

Urological cancers, including prostate cancer, represent the most prevalent group of cancers in NSW.

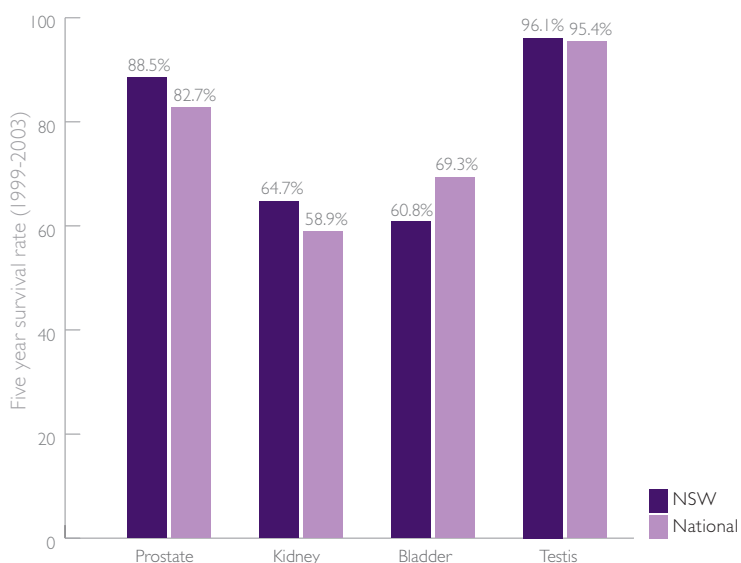
Urological cancer in New South Wales

Epidemiology

- Urological cancer incorporates cancers of the prostate, bladder, kidney and testes.
- Cancer of the prostate is the most prevalent cancer in NSW and shows the greatest predicted increase in incidence.
- The incidence of prostate cancer in NSW is estimated to exceed 9,800 annually by 2021.
- The NSW relative five year survival, measured between 1983 and 2003, has improved for all urological cancers except bladder, and is higher than the national average with the exception of bladder cancer.

Tumour site	2007 Incidence	Percentage change in incidence (1999-2007)	
		♂	♀
Bladder	650	-33.9	-30.7
Kidney	1,006	13.9	Not Significant
Prostate	6,665	55.0	Not Applicable
Testicular	243	Not Significant	Not Applicable
Total	8,564		

Relative five year survival rate for urological cancer from 1999-2003



- Patients with urological cancers in NSW have better five year survival than the national average, with the exception of bladder cancer.
- Urological cancer ranks fourth in terms of cancer research dollars spent in NSW.
- Relatively few urological cancer patients are enrolled onto clinical trials.

Treatment

Bladder, kidney and testicular cancers are generally treated by surgical excision, often combined with radiotherapy or chemotherapy.

Prostate cancer treatment depends on the characteristics of the cancer and its degree of spread. Therapy may include surgery, radiotherapy, chemotherapy, androgen deprivation therapy or ongoing surveillance.

Research is being undertaken to determine subtypes of prostate cancer which may respond to specific therapies.

Quality of life

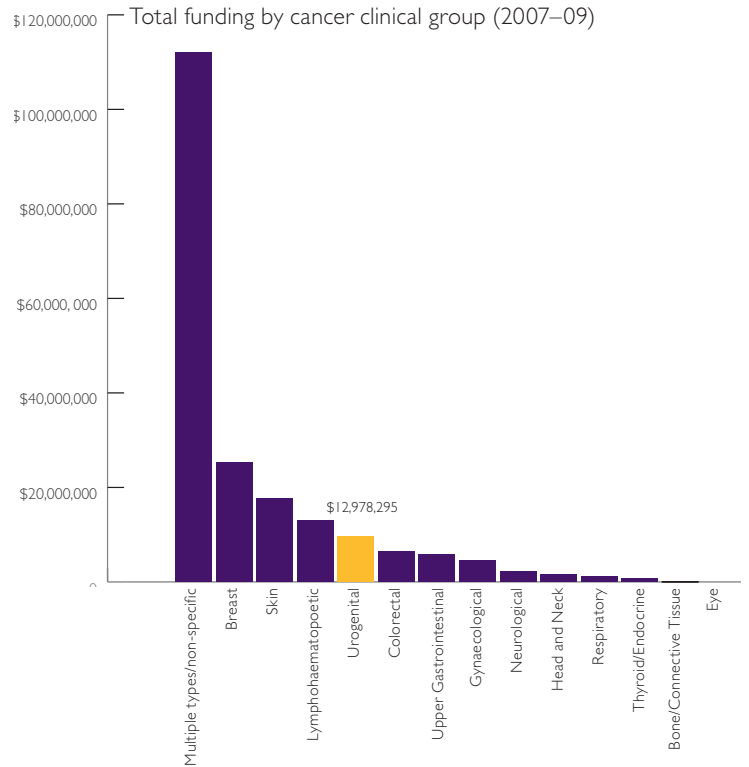
Most treatments for urological cancer have some impact on quality of life. Continence and sexual dysfunction issues are associated with most treatments for prostate cancer.

The NSW Government agency dedicated to lessening the impact of cancer through prevention, detection, innovation, research and information.



Research

- Urological cancer research accounted for 5.5 per cent of the total cancer research funds from all sources from 2007-2009.
- Although breast cancer research received more than double the amount of funding overall, urological cancer attracted industry funding more than six times greater than for breast cancer.
- Funding for urological cancer research from both government and charitable sources increased from 2004-2006 to 2007-2010. However, funding from industry declined slightly over this period.
- Overall, urological cancer research was ranked fourth in terms of the amount of research funding provided for a specific tumour group (multiple types excluded from this ranking).



Clinical trials

- During the period 2007 to 2009 there were on average 28 recruiting urological cancer trials per year, which accounted 10.4 per cent of all recruiting trials.
- The number of urological trial enrolments has remained relatively static over time, with an average of 180-190 new enrolments per annum.
- The proportion of enrolments to urological cancer trials has decreased from 12 per cent of all cancer trial enrolments in 2004-2006 to nine per cent in 2007-2009. This number may be influenced by one or two large-scale trials, which have now closed.
- Urological cancer has relatively few trials recruiting or open for enrolment relative to its share of the proportion of new cancers.
- The low proportion of trials is in part due to the absence of effective drugs to deal with prostate cancer in particular, and difficulties undertaking surgical randomised clinical trials.

Relative proportions of a) new enrolments to cancer clinical trials and b) recruiting cancer trials compared to proportion of total new cancer cases across clinical groupings

