NATIONAL CANCER INSTITUTE,

CAIRO UNIVERSITY, EGYPT

Cancer Registry

2002-2003

National Cancer Institute Registry

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Preface

Cancer registries collect information about the occurrence (incidence) of cancer, the types of cancers diagnosed and their locations within the body, the extent of cancer at the time of diagnosis (disease stage), and the kinds of treatment that patients receive. In population based-registries these data are reported to a central statewide, or regional registry from various medical facilities, including hospitals, physicians' offices, therapeutic radiation facilities, freestanding surgical centers, and pathology laboratories.

Data collected by state cancer registries enable public health professionals to better understand and address the cancer burden. Registry data are critical for targeting programs focused on risk-related behaviors (e.g., tobacco use and exposure to the sun) or on environmental risk factors (e.g., radiation and chemical exposures). Such information is also essential for identifying when and where cancer screening efforts should be enhanced and for monitoring the treatment provided to cancer patients. In addition, reliable registry data are fundamental to a variety of research efforts, including those aimed at evaluating the effectiveness of cancer prevention, control, or treatment programs.

The National Cancer Institute Registry, a hospital-based-cancer-registry, has been collecting cancer information for cancer patients since 1990. It started with the inpatient sector, then since 2001, the information we collect was standardized and comprehensive for both inpatients and outpatients. It was used in research into the causes of cancer, in education and information programmes, and in the planning of a hospital-based strategy to deliver the best cancer care to our cancer patients.

The information presented in this report is the second to be published including data for the years 2002-2003 after the first in 2001. In this publication we overcome some of the technical problems related to the data quality check and completeness we faced in the first publication. This was accomplished by training, operation review and close supervision of the staff and data collected.

We welcome comments, feedbacks and any form of communication that would allow improvements and better acheivements of our goals.

Aknowledgement

All members of the department of Cancer Epidemiology and Biostatistics would like to express their deepest thanks and gratititude to all those who contributed to bring this piece of work into reality.

We would also like to mention our cancer patients and specifically the staff of the NCI, without them and their hard work, this would not take place.

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CANCER STATISTICS AT
NATIONAL CANCER INSTITUTE, CAIRO
2002-2003

PART I
INTRODUCTION

In Egypt today, the number of new cancer patients per year is estimated to be 70,000. Added to these are another total of 250,000 patients who have accumulated from previous years who require medical care. Accumulated patients represent more than three times the number of new cases. This patient load will expand in the future as the population continues to grow, and as the prevalence of known etiologic factors increase. Egyptian patients with cancer usually present at a relatively advanced stage of their disease, which has a negative impact on treatment results.

At the National Cancer Institute (NCI), over a 33 year period (1970 – 2003) more than 300,000 new patients visited the NCI, together with in excess of one million outpatient visits. About 35% of patients came from the Metropolitan areas, 24% from Lower Egypt, and 40% from Upper Egypt. About 65% of patients are treated free of charge and private patients generally have health insurance which covers their cost. The present hospital of 550 beds is the largest cancer institution in the Middle East. In the years 2002-2003, 38,474 new patients were seen at the NCI, and the number of outpatient visits was approximately 250,000 visits.

Since NCI is the leading comprehensive cancer center in the country, it is overloaded by patients who are referred from allover Egypt, although in recent years six small cancer centers have opened throughout the country. In addition to these cancer centers, six university-based clinical oncology departments operate in various parts of Egypt.

Cancer registry at NCI started as the biggest hospital based registry in Egypt. Data of incident cases was actively collected from all premises of the hospital that is capable of dealing with cancer patients. There are several resources from which registry staffs collect information on cancer patients. These include medical records, department of pathology (surgical and cytopathology), hematology laboratories, radiotherapy, outpatient clinics and postmortem section.

Case-findings and data collection:

All medical staff of Biostatistics and Cancer Epidemiology Department were involved in data collection and abstraction. A standardized format containing essential items and other optional data was formed (Appendix A).

When needed and due to excess workload, other medical doctors from residents and junior staff joined the team of the department. Based on the automated hospital information network, lists of patients found not to have been diagnosed through pathology were generated and distributed to the whole team for completing diagnosis. A consensus was made to report diagnosis prioritized as followed:

1. Pathology report from NCI, or after slide revision.
2. Diagnosis reported explicitly by the treating doctor.
3. Log books of specialized clinics as chest, pain and radiotherapy.
4. Lastly if the pathologic or laboratory diagnosis were not verified, clinical diagnosis is considered; for example:
    a. Cases with multiple secondaries with unknown primary diagnosed through radiologic/imaging techniques.
    b. Advanced/inoperable cases after endoscopy, laparotomy…etc.
    c. Clinical examination and/or radiologic or laboratory tests that gave high suspicion of malignancy.

Data management and data quality:

Before and during the phase of data entry, validation of data was done through the following:

1. Assurance of completeness through continuous generation of patients' lists who do not have diagnosis, or those not classified as cancer or non-cancer.
2. Checking essential demographic data as age or date of birth, sex or address are done. Patient lists were evaluated for duplicates.
3. Internal quality checks: random selection of some records was done systematically for double checks of data abstraction and to ensure completeness.

Data entry was achieved by personnel of Biostatistics Department who had at least 10 years of experience in medical terminology and ICD coding. The primary site (topography) and histology (morphology) of malignancies are identified and coded according to the International Classification of Diseases for Oncology (ICD-0). Data entry was done under supervision of medical department staff. Data management was done using computer software program (SAS).

Data are presented as frequency tables containing number and percentages of all newly diagnosed cases for the years 2002, 2003 and both together. Then frequency distribution by sites of involvement (systems and organs) will be presented, followed by distribution by gender for each system. Tables containing male to female ratio and median age will be displayed for different systems. Some selected issues of medical or epidemiologic importance will be presented either in tables or graphs (breast, liver, childhood cancers).

PART II

SECTION I

OVERALL CANCER STATISTICS AT NATIONAL CANCER INSTITUTE, CAIRO 2002-2003

Between January 2002 and December 2003, the total number of patients who visited the NCI was 38,474, just over 19,000 cases each year. Of these 18,496 were confirmed malignant, Table 1. There were 9,340 (50.5%) males and 9,156 (49.5%) females, with a ratio of nearly 1:1. Histopathologic diagnosis of malignancy was confirmed in 79.5 of cases. The remaining diagnoses were made on laboratory, clinical and radiological grounds in 20.5% of cases, (Table 2). The age distribution of the cases by year of diagnosis and gender is shown in Figures 1 and 2. Fifty four percent of cases were between the ages 40 through 64 years and 10.5 % were below 20 years of age, Figure 1. There was a male predominance for patients above 60 years, females were more frequent in the age groups 35 to 54 years, Figure 2. The median age for males was 53 years and 50 years for females. Fifty percent of the cases were from Cairo and Giza governorate, Table 4.

The distribution of new cases by system and year of diagnosis is shown in Figure 3 and the distribution by system and sex is shown in Figure 4. The most common cancer site by year of diagnosis and sex is shown in Figure 5. The most cancer site was breast cancer, over 3,500 (19%) new cases. The urinary bladder cancer was the next most common (10.4%), followed by lymphoma and liver cancer, 8.6% and 7.5%, respectively. Among males, cancer of the urinary bladder (16.2%) was the most frequent site followed by liver cancer (11.3%) and lymphoma (10.8%). For females, breast cancer ranked first (37.5%) followed by lymphoma (6.4%) and leukemia (5.9%).

Table 1: New Patients Who Visited the NCI, 2002-03 for Confirmation of Malignancy (n=38,474).

		2002 n (%)	2003 n (%)	2002-03 n (%)
Total		19405 (100.0)	19069 (100.0)	38474 (100.0)
Malignant	Proven	9191 (47.4)	9305 (48.8)	18496 (48.1)
	Under investigation	3214 (16.6)	3524 (18.5)	6738 (17.5)
Non malignant		6913 (35.6)	6120 (32.1)	13033 (33.9)
Borderline		87 (0.4)	120 (0.6)	207 (0.5)

Table 2: New Cancer Cases Who Visited the NCI, 2002-03 by Basis of Diagnosis (n=18,496).

	2002 n (%)	2003 n (%)	2002-03 n (%)
Histopathologic	7301 (79.4)	7407 (79.6)	14708 (79.5)
Non-histopathologic	1890 (20.6)	1898 (20.4)	3788 (20.5)
Total	9191	9305	18496

Table 3: 18,496 New Cancer Cases by Gender, NCI 2002-03.

Gender	2002 n (%)	2003 n (%)	2002-03 n (%)
Males	4671 (50.8)	4669 (50.2)	9340 (50.5)
Females	4520 (49.2)	4636 (49.8)	9156 (49.5)
Total	9191	9305	18496

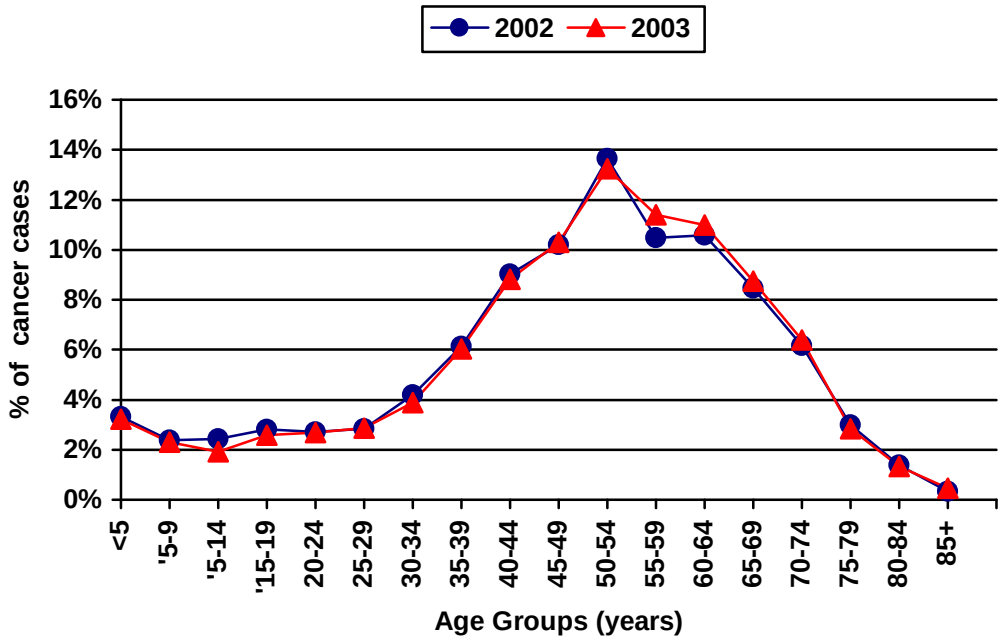

Figure 1: Age Distribution of 18,496 New Cancer Cases by Year of Diagnosis, NCI 2002-03.

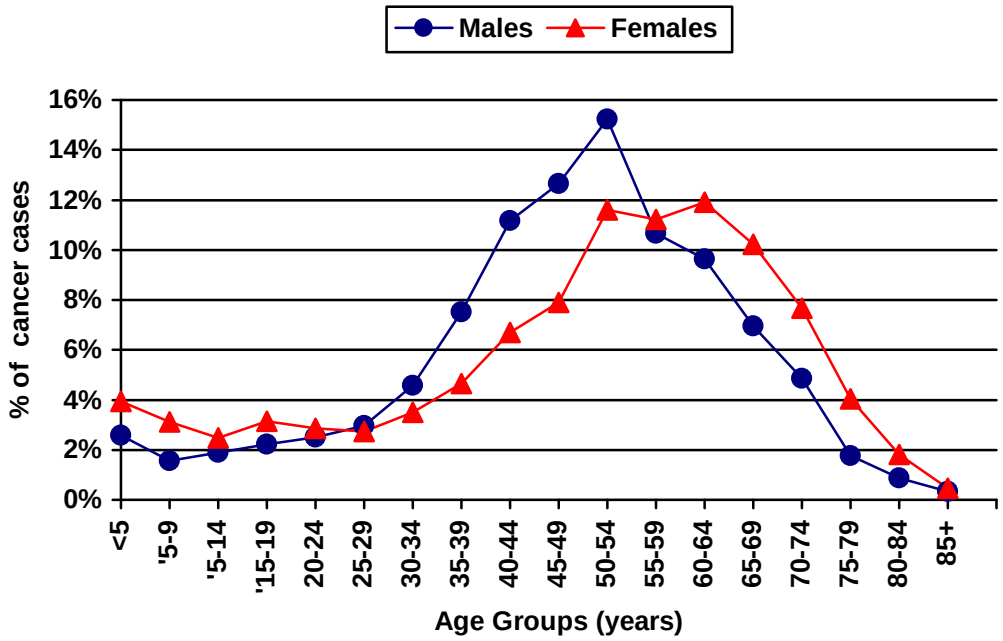

Figure 2: Age Distribution of 18,496 New Cancer Cases by Gender, NCI 2002-03.

Table 4: Distribution of Egyptian Population and 18496 New Cancer Cases by Governorate, NCI 2002-03.

Governorate	Percent of Egyptian population	Cancer Cases, NCI		
		2002 n (%)	2003 n (%)	2002-03 n (%)
Cairo	11.1	2717 (29.6)	2726 (29.4)	5443 (29.5)
Giza	8.1	1816 (19.8)	1925 (20.7)	3741 (20.3)
Kalyubia	5.6	818 (8.9)	794 (8.6)	1612 (8.7)
Fayoum	3.3	620 (6.8)	637 (6.9)	1257 (6.8)
Beni Suef	3.2	595 (6.5)	597 (6.4)	1192 (6.5)
Sharkia	7.2	384 (4.2)	412 (4.4)	796 (4.3)
Menoufia	4.7	379 (4.1)	369 (4.0)	748 (4.1)
Dakahlia	7.7	281 (3.1)	241 (2.6)	522 (2.8)
Gharbia	5.6	226 (2.5)	231 (2.5)	457 (2.5)
Kafr El-Sheik	3.7	147 (1.6)	149 (1.6)	296(1.6)
Menya	5.6	169 (1.8)	191 (2.1)	360 (2.0)
Behera	6.7	129 (1.4)	152 (1.6)	281 (1.5)
Suez	0.7	116 (1.3)	106 (1.1)	222 (1.2)
Souhag	5.3	103 (1.1)	111 (1.2)	214 (1.2)
Qena	4.1	140 (1.5)	153 (1.7)	293 (1.6)
Ismailia	1.2	84 (0.9)	95 (1.0)	179 (1.0)
Aswan	1.6	52 (0.6)	59 (0.6)	111 (0.6)
Damietta	1.5	100 (1.1)	73 (0.8)	173 (0.9)
Alexandria	5.5	54 (0.6)	54 (0.6)	108 (0.6)
Port said	0.8	58 (0.6)	67 (0.7)	125 (0.7)
Assiut	4.7	42 (0.5)	62 (0.7)	104 (0.6)
Sinai	0.4	33 (0.4)	32 (0.4)	65 (0.4)
Red Sea	0.3	11 (0.1)	16 (0.2)	27 (0.2)
El-Wadi El-Gadid	0.2	12 (0.1)	10 (0.1)	22 (0.1)
Matrouh	0.3	5 (0.1)	2 (0.1)	7 (0.1)

Other countries	---	89 (1.0)	24 (0.3)	113 (0.6)
Unknown	---	11	17	28

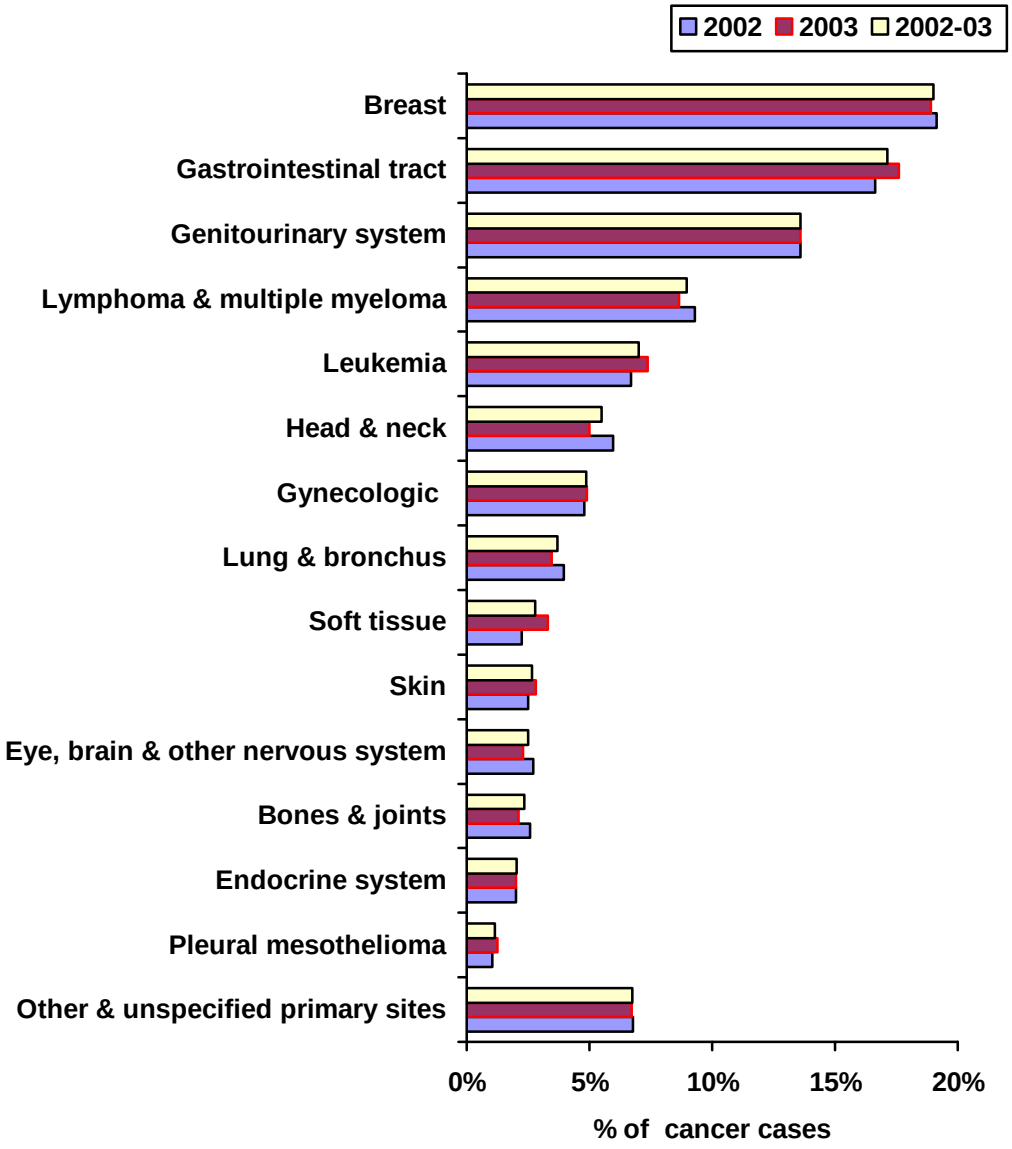

Figure 3: Distribution of 18,496 New Cancer Cases by System and Year of Diagnosis, NCI 2002-03.

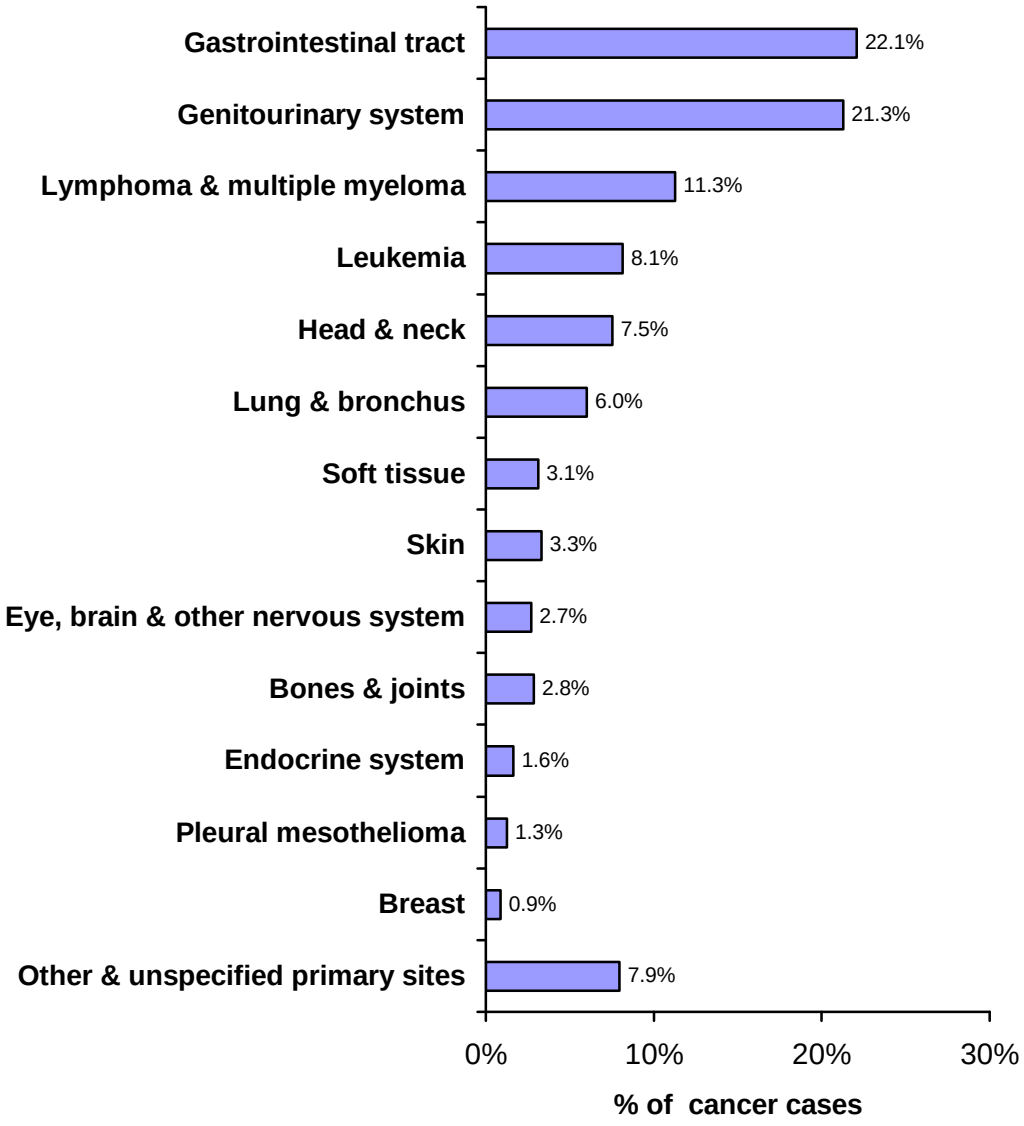

Figure 4a: Distribution of 9,340 New Males Cancer Cases by System, NCI 2002-03.

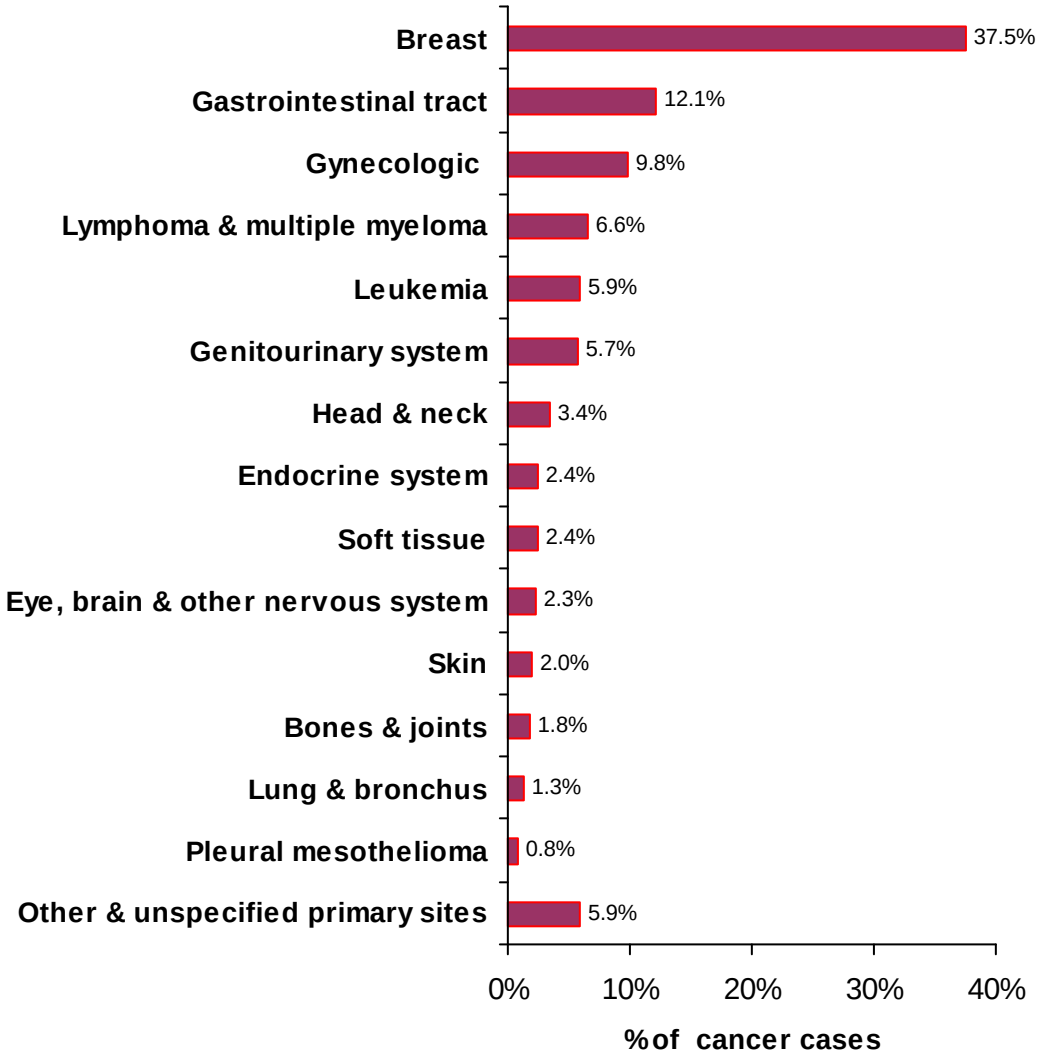

Figure 4b: Distribution of 9,156 New Females Cancer Cases by System, NCI 2002-03.

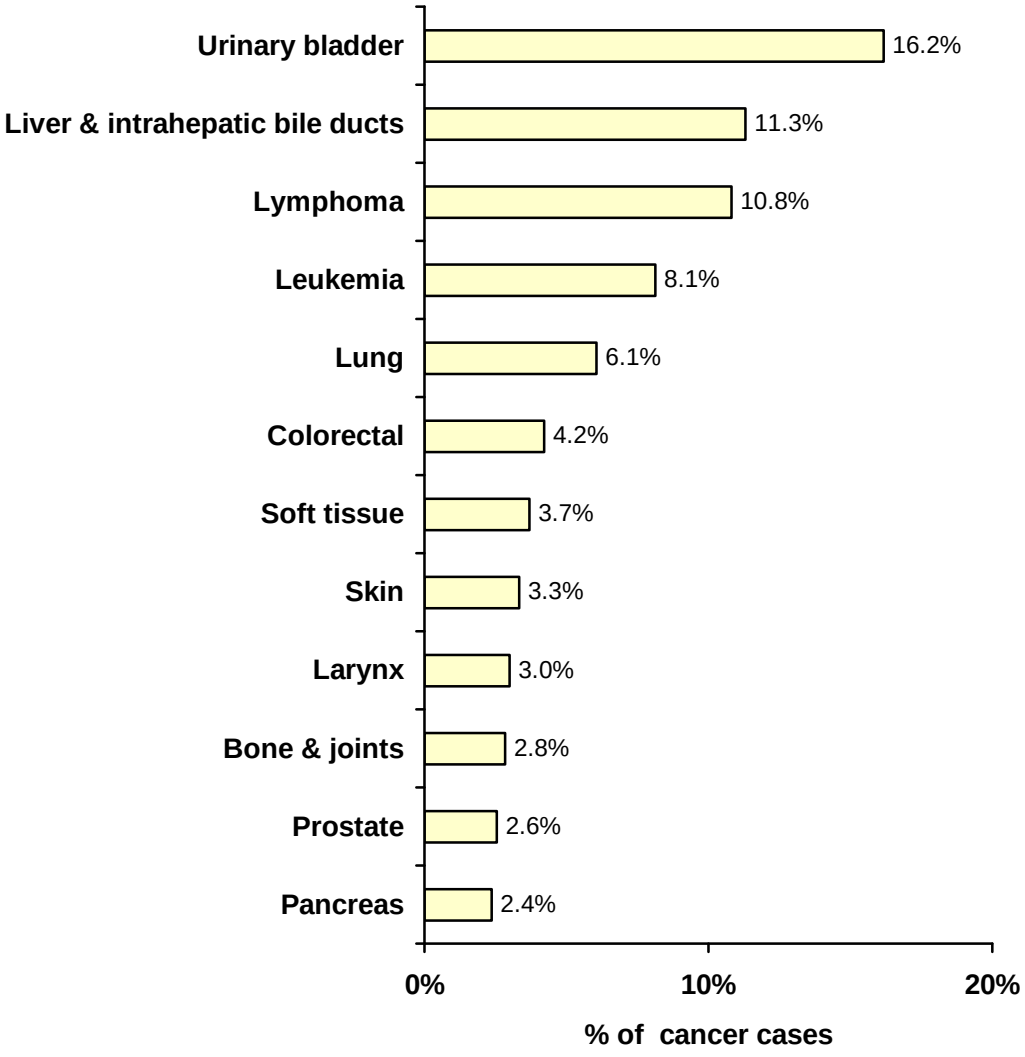

Figure 5a: Most Common Cancer among Males NCI 2002-03 combined.

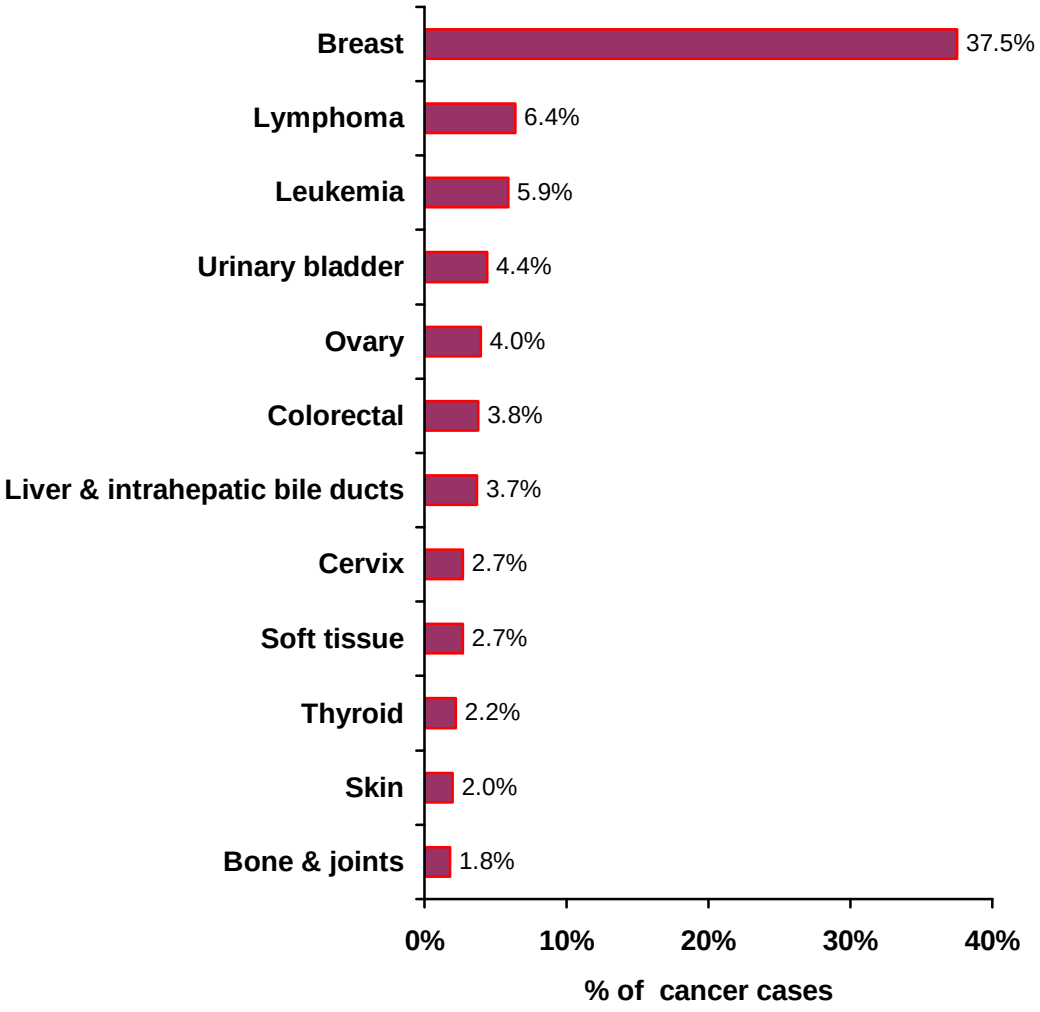

Figure 5b: Most Common Cancer among Females NCI 2002-03 combined.

SECTION II

CANCER STATISTICS FOR SPECIFIC SITES

NATIONAL CANCER INSTITUTE, CAIRO

2002-2003

CANCER OF HEAD & NECK CANCER:

Between January 2002 and December 2003, there were 1015 cases head & neck cancer attending the NCI. These cases accounted for 5.5% of all 18,496 newly diagnosed proven malignant cases. There were 704 males (7.5% of all cancer types) and 311 females (3.4% of all cancer types). The distribution of the cases by year and gender are shown in Tables 5 and 6. The male to female ratio and the median age of each site shown in Table 7. There was a male predominance in all types except cancer of the salivary glands, there was a female predominance. The median age ranged from 46.5 years for cancer of the nasopharynx to 60 years for cancer of the lip.

Table 5: New Cancer Cases of Oral Cavity and Pharynx, NCI 2002-03

Site	2002 n (%)	2003 n (%)	2002-03 n (%)
Oral cavity & pharynx	549 (6.0)	466 (5.0)	1015 (5.5)
Lip	30 (0.3)	14 (0.2)	44 (0.2)
Tongue	64 (0.7)	67 (0.7)	131 (0.7)
Gum	22 (0.2)	21 (0.2)	43 (0.2)
Mouth	47 (0.5)	45 (0.5)	92 (0.5)
Salivary glands	38 (0.4)	32 (0.3)	70 (0.4)
Tonsil	9 (0.1)	5 (0.1)	14 (0.1)
Oropharynx	7 (0.1)	11 (0.1)	18 (0.1)
Nasopharynx	58 (0.6)	44 (0.5)	102 (0.6)
Hypopharynx	52 (0.6)	47 (0.5)	99 (0.5)
Pharynx, NOS	5 (0.1)	6 (0.1)	11 (0.1)
Nose, sinuses, etc	48 (0.5)	39 (0.4)	87 (0.5)
Larynx	169 (1.8)	135 (1.5)	304 (1.6)

Table 6: New Cancer Cases of Oral Cavity and Pharynx, by Gender, NCI 2002-03.

Site	Males n (%)	Females n (%)	Total n (%)
Oral cavity & pharynx	704 (7.5)	311(3.4)	1015 (5.5)
Lip	34 (0.4)	10 (0.1)	44 (0.2)
Tongue	75 (0.8)	56 (0.6)	131 (0.7)
Gum	22 (0.3)	21 (0.2)	43 (0.2)
Mouth	55 (0.6)	37 (0.4)	92 (0.5)
Salivary glands	32 (0.3)	38 (0.4)	70 (0.4)
Tonsil	8 (0.1)	6 (0.1)	14 (0.1)
Oropharynx	13 (0.1)	5 (0.1)	18 (0.1)
Nasopharynx	74 (0.8)	28 (0.3)	102 (0.6)
Hypopharynx	55 (0.6)	44 (0.5)	99 (0.5)
Pharynx, NOS	8 (0.1)	3 (<0.1)	11 (0.1)
Nose, sinuses, etc	47 (0.5)	40 (0.4)	87 (0.5)
Larynx	281 (3.1)	23 (0.3)	304 (1.6)

Table 7: New Cancer Cases of Oral Cavity and Pharynx, by Gender and Median Age, NCI 2002-03.

Site	n (%)	M/F ratio	Median Age (yrs)
Lip	44 (0.2)	3.40	60.0
Tongue	131 (0.7)	1.34	56.0
Gum	43 (0.2)	1.05	55.0
Mouth	92 (0.5)	1.49	55.0
Salivary glands	70 (0.4)	0.84	52.5

Tonsil	14 (0.1)	1.33	55.0
Oropharynx	18 (0.1)	2.60	53.0
Nasopharynx	102 (0.6)	2.64	46.5
Hypopharynx	99 (0.5)	1.25	52.0
Pharynx, NOS	11 (0.1)	2.67	52.0
Nose, sinuses, etc	87 (0.5)	1.18	50
Larynx	304 (1.6)	12.22	56

CANCERS OF GASTROINTESTINAL TRACT:

Between January 2002 and December 2003, there were 3,169 cancer cases of the gastrointestinal tract attending the NCI. These cases accounted for 17.1% of all 18,496 newly diagnosed proven malignant cases. There were 2,061 males (22.1% of all cancer types) and 1,108 females (12.1% of all cancer types). The distribution of the cases by year and gender are shown in Tables 8 and 9. The male to female ratio and the median age of each site shown in Table 10. There was a male predominance in all types except cancer of the small intestine and gallbladder were there was a female predominance. The median age ranged from 46 years for cancer of the rectum and rectosigmoid to 60 years for cancer of the esophagus.

Table 8: New Cancer Cases of Gastrointestinal tract, NCI, 2002-03

Site	2002 n (%)	2003 n (%)	2002-03 n (%)
Gastrointestinal tract	1530 (16.7)	1639 (17.6)	3169 (17.1)
Esophagus	111 (1.2)	122 (1.3)	233 (1.3)
Stomach	161 (1.8)	165 (1.8)	326 (1.8)
Small intestine	23 (0.3)	22 (0.2)	45 (0.2)
Colon	165 (1.8)	189 (2.1)	354 (1.9)
Rectum & rectosigmoid	206 (2.2)	180 (1.9)	386 (2.1)
Liver & intrahepatic bile duct	675 (7.3)	719 (7.7)	1394 (7.5)
Gallbladder & other biliary	37 (0.4)	46 (0.5)	83 (0.5)
Pancreas	150 (1.6)	192 (2.1)	343 (1.8)
Other gastrointestinal tract	2 (<0.1)	4 (<0.1)	6 (<0.1)

Table 9: New Cancer Cases of Gastrointestinal Tract by Gender, NCI, 2002-03.

Site	Males n (%)	Females n (%)	Total n (%)
Gastrointestinal tract	2061 (22.1)	1108 (12.0)	3169 (17.1)
Esophagus	148 (1.6)	85 (0.9)	233 (1.3)
Stomach	187 (2.0)	139 (1.5)	326 (1.8)
Small intestine	19 (0.2)	26 (0.3)	45 (0.2)
Colon	192 (2.1)	162 (1.8)	354 (1.9)
Rectum & rectosigmoid	202 (2.2)	184 (2.0)	386 (2.1)
Liver & intrahepatic bile duct	1055 (11.3)	339 (3.7)	1394 (7.5)
Gallbladder & other biliary	34 (0.4)	49 (0.5)	83 (0.5)
Pancreas	220 (2.4)	122 (1.3)	343 (1.8)
Other gastrointestinal tract	4 (<0.1)	2 (<0.1)	6 (<0.1)

Table 10: New Cancer Cases of Gastrointestinal Tract by Gender and Median Age, NCI 2002-03.

Site	n (%)	M/F ratio	Median Age (yrs)
Esophagus	233 (1.3)	1.74	60
Stomach	326 (1.8)	1.35	53
Small intestine	45 (0.2)	0.73	50
Colon	354 (1.9)	1.19	50
Rectum & rectosigmoid	386 (2.1)	1.10	46
Liver & intrahepatic bile duct	1394 (7.5)	3.11	57
Gallbladder & other biliary	83 (0.5)	0.69	57
Pancreas	342 (1.8)	1.80	58

Stomach cancer:

Between January 2002 and December 2003, there were 326 new cases of stomach cancer. These cases accounted for 10.3% of the 3,169 gastrointestinal tract cases and 1.8% all 18,496 newly diagnosed cases. There were 187 (2%) males and 139 (1.5%) females, a ratio of 1.35, their median age was 53 years and 63.1% of the cases were diagnosed as adenocarcinoma and 12.9% as signet ring cell carcinoma. Figure 6 shows the age specific distribution of stomach cancer by gender.

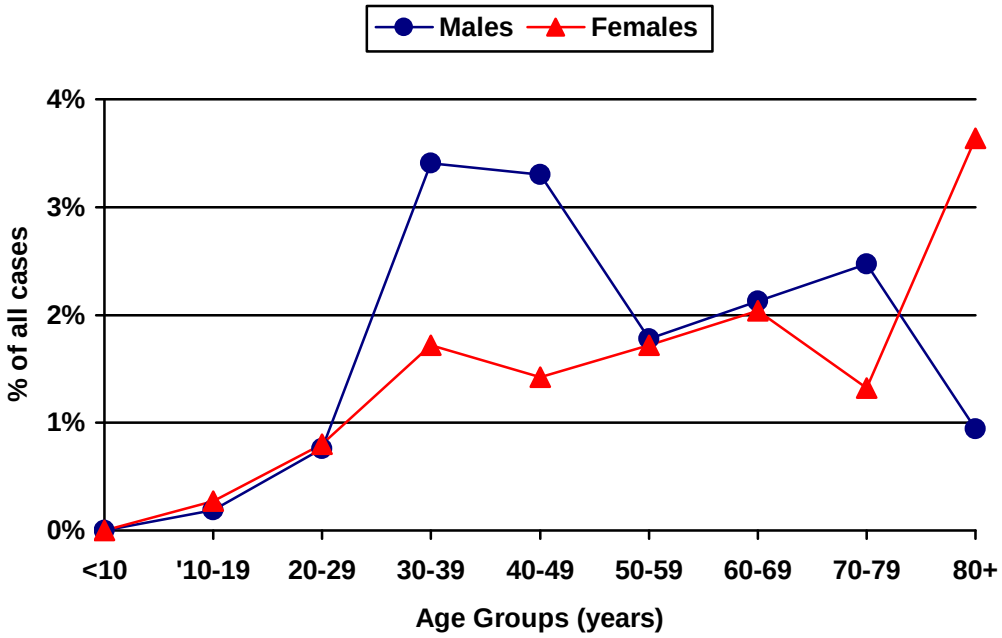

Figure 6: Age Specific Frequency of Stomach Cancer by Gender, NCI 2002-03.

Colorectal cancer:

Between January 2002 and December 2003, there were 740 new cases of colon cancer. These cases accounted for 23.4% of the 3,169 gastrointestinal tract cases and 4.0% of all 18,496 newly diagnosed cases. There were 394 (4.2%) males and 346 (3.8%) females. Colorectal cancer ranked 6th most common cancer site among males females.

Of the 740 cases of colorectal cancer, there were 354 new cases of colon cancer. These cases accounted for 11.2% of the 3,169 gastrointestinal tract cases and 1.9% of all 18,496 newly diagnosed cases. There were 192 (2.1%) males and 162 (1.8%) females, a ratio of 1.18, their median age was 50 years and 76% of the cases were diagnosed as adenocarcinoma and 8.1% as mucinous adenocarcinoma. Figure 7 shows the age specific distribution of colon cancer by gender.

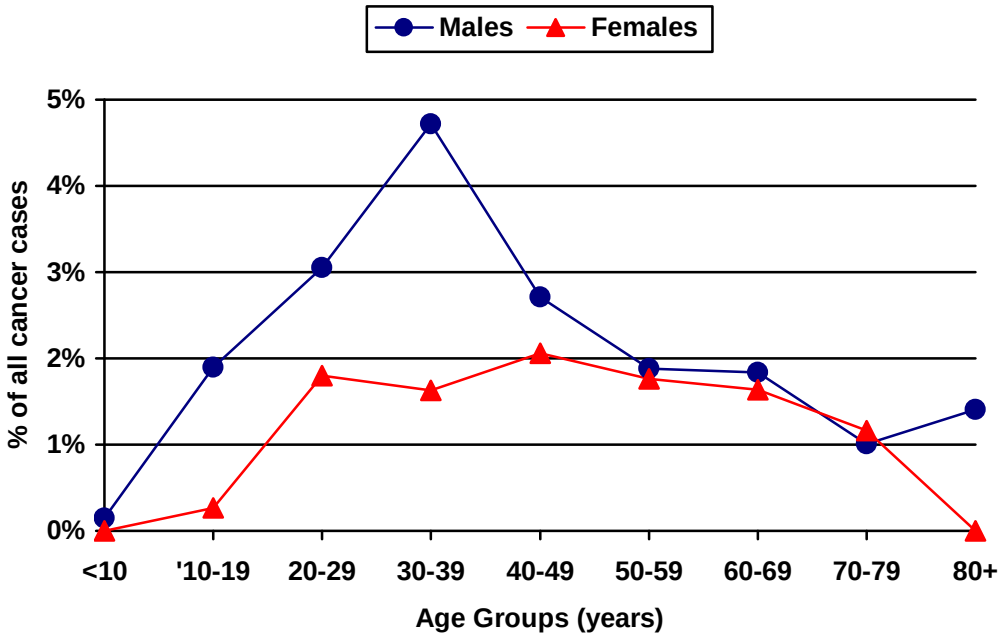

Figure 7: Age Specific Frequency of Colon Cancer by Gender, NCI 2002-03.

There were 386 new cases of rectum and rectosigmoid cancer. These cases accounted for 12.2% of the 3,169 gastrointestinal tract cases and 2.1% of all 18,496 newly diagnosed cases. There were 202 (2.2%) males and 184 (2.0%) females, a ratio of 1.1, their median age was 46 years and 68.8% of the cases were diagnosed as adenocarcinoma and 12.5% as mucinous adenocarcinoma. Figure 8 shows the age specific distribution of rectum and rectosigmoid cancer by gender.

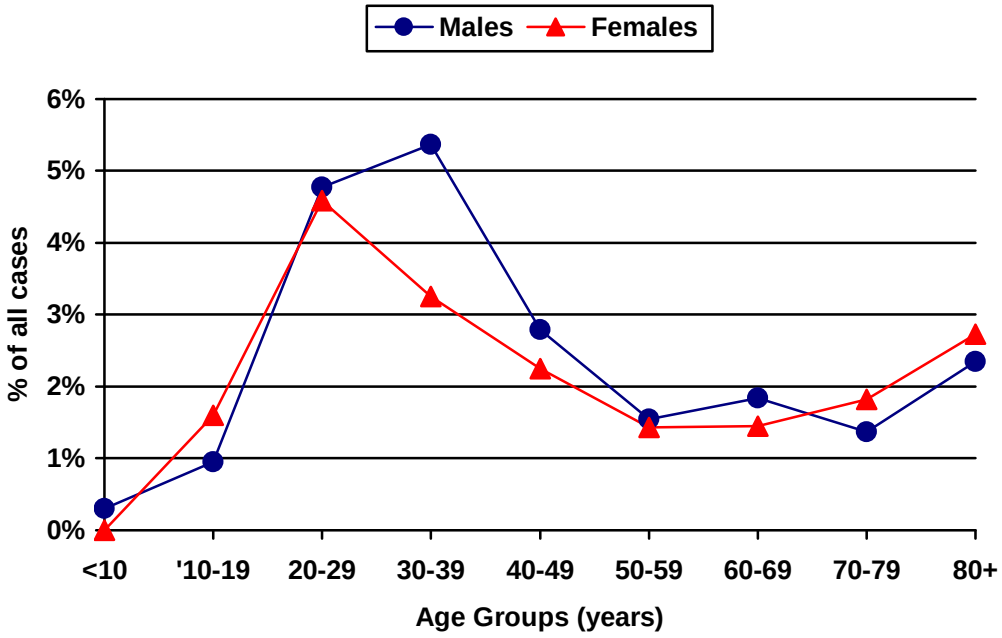

Figure 8: Age Specific Frequency of Rectum and Rectosigmoid Cancer by Gender, NCI 2002-03.

Liver cancer:

Between January 2002 and December 2003, there were 1,394 new cases of liver cancer. These cases accounted for 44% of the 3,169 gastrointestinal tract cases and 7.5% all 18,496 newly diagnosed cases. There were 1,055 (11.3%) males and 339 (3.7%) females, a ratio of 3.11 and their median age was 57 years. Liver cancer ranked 2nd most common cancer site among males and 7th among females. Ninety percent of the cases were diagnosed as hepatocellular carcinoma, 4.6% as adenocarcinoma, and 1.6% hepatoblastoma. Figure 9 shows the age specific distribution of liver cancer by gender.

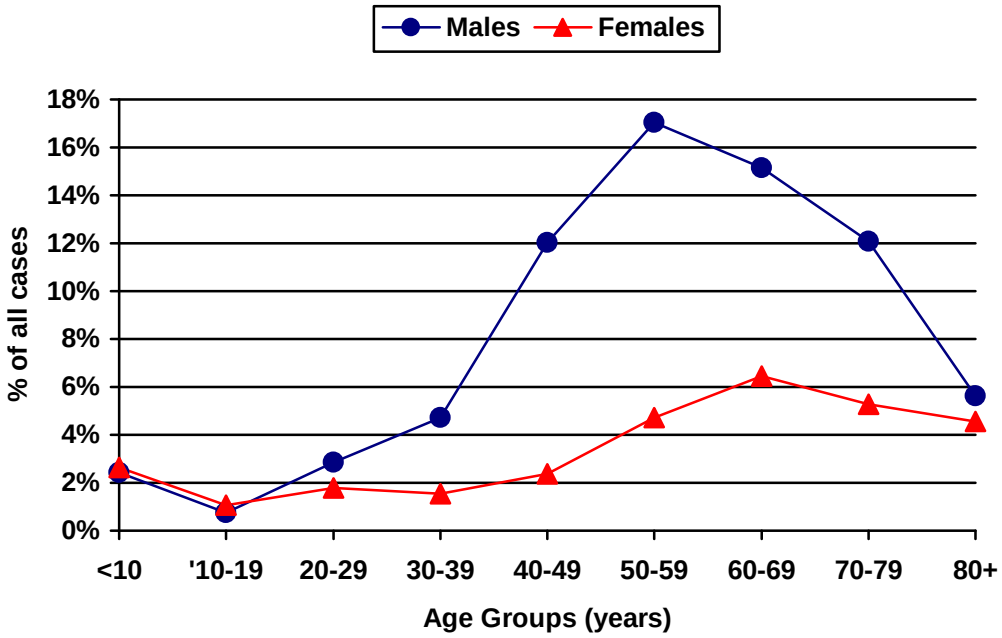

Figure 9: Age Specific Frequency of Liver Cancer by Gender, NCI 2002-03.

Pancreatic cancer:

Between January 2002 and December 2003, there were 342 new cases of pancreatic cancer. These cases accounted for 10.8% of the 3,169 gastrointestinal tract cases and 1.9% of all 18,496 newly diagnosed cases. There were 220 (2.4%) males and 122 (1.3%) females, a ratio of 1.80, their median age was 58 years and 55.7% of the cases were diagnosed as adenocarcinoma. Figure 10 shows the age specific distribution of pancreatic cancer by gender.

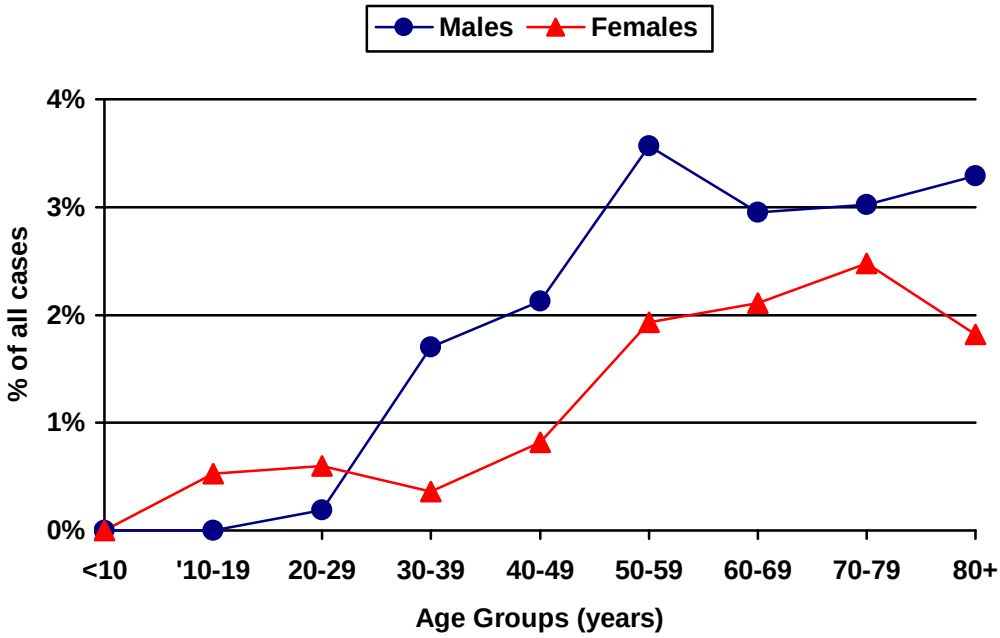

Figure 10: Age Specific Frequency of Pancreatic Cancer by Gender, NCI 2002-03.

CANCER OF LUNG:

Between January 2002 and December 2003, there were 671 new cases of lung cancer attending the NCI. These cases accounted for 3.6% of all 18,496 newly diagnosed proven malignant cases. There were 556 males (6% of all cancer types) and 115 females (1.3% of all cancer types). a male to female ratio of 4.83 and their median age was 60 years. Lung cancer ranked 5th most common cancer site among males. Figure 11 shows the age specific distribution of lung cancer by gender. The major pathological types are displayed in Table 11.

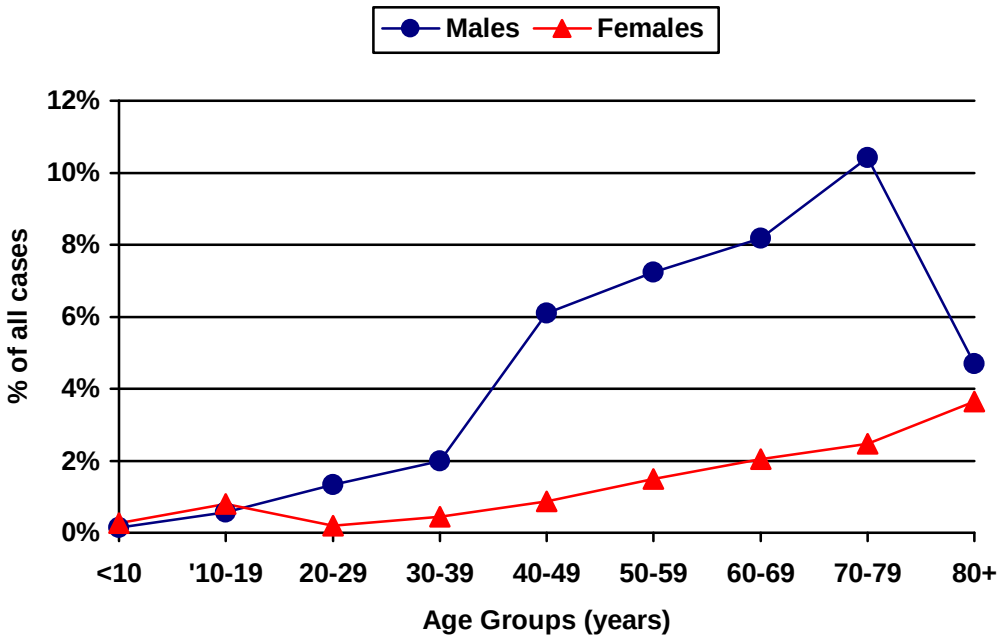

Figure 11: Age Specific Frequency of Lung Cancer by Gender, NCI 2002-03.

Table 11: Major Pathological Type of New Cases of Lung Cancer, NCI 2002-03.

Pathological type	Percent
Adenocarcinoma	24.5
Squamous cell carcinoma	19.8
Carcinoma undifferentiated	16.7
Bronchiolo-alveolar adenocarcinoma	15.5
Large cell carcinoma	5.6
Small cell carcinoma	5.8

MALIGNANT PLEURAL MESOTHELIOMA:

Between January 2002 and December 2003, there were 192 new cases of malignant pleural mesothelioma attending the NCI. These cases accounted for 1% of all 18,496 newly diagnosed proven malignant cases. There were 117 males (1.3% of all cancer types) and 75 females (0.8% of all cancer types). a male to female ratio of 1.56 and their median age was 52 years.

CANCER OF BONE, JOINTS AND ARTICULAR CARTILAGE:

Between January 2002 and December 2003, there were 432 new cancer cases of the bone and joints attending the NCI. These cases accounted for 2.3% of all 18,496 newly diagnosed proven malignant cases. There were 265 males (2.8% of all cancer types) and 167 females (1.8% of all cancer types), a ratio of 1.59 and their median age was 23 years. The distribution of the cases by year and gender is shown in Table 12. Bone cancer ranked 10th most common cancer site among males. Figure 12 shows the age specific distribution of bone cancer by gender. The major pathological types are displayed in Table 13.

Table 12: New Cases of Bone Cancer by Gender, NCI 2002-03.

Gender	2002 n (%)	2003 n (%)	2002-03 n (%)
Males	145 (3.1)	120 (2.6)	265 (2.8)
Females	91 (2.0)	76 (1.6)	167 (1.8)
Total	236 (2.6)	196 (2.1)	432 (2.3)

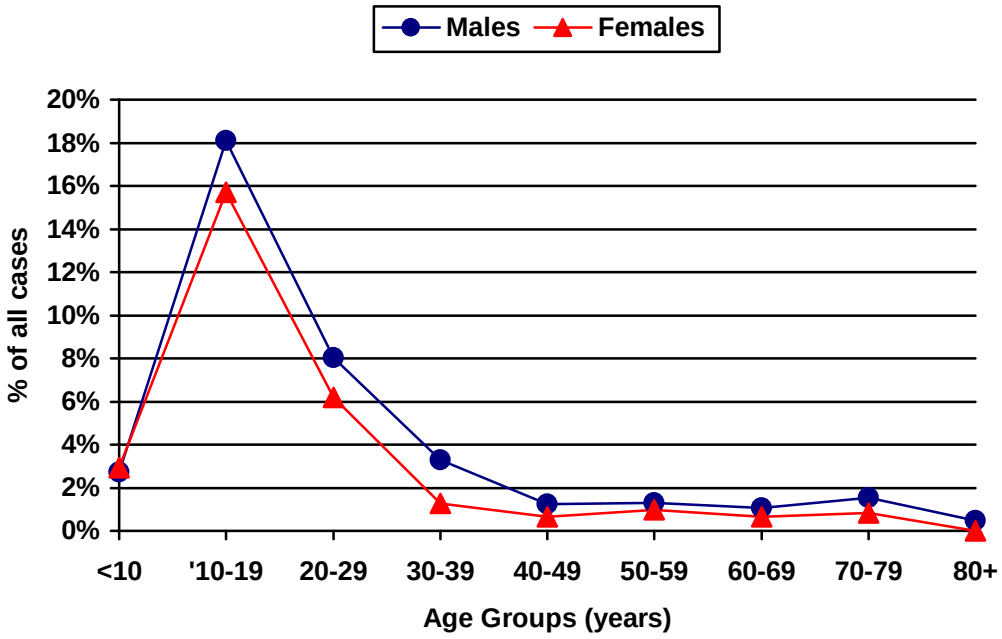

Figure 12: Age Specific Frequency of Bone Cancer by Gender, NCI 2002-03.

Table 13: Major Pathological Type of New Cases of Bone Cancer, NCI 2002-03.

Pathological type	Percent
Osteosarcoma	38.4
Chondrosarcoma	7.3
Ewing's sarcoma	15.5

CANCER OF SKIN:

Between January 2002 and December 2003, there were 492 new cases of skin cancer attending the NCI. These cases accounted for 2.7% of all 18,496 newly diagnosed proven malignant cases. There were 311 males (3.3% of all cancer types) and 181 females (2.0% of all cancer types), a ratio of 1.72 and their median age was 58 years. The distribution of the cases by year and gender is shown in Table 14. Skin cancer ranked 8th most common cancer site among males. Figure 13 shows the age specific distribution of skin cancer by gender. The major pathological types are displayed in Table 15.

Table 14: New Cases of Skin Cancer by Gender, NCI 2002-03.

Gender	2002 n (%)	2003 n (%)	2002-03 n (%)
Males	139 (3.0)	172 (3.7)	311 (3.3)
Females	92 (2.0)	89 (1.9)	181 (2.0)
Total	231 (2.5)	261 (2.8)	492 (2.7)

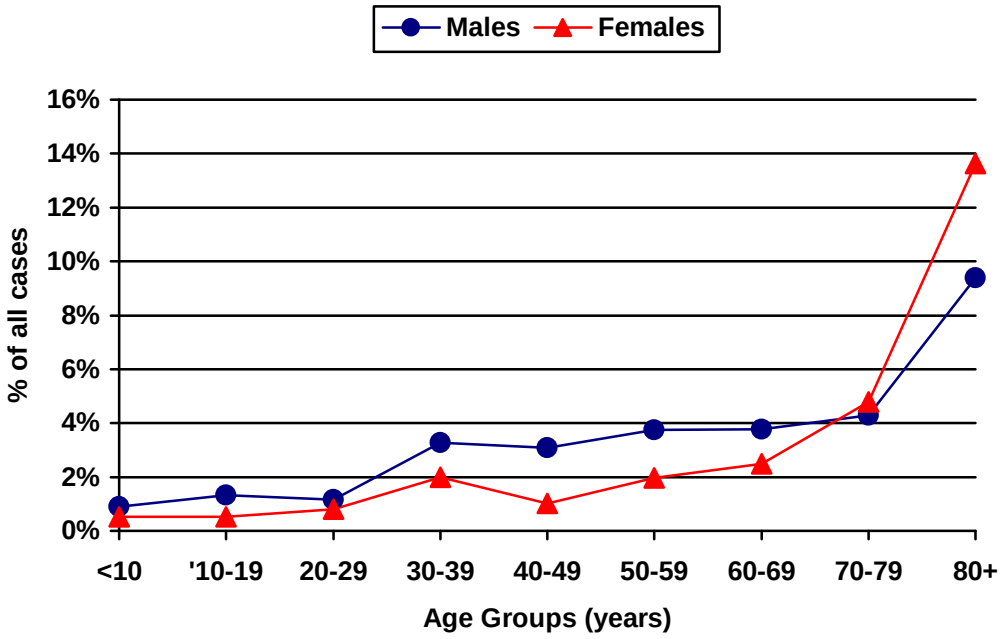

Figure 13: Age Specific Frequency of Skin Cancer by Gender, NCI 2002-03.

Table 15: Major Pathological Type of New Cases of Skin Cancer, NCI 2002-03.

Pathological type	Percent
Basal cell carcinoma	45.1
Squamous cell carcinoma	32.4
Melanomas	6.2
Dermatofibrosarcoma	3.8
Kaposi's sarcoma	2.5

CANCER OF CONNECTIVE, SUBCUTANEOUS AND OTHER SOFT TISSUES

Between January 2002 and December 2003, there were 515 new cases of soft tissue cancer attending the NCI. These cases accounted for 2.8% of all 18,496 newly diagnosed proven malignant cases. There were 293 males (3.1% of all cancer types) and 222 females (2.4% of all cancer types), a ratio of 1.32 and their median age was 45 years. The distribution of the cases by year and gender is shown in Table 16. Soft tissue cancer ranked 7th most common cancer site among males and 9th among females. Figure 14 shows the age specific distribution of soft tissue cancer by gender. The major pathological types are displayed in Table 17.

Table 16: New Cases of Soft Tissue Cancer by Gender, NCI 2002-03.

Gender	2002 n (%)	2003 n (%)	2002-03 n (%)
Males	113 (2.4)	180 (3.9)	293 (3.1)
Females	94 (2.1)	128 (2.8)	222 (2.4)
Total	207 (2.3)	308 (3.3)	515 (2.8)

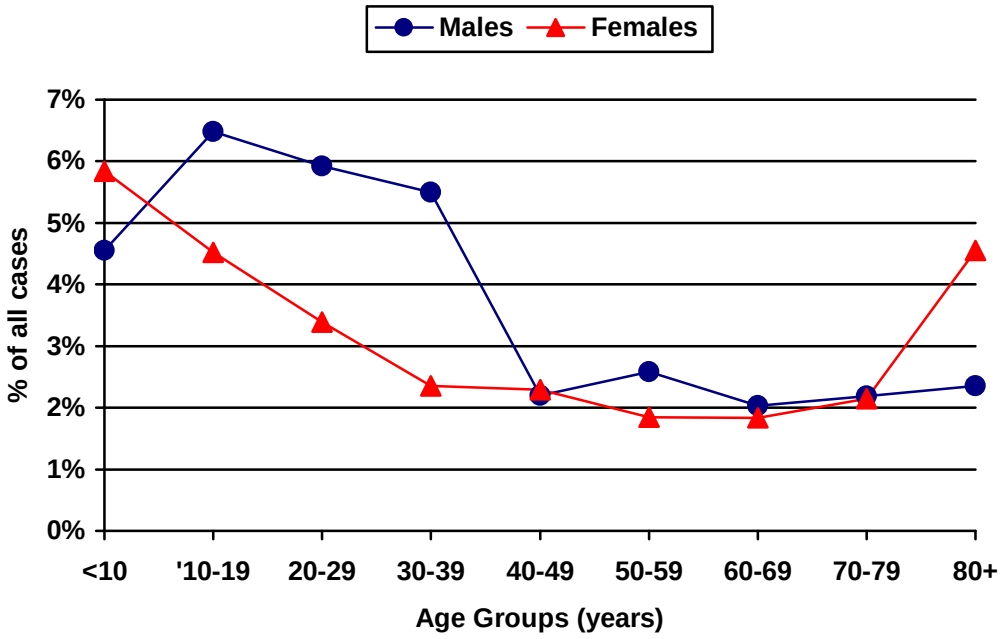

Figure 14: Age Specific Frequency of Soft Tissue Cancer by Gender, NCI 2002-03.

Table 17: Major Pathological Type of New Cases of Soft Tissue Cancer, NCI 2002-03.

Pathological type	Percent
Adenocarcinoma	11.6
Squamous cell carcinoma	5.4
Rhabdomyosarcoma	8.4
Liposarcoma	10.3
Other sarcomas	15.6

CANCER OF BREAST:

Between January 2002 and December 2003, there were 3,519 new cases of breast cancer attending the NCI. These cases accounted for 19% of all 18,496 newly diagnosed proven malignant cases. There were 82 males (0.9% of all cancer types) and 3,437 females (37.5% of all cancer types). The median age for males was 53.5 years and 49 years for the females. The distribution of the cases by year and gender is shown in Table 18. Breast cancer ranked 1st most common cancer site among females. Figure 15 shows the age specific distribution of breast cancer by gender. The major pathological types are displayed in Table 19.

Table 19: New Cases of Breast Cancer by Gender, NCI 2002-03.

Gender	2002 n (%)	2003 n (%)	2002-03 n (%)
Males	41 (0.9)	41 (0.9)	82 (0.9)
Females	1719 (38.0)	1718 (37.1)	3437 (37.5)
Total	1760 (19.2)	1759 (18.9)	3519 (19.0)

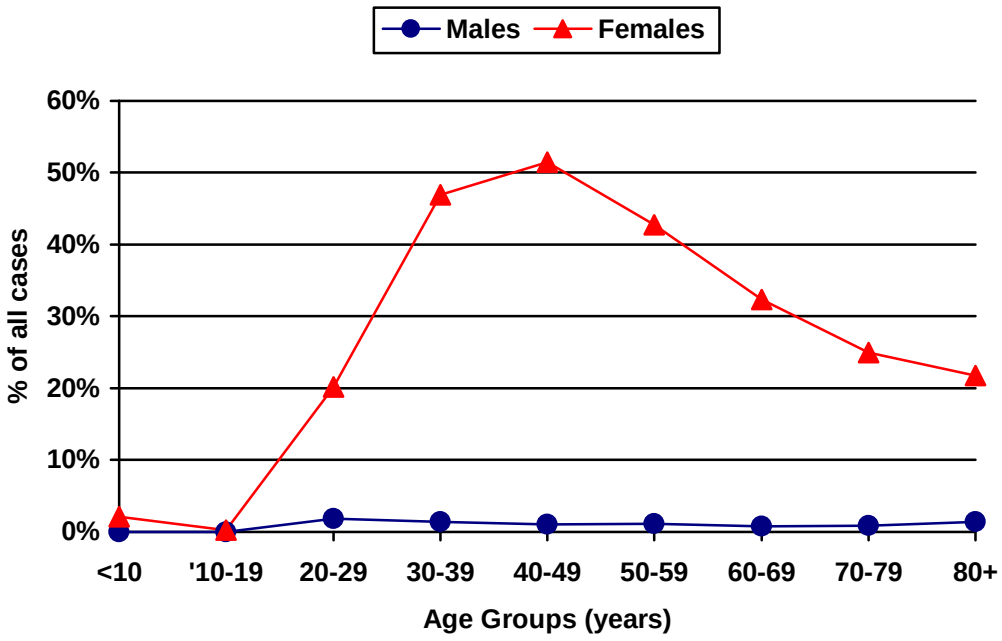

Figure 15: Age Specific Frequency of Breast Cancer by Gender, NCI 2002-03.

Table 19: Major Pathological Types of New Cases of Breast Cancer, NCI 2002-03.

Pathological type	Percent
Infiltrating duct carcinoma	86.7
Infiltrating lobular carcinoma	2.4
Infiltrating duct & lobular carcinoma	1.2
Medullary carcinoma	1.0
Adenocarcinoma	1.9

GYNECOLOGIC CANCERS:

Between January 2002 and December 2003, there were 898 new cases of female genital cancer attending the NCI. These cases accounted for 9.8% of all 9,156 newly diagnosed proven malignant female cases. The distribution of the cases by year is shown in Table 20. The median age ranged from 48 years for cancer of the ovary to 65 years for cancer of the vulva, Table 21. Ovarian cancer ranked 5th most common cancer site and cervical cancer ranked 8th. Figure 16 shows the age specific distribution of cancer of the cervix and ovary. The major pathological types of cervical and ovarian cancer are displayed in Table 22.

Table 20: New Cancer Cases of Female Genital Organs, NCI 2002-03.

Site	2002 n (%)	2003 n (%)	2002-03 n (%)
All sites	442 (9.8)	456 (9.8)	898 (9.8)
Vulva	22 (0.5)	20 (0.4)	42 (0.5)
Vagina	18 (0.4)	13 (0.3)	31 (0.3)
Cervix uteri	121 (2.7)	128 (2.8)	249 (2.7)
Corpus uteri	21 (0.5)	37 (0.8)	58 (0.6)
Uterus, NOS	78 (1.7)	72 (1.6)	150 (1.6)
Ovary	181 (4.0)	183 (4.0)	364 (4.0)
Other female genital	1 (<0.1)	3 (0.1)	4 (<0.1)

Table 21: New Cancer Cases of Female Genital Organs and Median Age, NCI 2002-03.

Site	2002-03 n (%)	Median Age (yrs)
Vulva	42 (0.5)	65
Vagina	31 (0.3)	55
Cervix uteri	249 (2.7)	52
Corpus uteri	58 (0.6)	60
Uterus, NOS	150 (1.6)	56
Ovary	364 (4.0)	48

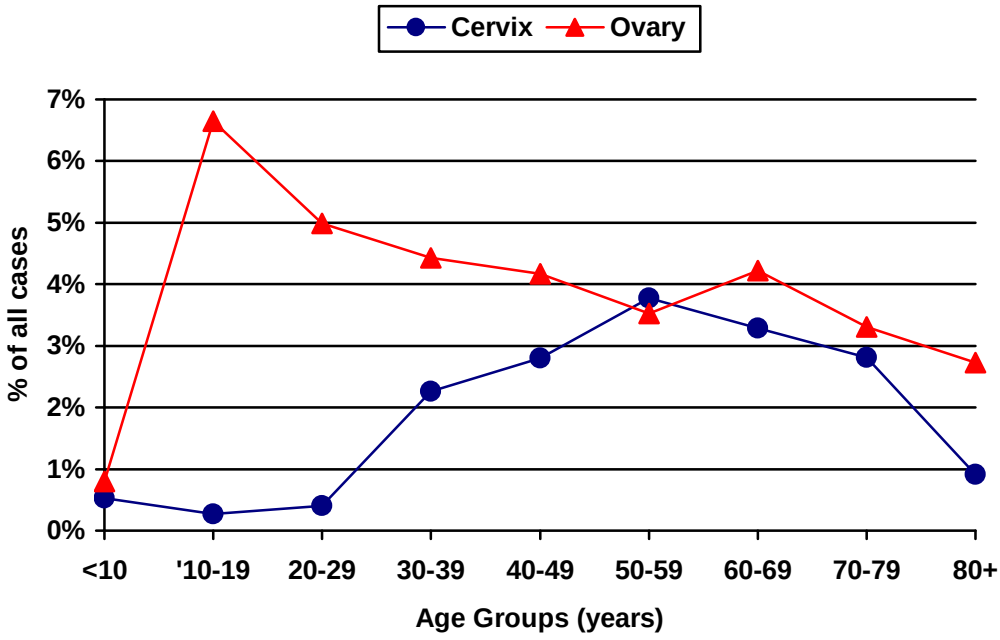

Figure 16: Age Specific Frequency of Cancer of Cervix and Ovary, NCI 2002-03.

Table 22: Major Pathological Types of New Cases of Selected Female Genital Organs, NCI 2002-03.

Site	Pathological type	Percent of total
Cervix	Squamous cell carcinoma	73.2
	Adenocarcinoma	11.4
Ovary	Cystadenocarcinoma	35.7
	Adenocarcinoma	26.9
	Germ cell neoplasm	8.8
	Granulosa cell tumor, malignant	4.6

CANCERS OF GENITOURINARY SYSTEM:

Between January 2002 and December 2003, there were 2514 new cases of cancers of the genitourinary system attending the NCI. These cases accounted for 13.6% of all 18,496 newly diagnosed proven malignant cases. There were 1,989 males (21.3% of all cancer types) and 525 females (5.7% of all cancer types). The distribution of the cases by year and gender are shown in Tables 23 and 24. There were 1,914 (10.4%) cases of bladder cancer, this represented 86.8% of the cancer of the urinary tract. There were 1,511 (16.2%) males and 403 (4.4%) females, a ratio of 3.75 and the median age for males was 60 years and for females was 58 years. Bladder cancer ranked 1st most common cancer site among males and 5th among females. Figure 18 shows the age specific distribution of bladder cancer by gender. The major pathological types of bladder cancer are displayed in Table 25.

There were 277 (1.5%) cases of kidney cancer, this represented 12.6% of the cancer of the urinary tract. There were 160 (1.7%) males and 117 (1.3%) females; a ratio of 1.37 and the median age was 51 years for males and 48 years for females. Fifty one percent of the cases were renal cell carcinoma, 16.5% were nephroblastoma and 10.4% were neuroblastoma.

Table 23: New Cancer Cases of Urinary Tract, NCI 2002-03.

Site	2002 n (%)	2003 n (%)	2002-03 n (%)
Genitourinary system	1249 (13.6)	1265 (13.6)	2514 (13.6)
Kidney	153 (1.7)	124 (1.3)	277 (1.5)
Bladder	934 (10.2)	980 (10.5)	1914 (10.4)
Penis	1 (<0.1)	2 (<0.1)	3 (<0.1)
Prostate	121 (2.6)	117 (2.5)	238 (2.6)
Testis	31 (0.7)	35 (0.8)	66 (0.7)
Other genitourinary organs	9 (0.7)	7 (0.6)	16 (0.6)

Table 24: New Cancer Cases of Urinary Tract by Gender, NCI 2002-03.

Site	Males n (%)	Females n (%)	Total n (%)
Urinary tract	1680 (18.0)	525 (5.7)	2205 (11.9)
Kidney	160 (1.7)	117 (1.3)	277 (1.5)
Bladder	1511 (16.2)	404 (4.4)	1914 (10.4)
Other urinary organs	9 (0.1)	5 (<0.1)	14 (0.1)

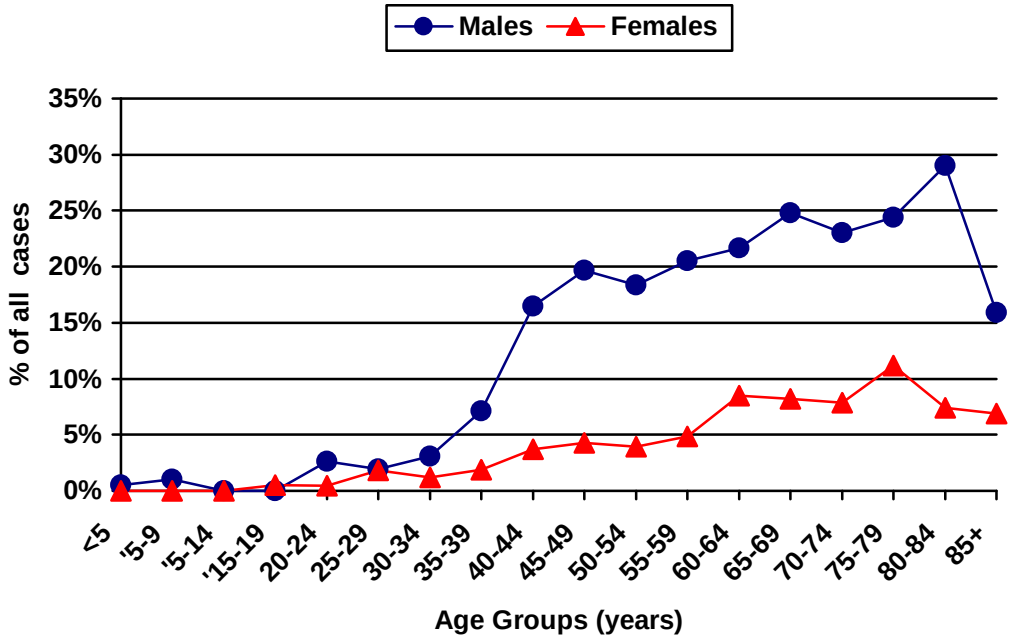

Figure 17: Age Specific Frequency of Bladder Cancer by Gender, NCI 2002-03.

Table 25: Major Pathological Types of Urinary Bladder, NCI 2002-03.

Pathological type	Percent
Transitional cell carcinoma, NOS	41.2
Papillary transitional cell carcinoma	21.6
Squamous cell carcinoma	26.8
Adenocarcinoma	3.4
Carcinoma, undifferentiated	1.9

There were 309 new cases of male genital cancer attending the NCI. These cases accounted for 3.3% of all 9,340 newly diagnosed proven malignant male cases. Of these cases 238 (2.8%) were prostatic cancer. The median age for prostate cancer was 69 years and that of the testis was 34 years. Seventy one percent of prostatic cancers were adenocarcinoma.

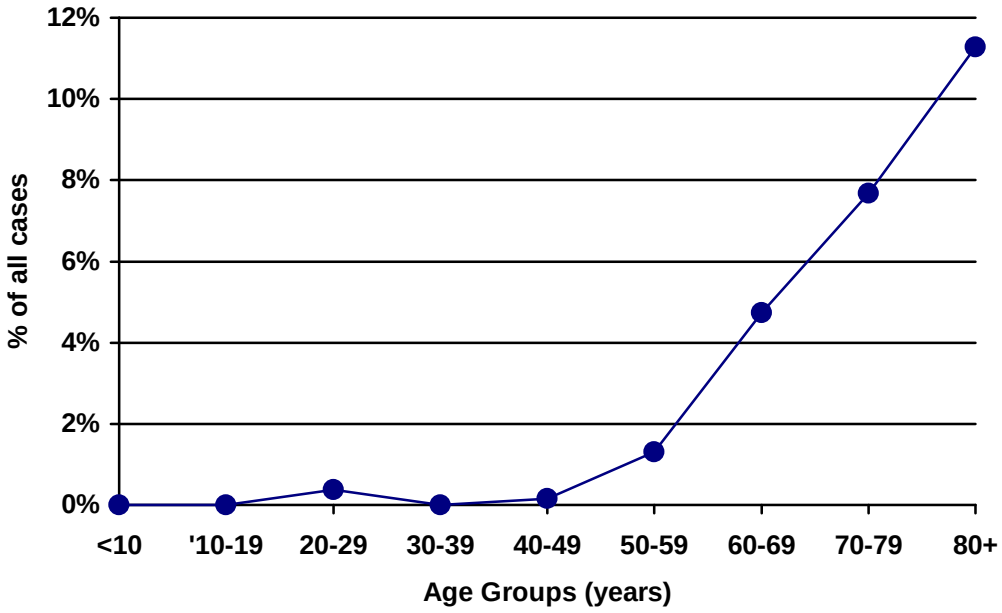

Figure 18: Age Specific Frequency of Prostate Cancer, NCI 2002-03.

EYE AND BRAIN:

Between January 2002 and December 2003, there were 100 new cases of eye cancer and 364 new cases of brain cancer attending the NCI. The distribution of the cases by year and gender are shown in Table 26 and 27. Eye cancer cases accounted for 0.5% of all 18,496 newly diagnosed proven malignant cases. There were 54 (0.6%) males and 46 (0.5%) females, a male to female ratio of 1.2 and median age 5 years. Fifty nine percent were retinoblastoma and 21% were squamous cell carcinoma. Brain cancer cases accounted for 2% of all 18,496 newly diagnosed proven malignant cases. There were 200 (2.1%) males and 164 (1.8%) females, a male to female ratio of 1.22 and median age 33 years. Figure 19 shows the age specific distribution of brain cancer by gender. The major pathological types of brain cancer are displayed in Table 28.

Table 26: New Cancer Cases of Eye and Brain, NCI 2002-03.

Site	2002 n (%)	2003 n (%)	2002-03 n (%)
Eye and Brain	248 (2.7)	216 (2.3)	464 (2.5)
Eye	62 (0.7)	38 (0.4)	100 (0.5)
Brain	186 (2.0)	178 (1.9)	364 (2.0)

Table 27: New Cancer Cases of Eye and Brain by Gender, NCI 2002-03.

Site	Males n (%)	Females n (%)	Total n (%)
Eye and Brain	254 (2.7)	210 (2.3)	464 (2.5)
Eye	54 (0.6)	46 (0.5)	100 (0.5)
Brain	200 (2.1)	164 (1.8)	364 (2.0)

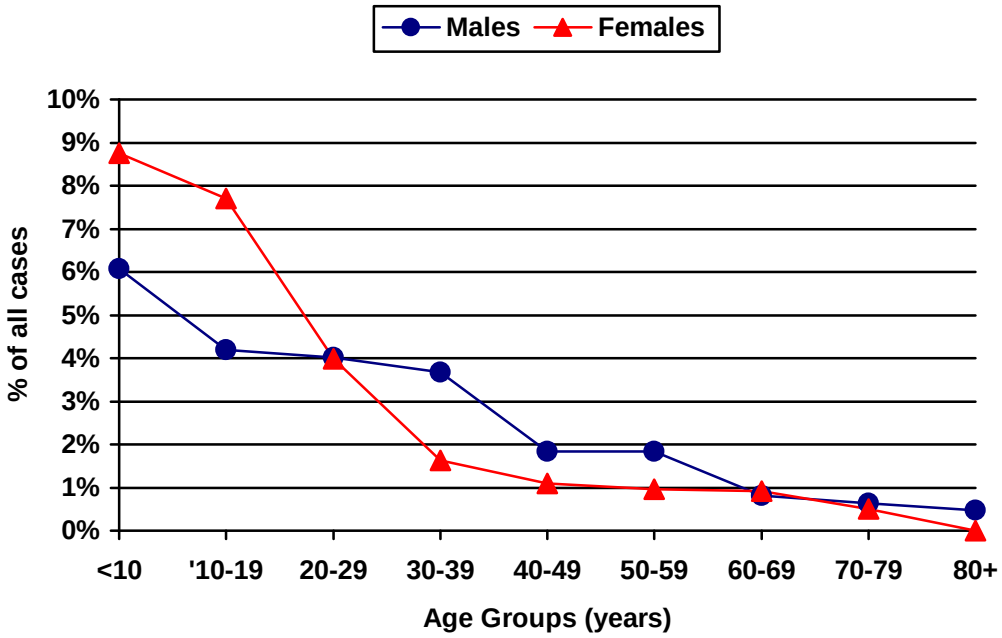

Figure 19: Age Specific Frequency of Brain Cancer, NCI 2002-03.

Table 28: Major Pathological Types of New Cases of Brain Cancer, NCI 2002-03.

Pathological type	Percent
Astrocytoma	40.3
Medulloblastoma	15.0
Glioblastoma	9.7
Glioma, malignant	8.4

THYROID AND OTHER ENDOCRINE GLANDS:

Between January 2002 and December 2003, there were 373 cancer cases of the thyroid and other endocrine glands attending the NCI. These cases accounted for 2% of all 18,496 newly diagnosed proven malignant cases. There were 153 males (1.6% of all cancer types) and 220 females (2.4% of all cancer types). The distribution of the cases by year of diagnosis and gender are shown in Tables 28 nd 30. Of the 373 cases, 318 (1.7%) were thyroid cancer cases, 116 (1.2%) males and 202 (2.2%) females, a male to female ratio of 0.57 and median age 47 years. Thyroid cancer ranked 10th most common cancer site among females. Figure 20 shows the age specific distribution of thyroid cancer by gender. The major pathological types of brain cancer are displayed in Table 31.

Table 29: New Cancer Cases of Thyroid & Other Endocrine Glands, NCI 2002-03.

Site	2002 n (%)	2003 n (%)	2002-03 n (%)
Thyroid & other endocrine glands	187 (2.0)	186 (2.0)	373 (2.0)
Thyroid gland	158 (1.7)	160 (1.7)	318 (1.7)
Other endocrine glands	29 (0.3)	26 (0.3)	55 (0.3)

Table 30: New Cancer Cases of Thyroid & Other Endocrine Glands by Gender, NCI 2002-03.

Site	Males n (%)	Females n (%)	Total n (%)
Thyroid & other endocrine glands	153 (1.6)	220 (2.4)	373 (2.0)
Thyroid gland	116 (1.2)	202 (2.2)	318 (1.7)
Other endocrine glands	37 (0.4)	18 (0.2)	55 (0.3)

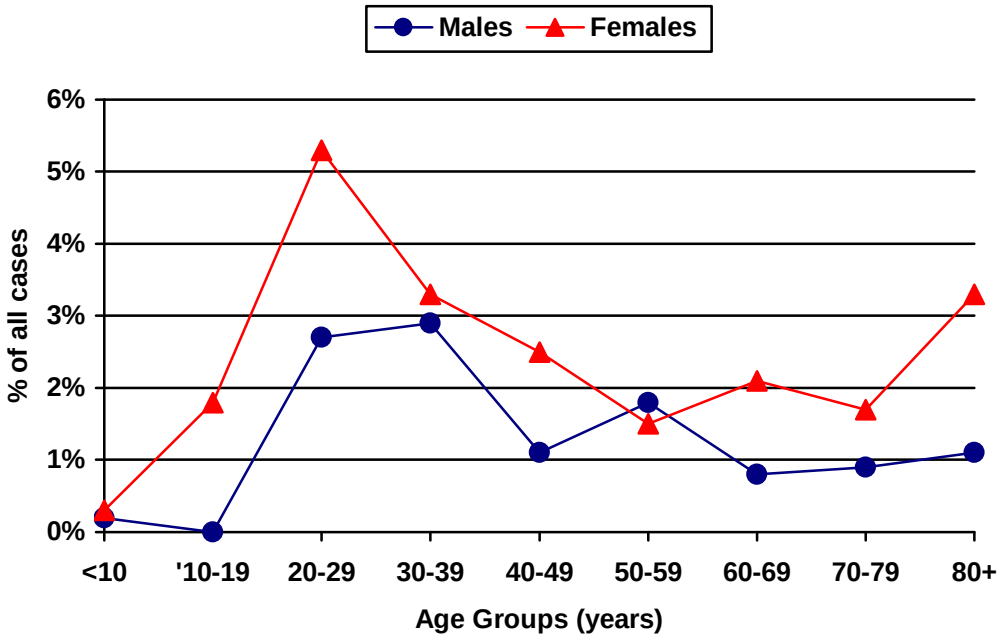

Figure 20: Age Specific Frequency of Thyroid Cancer, NCI 2002-03.

Table 31: Major Pathological Types of New Cases of Thyroid Cancer, NCI 2002-03.

Pathological type	Percent
Papillary carcinoma	32.6
Papillary adenocarcinoma	19.5
Follicular adenocarcinoma	16.0
Adenocarcinoma	8.2

LYMPHOMA AND MULTIPLE MYELOMA:

Between January 2002 and December 2003, there were 1,660 cases of lymphoma and multiple myeloma attending the NCI. These cases accounted for 9.0% of all 18,496 newly diagnosed proven malignant cases. There were 1053 males (11.3% of all cancer types) and 607 females (6.6% of all cancer types). The distribution of the cases by year of diagnosis and gender are shown in Tables 32 and 33. The male to female ratio and the median age of each site are shown in Table 34. There were 1,596 (8.6%) cases of lymphoma and 64 (0.4%) of multiple myeloma. Of the 1,596 lymphoma cases, 1,213 (6.6%) cases were non-hodgkin's lymphoma and 383 (2.1%) Hodgkin's disease. The ratio of non-hodgkin's lymphoma to Hodgkin's disease was 3.17. Lymphoma ranked 3rd most common site among males and 2nd among females.

Of the 1,213 new cases of non-hodgkin's lymphoma, 742 (7.9%) were males and 471 (5.1%) were females, a ratio of 1.6, their median age was 45 years. Figure 21 shows the age specific distribution of non-hodgkin's lymphoma cancer by gender.

Of the 383 new cases of Hodgkin's disease, 267 (2.9%) were males and 116 (1.3%) were females, a ratio of 2.3, their median age was 25 years. Figure 22 shows the age specific distribution of Hodgkin's disease cancer by gender.

Table 32: New Cancer Cases of Lymphoma and Multiple Myeloma, NCI 2002-03.

Site	2002 n (%)	2003 n (%)	2002-03 n (%)
Lymphoma & Multiple Myeloma	856 (9.3)	804 (8.6)	1660 (9.0)
Non-Hodgkin's Lymphoma	635 (6.9)	578 (6.2)	1213 (6.6)
Hodgkin's disease	191 (2.1)	192 (2.1)	383 (2.1)
Multiple Myeloma	30 (0.3)	34 (0.4)	64 (0.4)

Table 33: New Cancer Cases of Lymphoma and Multiple Myeloma by Gender, NCI 2002-03.

Site	Males n (%)	Females n (%)	Total n (%)
Lymphoma & Multiple Myeloma	1053 (11.3)	607 (6.6)	1660 (9.0)
Non-Hodgkin's Lymphoma	742 (7.9)	471 (5.1)	1213 (6.6)
Hodgkin's disease	267 (2.9)	116 (1.3)	383 (2.1)
Multiple Myeloma	44 (0.5)	20 (0.2)	64 (0.4)

Table 34: New Cancer Cases of Lymphoma and Multiple Myeloma by Gender and Median Age, NCI 2002-03.

Site	n (%)	M/F ratio	Median Age (yrs)
Non-Hodgkin's Lymphoma	1213 (6.6)	1.57	45.0
Hodgkin's disease	383 (2.1)	2.30	25.0
Multiple Myeloma	64 (0.4)	2.20	52.5

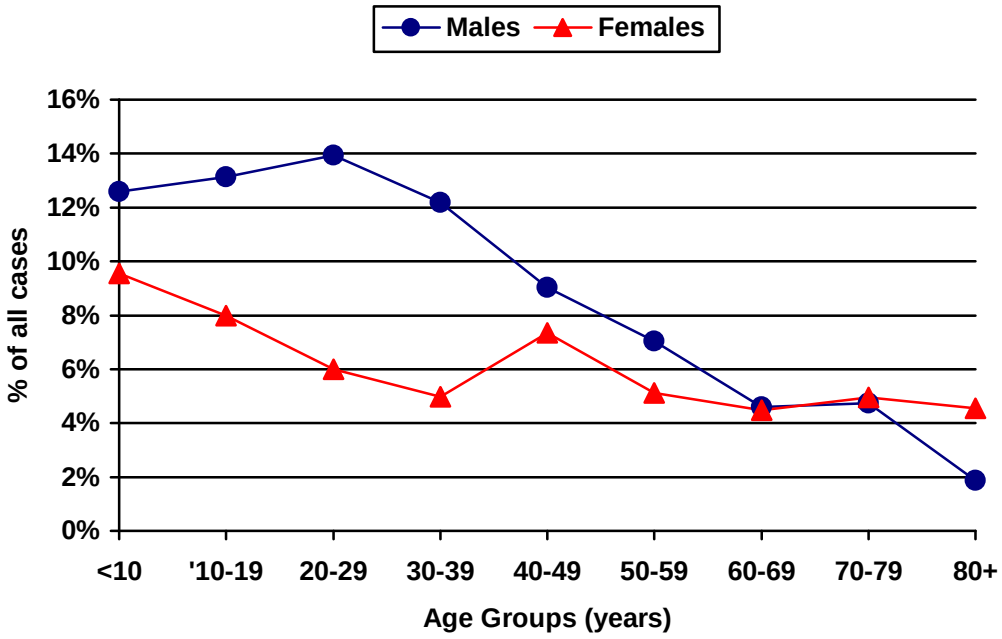

Figure 21: Age Specific Frequency of Non-Hodgkin's Lymphoma by Gender, NCI 2002-03.

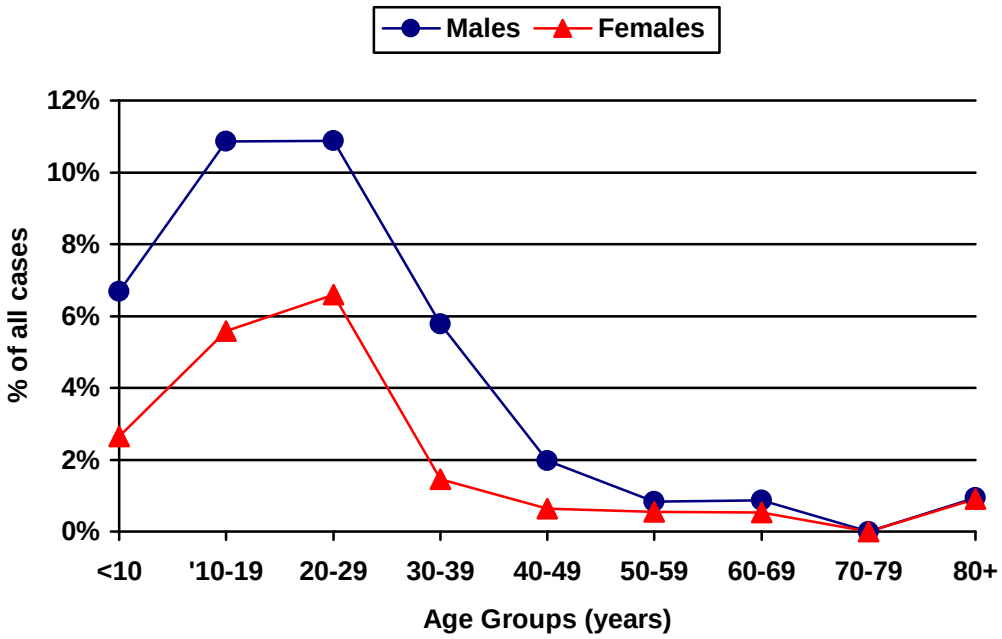

Figure 22: Age Specific Frequency of Hodgkin's disease by Gender, NCI 2002-03.

LEUKEMIA:

Between January 2002 and December 2003, there were 1,300 cases of leukemia attending the NCI. These cases accounted for 7% of all 18,496 newly diagnosed proven malignant cases. There were 760 males (8.1% of all cancer types) and 540 females (5.9% of all cancer types). The distribution of the different types of leukemia cases by year of diagnosis and gender are shown in Tables 35 and 36. The male to female ratio and the median age of each type are shown in Table 37. Leukemia ranked 4th most common site among males and 3rd among females. Figure 23 and 24 show the age specific distribution of acute lymphoblastic and acute myeloid leukemias by gender.

Table 35: New Cancer Cases of Leukemia, NCI 2002-03.

Site	2002 n (%)	2003 n (%)	2002-03 n (%)
Leukemias	614 (6.7)	686 (7.4)	1300 (7.0)
Acute Lymphoblastic Leukemia	219 (2.4)	272 (2.9)	491 (2.7)
Acute Myeloid Leukemia	169 (1.8)	180 (1.9)	349 (1.9)
Chronic Lymphoblastic Leukemia	42 (0.5)	41 (0.4)	83 (0.5)
Chronic Myeloid Leukemia	91 (1.0)	112 (1.2)	203 (1.1)
Leukemia, NOS	93 (1.0)	81 (0.9)	174 (0.9)

Table 36: New Cancer Cases of Leukemia by Gender, NCI 2002-03.

Site	Males n (%)	Females n (%)	Total n (%)
Leukemias	760 (8.1)	540 (5.9)	1300 (7.0)
Acute Lymphoblastic Leukemia	304 (3.3)	187 (2.0)	491 (2.7)
Acute Myeloid Leukemia	202 (2.2)	147 (1.6)	349 (1.9)
Chronic Lymphoblastic Leukemia	48 (0.5)	35 (0.4)	83 (0.5)
Chronic Myeloid Leukemia	108 (1.2)	95 (1.0)	203 (1.1)
Leukemia, NOS	98 (1.1)	76 (0.8)	174 (0.9)

Table 37: New Cancer Cases of Leukemia by Gender and Median Age, NCI 2002-03.

Site	n (%)	M/F ratio	Median Age (yrs)
Acute Lymphoblastic Leukemia	491 (2.7)	1.63	9
Acute Myeloid Leukemia	349 (1.9)	1.37	22
Chronic Lymphoblastic Leukemia	83 (0.5)	1.37	58
Chronic Myeloid Leukemia	203 (1.1)	1.14	39

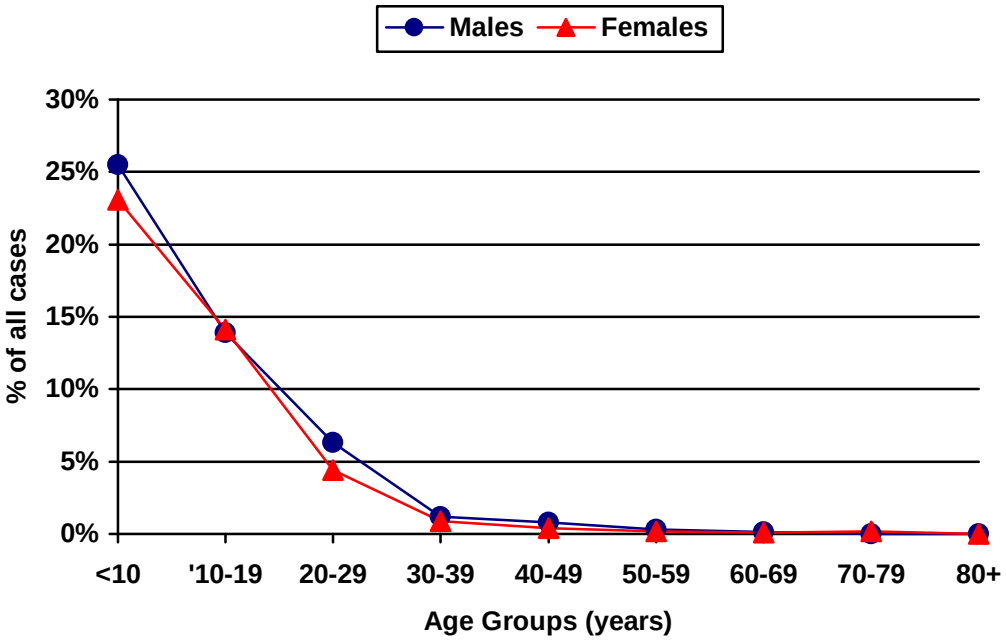

Figure 23: Age Specific Frequency of Acute Lymphoblastic Leukemia by Gender, NCI 2002-03.

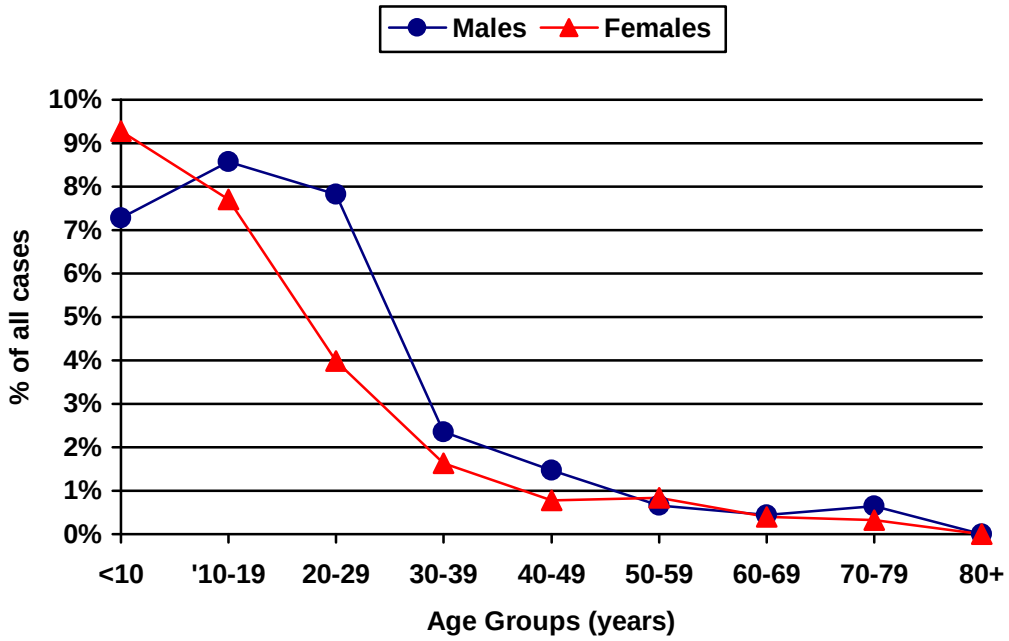

Figure 24: Age Specific Frequency of Acute Myeloid Leukemia by Gender, NCI 2002-03.

SECTION III

CANCER STATISTICS FOR CHILDREN AGE LESS THAN 20 YEARS

NATIONAL CANCER INSTITUTE, CAIRO

2002-2003

Of the 18,496 new cancer cases with confirmed malignancy at the NCI between January 2002 and December 2003, 1,937 (10.5%) were children age less than 20 years. There were 1,184 (61.1%) boys and 753 (38.9%) girls, with a ratio of nearly 1.57. The age distribution of the cases by year of diagnosis and gender are shown in Figures 25 and 26. The distribution of new cases by system and year of diagnosis is shown in Figure 27 and the distribution by system and gender is shown in Figure 28. The most cancer type was leukemia, 643 (33.2%) new cases. Lymphoma was the next most common (18.1%), followed by brain tumors, accounting for 7.1%, of all childhood cancer.

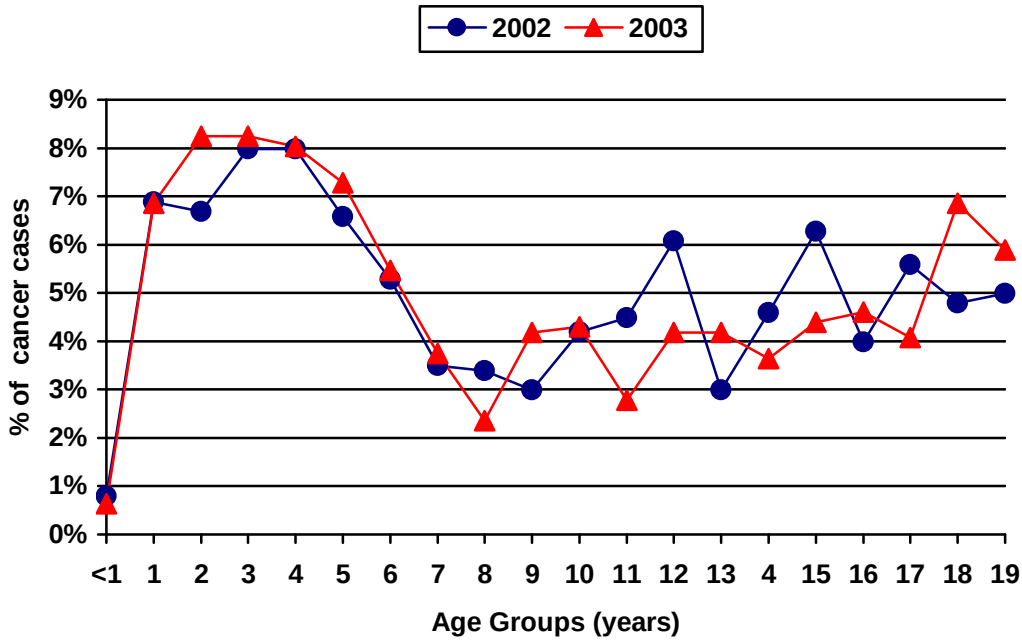

Figure 25: Age Distribution of 1,937 New Cancer Cases by Year of Diagnosis, NCI 2002-03.

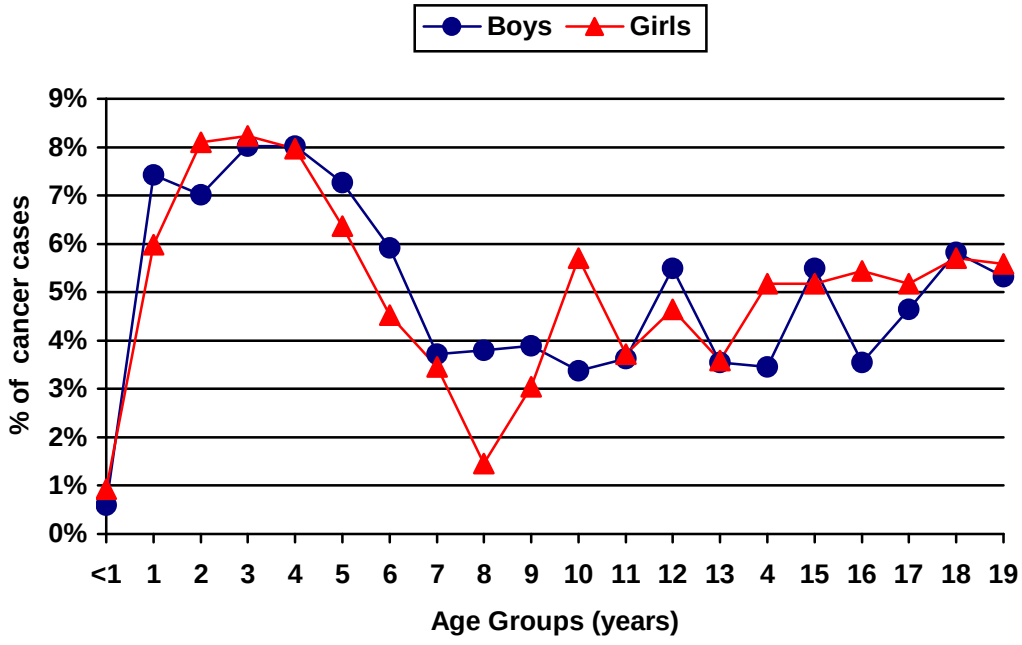

Figure 26: Age Distribution of 1,937 New Cancer Cases by Gender, NCI 2002-03.

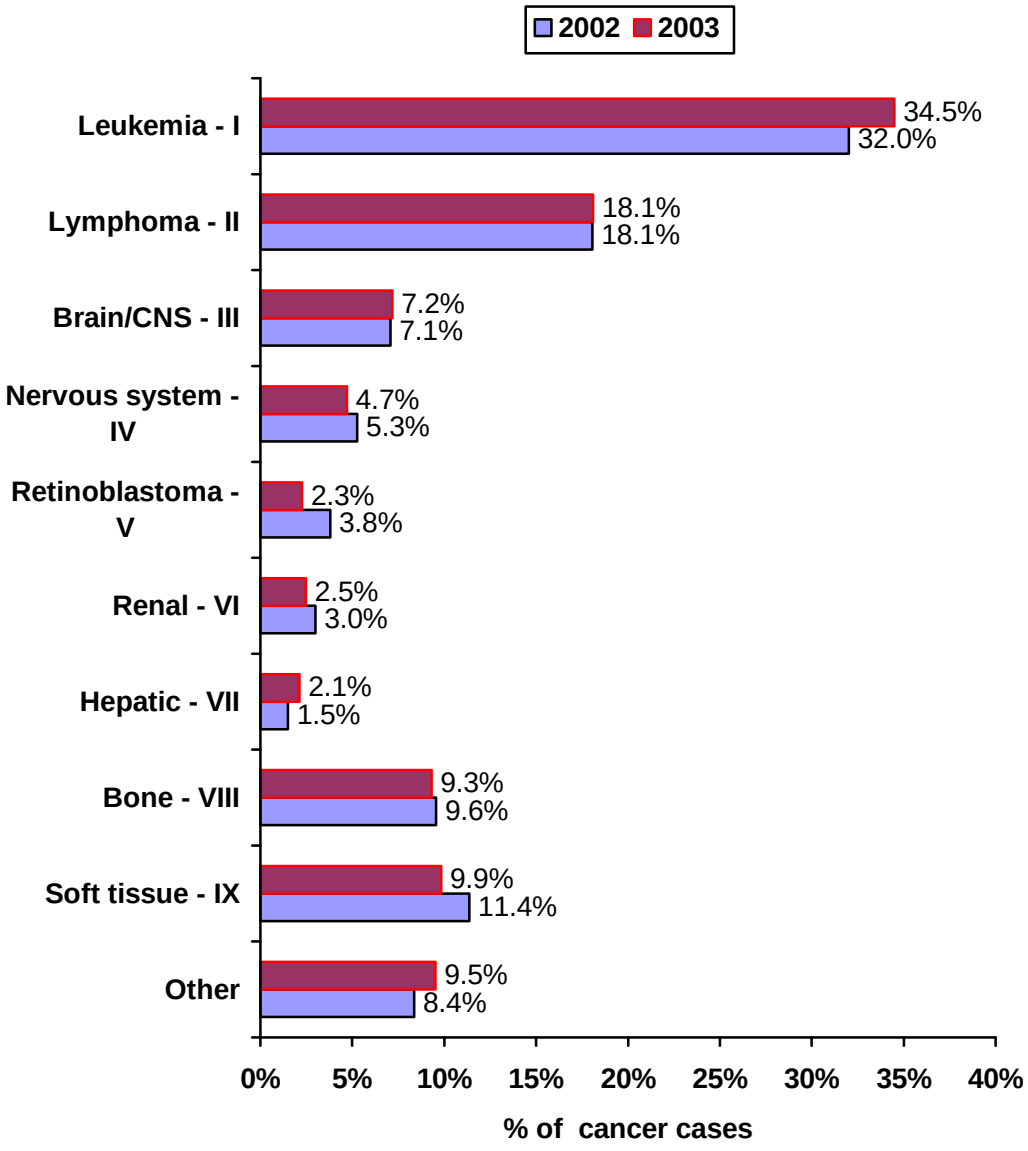

Figure 27: Distribution of 1,937 New Cancer Cases by ICCC (International Classification of Childhood Cancer) Year of Diagnosis, NCI 2002-03.

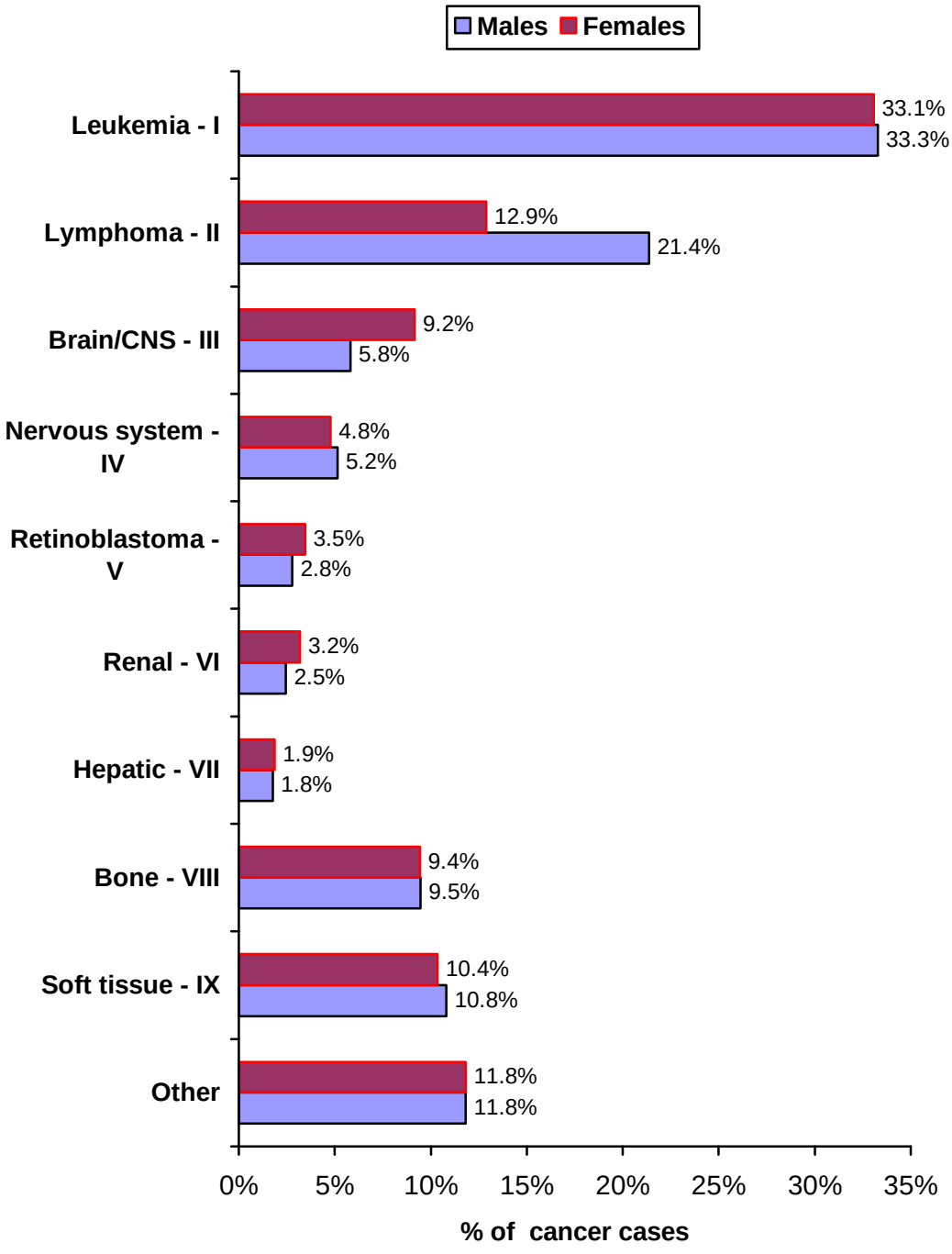

Figure 28: Distribution of 1,937 New Cancer Cases by ICCC and Gender, NCI 2002-03.

CHILDREN'S LEUKEMIA:

Between January 2002 and December 2003, there were 1,937 child aged less than 20 years confirmed malignant cases at the NCI. Of these cases 643 were leukemic, this accounted for 33.2% of all newly diagnosed proven malignant children. There were 394 boys (33.3% of all cancer types) and 249 girls (33.1% of all cancer types). The distribution of the different types of leukemia cases by year of diagnosis and gender are shown in Tables 38 and 39. The male to female ratio and the median age of each type are shown in Table 40.

Table 38: Types of Leukemia among Children Age Less 20 Years by Year of Diagnosis, NCI 2002-03.

Site	2002 n (%)	2003 n (%)	2002-03 n (%)
Leukemias	321 (32.0)	322 (34.5)	643 (33.2)
Acute Lymphoblastic Leukemia	170 (16.4)	210 (22.5)	380 (19.6)
Acute Myeloid Leukemia	86 (8.6)	68 (7.3)	154 (8.0)
Chronic Myeloid Leukemia	19 (1.9)	11 (1.2)	30 (1.6)
Leukemia, NOS	46 (4.6)	33 (3.5)	79 (4.1)

Table 39: Types of Leukemia among Children Age Less 20 Years by Gender, NCI 2002-03.

Site	Males n (%)	Females n (%)	Total n (%)
Leukemias	394 (33.3)	249 (33.1)	643 (33.2)
Acute Lymphoblastic Leukemia	240 (20.3)	140 (18.6)	380 (19.6)
Acute Myeloid Leukemia	90 (7.6)	64 (8.5)	154 (8.0)
Chronic Myeloid Leukemia	18 (1.5)	12 (1.6)	30 (1.6)
Leukemia, NOS	46 (3.9)	33 (4.4)	79 (4.1)

Table 40: Children's Leukemia by Gender and Median Age, NCI 2002-03.

Site	n (%)	M/F ratio	Median Age (yrs)
Acute Lymphoblastic Leukemia	380 (19.6)	1.71	6.0
Acute Myeloid Leukemia	154 (8.0)	1.41	8.5
Chronic Myeloid Leukemia	30 (1.6)	1.50	13.0

CHILDREN'S LYMPHOMA:

Between January 2002 and December 2003, there were 1,937 child aged less than 20 years confirmed malignant cases at the NCI. Of these cases 350 had lymphoma, this accounted for 18.1% of all newly diagnosed proven malignant children. There were 253 boys (21.4% of all cancer types) and 97 girls (12.9% of all cancer types). The distribution of the different types of lymphoma cases by year of diagnosis and gender are shown in Tables 41 and 42.

Of the 350 lymphoma cases, 194 (10%) cases were non-Hodgkin's lymphoma, 137 (7.1%) Hodgkin's disease and 19 (1%) Burkitt's lymphoma. The ratio of non-Hodgkin's lymphoma to Hodgkin's disease was 1.42.

Of the 194 new cases of non-Hodgkin's lymphoma, 137 (11.6%) were boys and 57 (7.6%) were girls, a ratio of 2.4. Of the 137 new cases of Hodgkin's disease, 103 (8.7%) were boys and 34 (4.5%) were girls, a ratio of 3. The male to female ratio and the median age of each type are shown in Table 43.

Table 41: Types of Lymphoma among Children Age Less 20 Years by Year of diagnosis, NCI 2002-03.

Site	2002 n (%)	2003 n (%)	2002-03 n (%)
Lymphoma	181 (18.1)	169 (18.1)	350 (18.1)
Non-Hodgkin's Lymphoma	103 (10.3)	91 (9.7)	194 (10.0)
Hodgkin's disease	67 (6.7)	70 (7.5)	137 (7.1)
Burkitt's Lymphoma	11 (1.1)	8 (0.9)	19 (1.0)

Table 42: Types of Lymphoma among Children Age Less 20 Years by Gender, NCI 2002-03.

Site	Males n (%)	Females n (%)	Total n (%)
Lymphoma	253 (21.4)	97 (12.9)	350 (18.1)
Non-Hodgkin's Lymphoma	137 (11.6)	57 (7.6)	194 (10.0)
Hodgkin's disease	103 (8.7)	34 (4.5)	137 (7.1)
Burkitt's Lymphoma	13 (1.1)	6 (0.8)	19 (1.0)

Table 43: Children's Lymphoma by Gender and Median Age, NCI 2002-03.

Site	n (%)	M/F ratio	Median Age (yrs)
Non-Hodgkin's Lymphoma	194 (10.0)	2.40	9.0
Hodgkin's disease	137 (7.1)	3.02	12.0
Burkitt's Lymphoma	19 (1.0)	2.17	5.0