

Health statistics

Atlas on mortality in the **European Union**

Chapter 17 Cancer of the bladder

Data 1994-96









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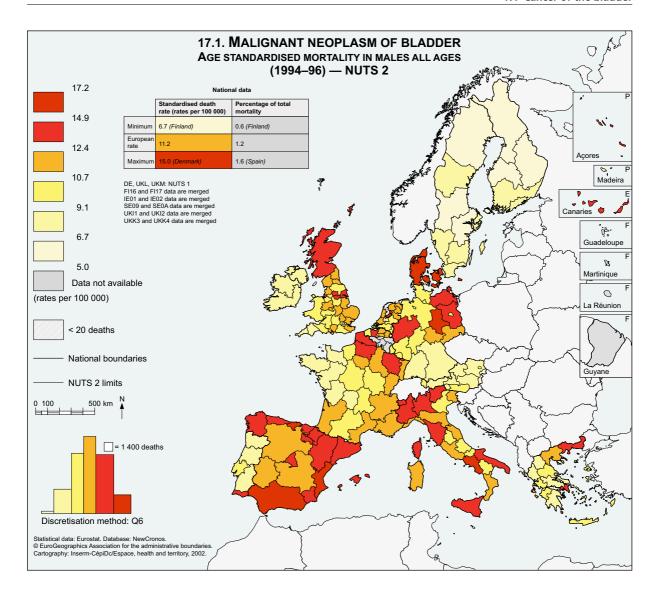
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17. Cancer of the bladder

Like cancer of the pancreas, cancer of the bladder has a relatively limited impact on European mortality. It mainly affects older men. Three quarters of deaths occur among men aged over 65. The European regional pattern is uneven. The maps showing the regional rates reveal very different patterns depending on sex.

Male mortality rates from cancer of the bladder vary by a factor of 1 to 3 in Europe. Denmark and Spain (the islands, the coastal provinces and the Comunidad de Madrid) are the worst affected.

Sweden, Finland, Ireland and Austria have belowaverage mortality and relatively homogeneous regional rates.

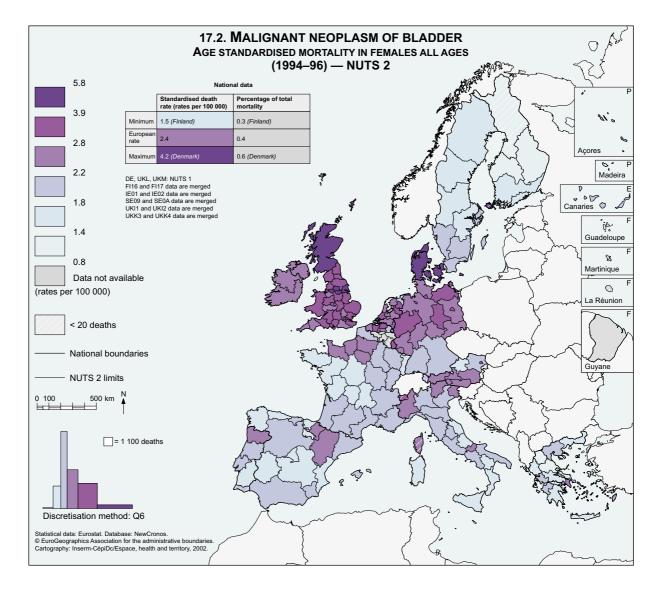
In the other Member States, the impact of cancer of the bladder is very uneven across the regions. In

Germany, the eastern *Länder* and Nordrhein-Westfalen have excess mortality. In the United Kingdom, the mortality rate in Scotland is twice that of Cornwall. In northern France, there is a clear-cut contrast between the western regions with belowaverage mortality and the eastern regions with high rates. In Spain, the islands, the coastal provinces and the Comunidad de Madrid are much worse affected. In Italy and Greece, other rates also vary considerably from one region to another.

The distribution of death rates for women, which are considerably lower than for men, is less uneven across Europe.

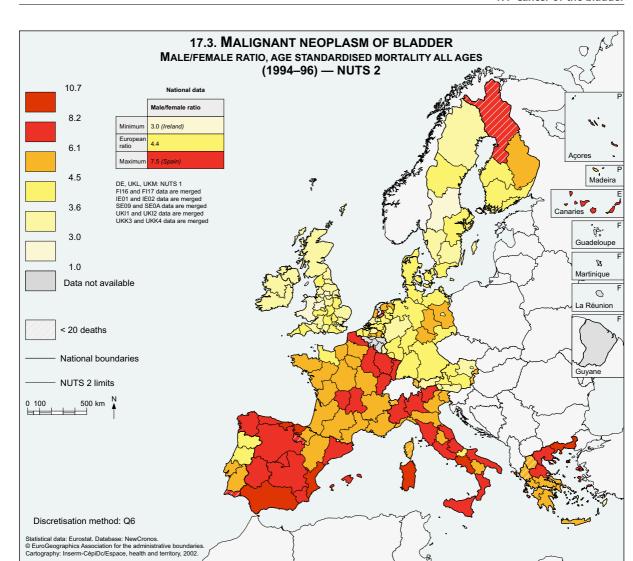
Denmark and the United Kingdom, particularly Scotland, are the most affected European countries. A broad band of relatively homogeneous excess mortality stretches from the UK to northern Germany. The low rates in Sweden and Finland contrast sharply with those in Denmark. In the rest

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of the EU, there are relatively higher female death rates in north-western France, Wien and southern Austria, northern Italy, northern Portugal, northeastern Spain and Attiki.

Although certain factors such as the consumption of coffee have been recognised as risk factors for cancer of the bladder, smoking remains the main identified factor. The similarities between the geographical pattern of respiratory cancers and that of cancers of the bladder seem to confirm the influence of tobacco on the development of this disease. Thus, as in the case of broncho-pulmonary cancers, it can be assumed that there will probably be an increase in future in cancers of the bladder among the female population as a result of increased smoking.



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