

Cancer: an overview

Incidence of cancer in Australia

On average, one in three men and one in four women will be diagnosed with cancer by the age of 75.¹ It is estimated that over 134,000 Australians will be diagnosed with cancer in 2017.²

The most common types of cancer are: breast in women; bowel (colorectal); prostate in men; skin melanoma; and lung. Together, these five cancer types account for about 60% of new cancer cases.

The good news is that many cancers can be treated successfully, and approximately 68% of people diagnosed with cancer will still be alive five years after their treatment. Many of these people will continue working during treatment, while others will return to the workforce after treatment.

Cancer in the working population

Around 40% of people newly diagnosed with cancer are aged 20–64.¹ This has obvious implications for those managing staff. While the majority of people newly diagnosed are 65 years or older (57%) and may be retired, their primary carer may be a son or a daughter in paid employment.

What are the risk factors?

The causes of many cancers are not fully understood. However, there are a number of recognised risk factors that may make some people more susceptible than others. These risk factors include:

- smoking tobacco/passive smoking
- exposure to UV radiation (e.g. from sunlight)
- alcohol consumption
- diet
- physical inactivity and obesity
- chronic infections, including the human papillomavirus (HPV) and hepatitis B or C
- family history and genetic susceptibility
- hormonal factors
- exposure to hazardous substances, chemicals, dust or radiation (e.g. asbestos, uranium, coal tar pitch, wood dust, diesel exhaust, lead, benzene).

Having a risk factor doesn't necessarily mean that a person will get cancer. However, people who are aware of risk factors can make better lifestyle choices to reduce their risk.

How is cancer treated?

Treatment for cancer is often successful if the cancer is found early.

The most common types of cancer treatment are surgery, chemotherapy and radiotherapy. Hormone therapy is used for some hormone-dependent cancers. In recent years, clinical breakthroughs have led to new treatments, such as targeted therapy and immunotherapy, becoming more common for some types of cancers. Treatments may be used alone or in combination, according to the needs of the individual. Many people will have several cycles of treatment over a number of weeks or months.

Main types of cancer treatments

Surgery

An operation to remove cancerous tissue and some healthy tissue around it. It may be a major, invasive operation or a relatively minor procedure.

Chemotherapy

The use of drugs known as cytotoxics to kill or slow the growth of cancer cells. There are hundreds of different types of these drugs available in Australia. They are usually given through a vein (intravenously) or as tablets.

Radiotherapy (radiation therapy)

Uses radiation, such as x-rays or gamma rays, to kill cancer cells or injure them so they cannot multiply. External beam radiotherapy or internal radiotherapy (brachytherapy) may be offered.

Hormone (endocrine) therapy

Hormone therapy uses synthetic hormones to block the effect of the body's natural hormones that help some cancers to grow. The treatment may be given as tablets or injections.

Targeted therapy

Targeted therapy attacks specific genetic changes (mutations) within cells that allow cancers to grow and spread, while minimising harm to healthy cells. They are generally administered in tablet form (orally).

Immunotherapy

Drugs are used to stimulate the body's immune system to recognise and fight some types of cancer cells. These drugs are usually administered into the vein (intravenously) at a treatment centre.

Cancer: an overview

Side effects of treatment

People’s experiences depend on the type of cancer they have, the treatment they receive and the amount of support they have.

For some people, treatment will cause significant side effects, such as nausea or fatigue. This can make their normal work routine difficult – or even impossible – for some time. However, not everyone will experience side effects. As treatments have improved, more people are able to continue working throughout treatment with the support of their employers.

After active treatment has finished, some people are expected to get back to a ‘normal’ work routine. However, many employees will still be required to attend medical appointments or need assistance with managing long-term side effects.

References

1. Australian Institute of Health and Welfare (AIHW), *Australian Cancer Incidence and Mortality (ACIM) books: All cancers combined*, AIHW, Canberra, 2017.
2. Australian Institute of Health and Welfare (AIHW), *Cancer in Australia 2017*, AIHW, Canberra, 2017. [Statistics do not include non-melanoma skin cancers.]

Where to get help and information

- **Workplace fact sheets** – *Talking to your employee about cancer, Managing the effects of treatment and Creating cancer-friendly workplaces*. These online only fact sheets are available from your local Cancer Council website.
- **Call Cancer Council 13 11 20** – for more information about cancer in the workplace. You can also ask for free copies of our booklets, or download digital copies from your local Cancer Council website.

Cancer Council websites

ACT.....	actcancer.org
NSW	cancercouncil.com.au
NT.....	nt.cancer.org.au
Queensland.....	cancerqld.org.au
SA.....	cancersa.org.au
Tasmania.....	cancertas.org.au
Victoria	cancervic.org.au
WA.....	cancerwa.asn.au
Australia	cancer.org.au

Acknowledgements

This information was developed with help from a range of legal, financial and health professionals, and people affected by cancer. It was reviewed by: Prof Fran Boyle AM, Director, Patricia Ritchie Centre for Cancer Care & Research, Mater Hospital and Professor of Medical Oncology, University of Sydney, NSW; Carolyn Butcher, Chief People and Development Officer, Thomson Geer, VIC; Sandra Dann, Director, Working Women’s Centre SA Inc., SA; Camilla Gunn, Commercial Manager and Strategic Projects, Talent Acquisition, Human Resources, Corporate Affairs and Sustainability, Westpac, NSW; Carmen Heathcote, 13 11 20 Consultant, Cancer Council Queensland; Sara Jorgensen, Breast Care Nurse Consultant, Western Health, VIC; Deborah Lawson, Legal Policy Advisor, McCabe Centre for Law and Cancer, VIC; Gary Power, Consumer; Donna Wilson, Social Work Manager, Hollywood Private Hospital, WA.

Note to reader

Always consult your doctor about matters that affect your health. This fact sheet is intended as a general introduction and is not a substitute for professional medical, legal or financial advice. Information about cancer is constantly being updated and revised by the medical and research communities. While all care is taken to ensure accuracy at the time of publication, Cancer Council Australia and its members exclude all liability for any injury, loss or damage incurred by use of or reliance on the information provided in this fact sheet.



For information and support on cancer-related issues, call Cancer Council 13 11 20. This is a confidential service.