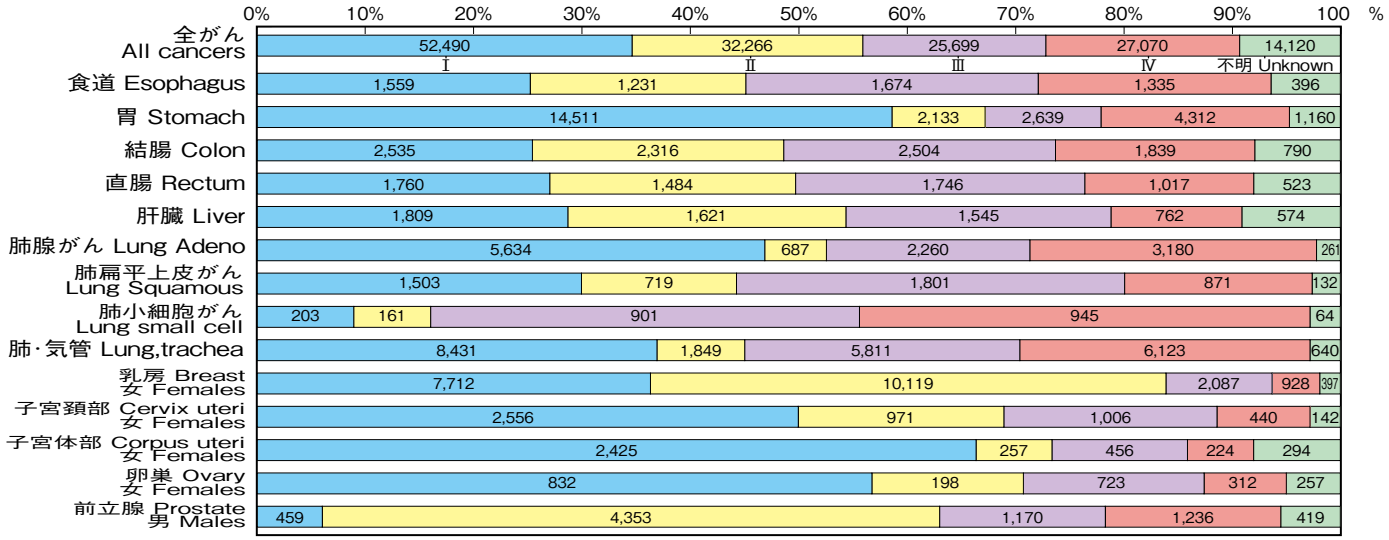
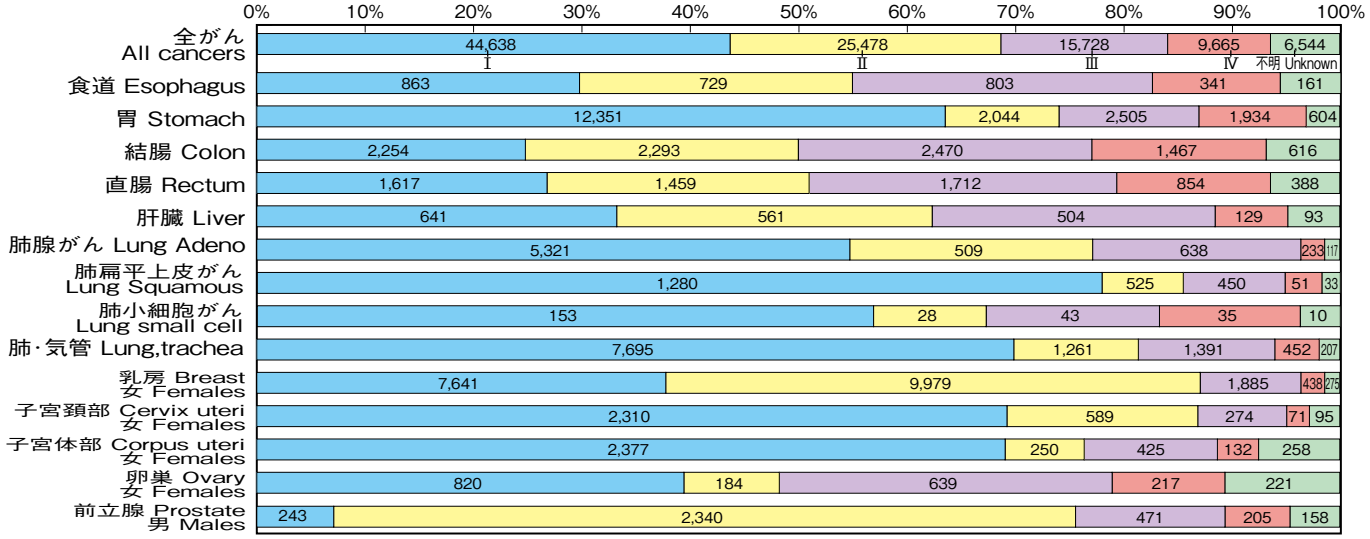
8 全国がん（成人病）センター協議会加盟施設における５年生存率（2001～2005年診断例）
Survival Rate in the Member Hospitals of the Association of Clinical Cancer Centers (Diagnosed in 2001-2005)

(1) 臨床病期分布　男女計（全症例）Distribution of Clinical Stage, Both Sexes (All Cases)



(2) 臨床病期分布　男女計（手術症例のみ）Distribution of Clinical Stage, Both Sexes (Surgical Cases Only)



（1）（2）全がん協臨床病期分布

胃がん、子宮がんはⅠ期症例の割合が高く比較的早期に発見されていることがうかがえる。乳がんにおいてはⅡ期の症例が一番多く、検診のさらなる普及により、より多くの症例がⅠ期で発見される体制が望まれる。

(1)(2) Distribution of clinical stage

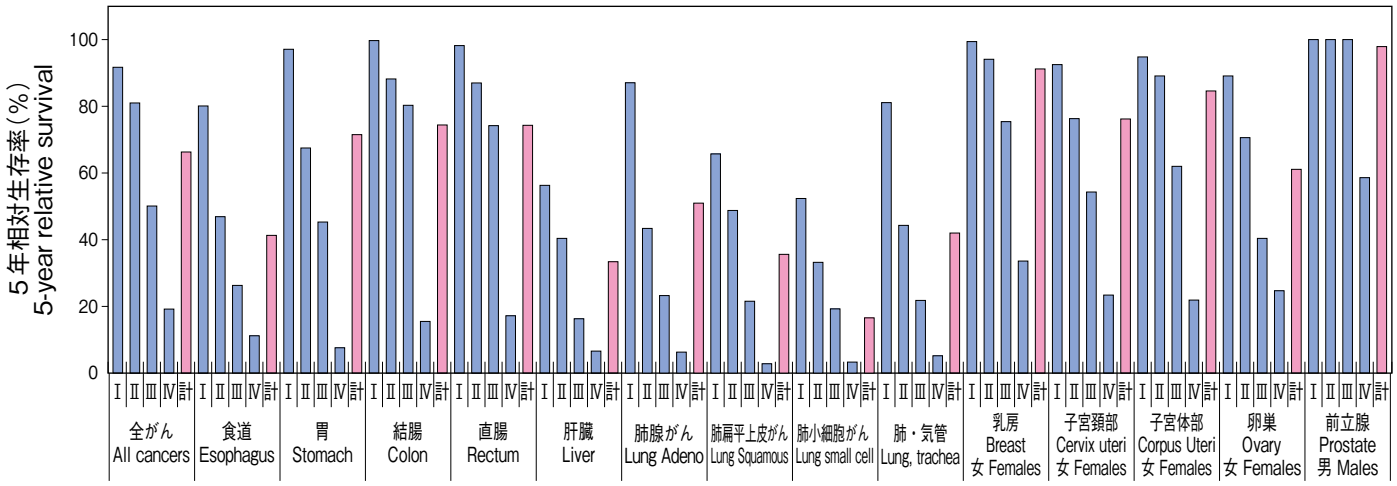
A large proportion of gastric and uterine cancer was stage I, suggesting successful early detection program of those types of cancer. On the other hand, the largest female breast cancer population has been accounted for Stage II; therefore improvements in the breast cancer screening rates are necessary for an earlier diagnosis under the assumption that earlier detection will improve outcomes

（注）
1）対象は全がん協加盟31施設
2）2001年から2005年に初回入院治療を行った症例を対象とし、15歳未満の小児がんおよび95歳以上の高齢者は算定から除外
3）良性腫瘍、上皮内がん、ステージ０は算定から除外
4）症例区分2（自施設診断、自施設治療）、症例区分3（他施設診断、自施設治療）
5）ステージはUICCの臨床病期別
6）合計には病期不明例も含む
7）消息判明率（追跡率）はいずれの部位も95％以上
8）手術症例には、化学療法または放射線療法との併用療法、内視鏡治療、腹腔鏡手術、胸腔鏡手術を含む。

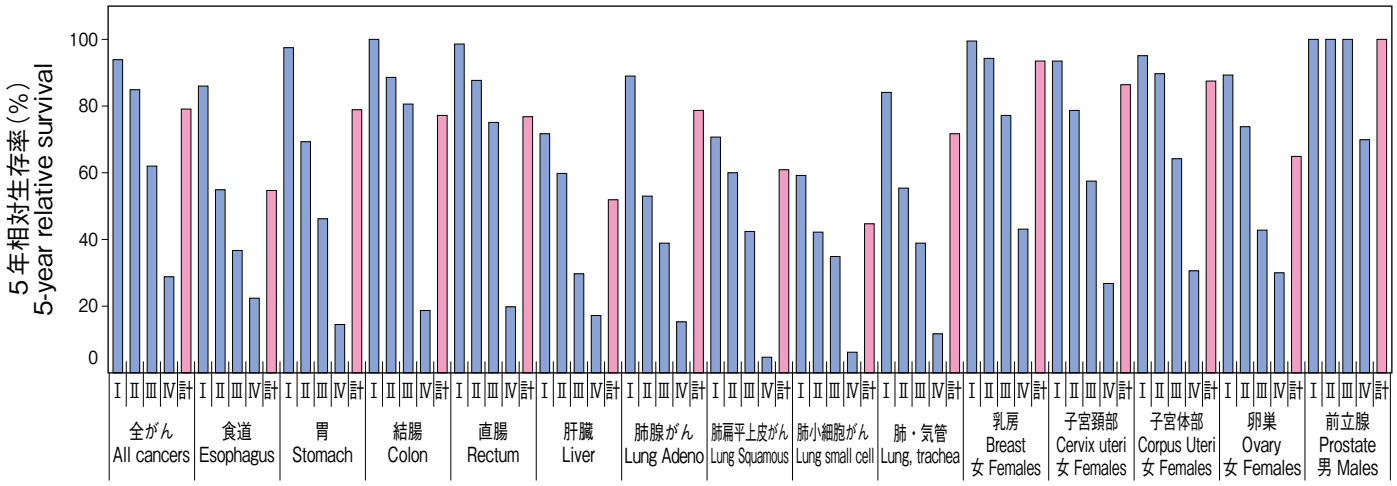
Note: 1) Data from 31 designated hospitals in the Association of Clinical Cancer Centers are included.
2) All cases are inpatients that underwent the first treatment in 2001-2005. Cases under age 15 or over 95 were excluded.
3) Benign tumors, carcinoma in situ (CIS), or cases of stage 0 were excluded.
4) Case Group II (diagnosed and first treated in a designated hospital) and Case Group III (diagnosed at other medical facilities and first treated in the designated hospital) were included.
5) Clinical stages were based on the UICC staging system.
6) Cases with unknown clinical stage were included in the category of "Total" number.
7) Follow-up rate was 95% or more for each of all sites.
8) Surgical cases include surgeries using endoscope, laparoscope and/or thoracoscope, and multidisciplinary surgeries combining chemotherapy and radiotherapy.

※ 表と出典は76～77ページ参照。See p.76-77 for tables and references.

(3) 臨床病期別５年相対生存率　男女計（全症例）
5-year Relative Survival Rate by Clinical Stage, Both Sexes (All Cases)



(4) 臨床病期別５年相対生存率　男女計（手術症例のみ）
5-year Relative Survival Rate by Clinical Stage, Both Sexes (Surgical Cases Only)



（３）（４）　全がん協臨床病期5年相対生存率

主要部位の5年相対生存率は全体的に18ページの地域がん登録の生存率より高く、胃がん、結腸がん、直腸がん、子宮頚がんの5年相対生存率は70％以上、子宮体がんの5年相対生存率は80％以上、乳がん、前立腺がんの5年相対生存率は90％以上を示し、特に胃がん、結腸がん、直腸がん、乳がん、前立腺がんにおいて臨床病期Ⅰ期の生存率は95％を越えている。肝臓がん、肺がんはⅠ期の生存率、全病期の生存率ともに低い。一方、前立腺がんではⅠ期、Ⅱ期、Ⅲ期とも100％の相対生存率を示している。特に肝臓がんと肺がんでは、手術症例の生存率が全症例より高い。肺がんの5年相対生存率は全体で42.0％であったが、組織型に分けると、腺がん51.1％、扁平上皮がん35.7％、小細胞がん16.6％であった。症例数は腺がん、扁平上皮がん、小細胞がんの順に多かった。手術症例に限れば肺がんの5年相対生存率は71.7％であった。

学会の臓器別がん登録や個々の病院がホームページ等で公表している生存率は、今回の手術症例の生存率に近いと考えられる。全国がん（成人病）センター協議会加盟施設の生存率は我が国のがん専門病院のデータであり、日本を代表するものではないが、地域がん診療連携拠点病院が今後目指すべき目標値であると考えられる。

(3)(4)　5-year relative survival rates by clinical stage

The 5-year relative survival rates for major sites in the designated hospitals of the Association of Clinical Cancer Centers tended to be higher than those measured in population-based cancer registry (See page 18). The survival rates in the designated hospitals were over 70% for cancer of the stomach, colon, rectum, and cervix uteri, over 80% for corpus uteri, and over 90% for breast (females), and prostate. Moreover, the survival rates for stage I cases were over 95% for cancer of the stomach, colon, rectum, breast (females), corpus uteri, and prostate. Cancer of the esophagus, liver, and lung showed low survival rates even for stage I cases. Prostate cancer showed survival rate of 100% for stage I, II, and III cases. In liver and lung cancers, surgical cases showed better survival rate when compared with the all cases. Although 5-year relative survival rate of lung cancer was 42.0%, there were distinct survival rates of adenocarcinoma (51.1%), squamous carcinoma (35.7%) and small cell lung cancer (16.6%) and number of cases is the highest in adenocarcinoma, middle in squamous carcinoma and lowest in small cell lung cancer. The 5-year relative survival rate of lung cancer cases indicated for surgery was 71.7%.

The data of cancer survival rates reported by site-specific cancer registries or by medical facilities are similar to the data for surgical cases presented here. Since the designated hospitals of the Association of Clinical Cancer Centers specialize in cancer care, the survival rates presented here are not representative of all hospitals in Japan. Instead, those outstanding outcomes should serve as a goal for designated cancer care hospitals all around Japan.