal Cancer in 2010-2018

相對存活率近年趨勢：2010-2018 年上皮性卵巢及腹膜癌患者

The following graph shows the trend of relative survival rates of epithelial OPC patients diagnosed in 2010-2013 and 2014-2018:

下圖顯示 2010-2013 年及 2014-2018 年確診上皮性卵巢及腹膜癌患者的相對存活率：



- ◆ The five-year relative survival of epithelial OPC slightly decreased from 45.8% (95% CI: 42.0-49.6) for those diagnosed in 2010-2013 to 42.9% (95% CI: 39.6-46.2) for those diagnosed in 2014-2018. The difference was not statistically significant.

上皮性卵巢及腹膜癌的五年相對存活率由 2010-2013 年的 45.8% (95% CI: 42.0-49.6) 輕微下降至 2014-2018 年的 42.9% (95% CI: 39.6-46.2)，唯在統計學上沒有顯著的差異。

Point to note 注意事項

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

存活統計分析是基於過去確診癌症患者的數據，並不反映個別情況。

2. Due to the release of the latest guideline of International Federation of Gynecology and Obstetrics (FIGO) in 2018, the stage-specific survival analysis in this report only included cases of cervical, corpus uteri, ovarian & peritoneal cancers who were diagnosed in 2010-2017 and staged according to the American Joint Committee on Cancer (AJCC) 7th edition staging manual. When more data are collected in future years, survival rates of patients with the above three cancers diagnosed in 2018 or later will be released.

由於國際婦產科聯盟（FIGO）於 2018 年發布了最新版本的癌症分期指引，此報告中的分期存活率分析僅包括於 2010-2017 年間確診子宮頸、子宮體、卵巢及腹膜癌的病例，分期則參照美國癌症聯合委員會（AJCC）癌症期數手冊（第 7 版）。中心預計未來收集更多的癌症數據後，將會發布上述確診癌症患者於 2018 年或之後的分期存活率資料。

Suggested citation 建議引用

Hong Kong Cancer Registry. Report of Survival of Gynaecological Cancer in Hong Kong, 2010-2018. Hong Kong Hospital Authority; Oct 2021. Available at: <https://www3.ha.org.hk/cancereg> (accessed [date]).

Further Information

Further data is available from Hong Kong Cancer Registry

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