Cancer is the second leading cause of mortality in OECD countries after cardiovascular diseases, accounting for 25% of all deaths in 2013, up from 15% in 1960. In a number of countries, cancer is now the most frequent cause of death. The rising share of deaths due to cancer reflects the fact that mortality from other causes, particularly cardiovascular diseases, has been declining more rapidly than mortality from cancer.

There are more than 100 different types of cancers, with most named for the organ in which they start. For a large number of cancer types, the risk of developing the disease rises with age. While genetics is a risk factor, only about 5% to 10% of all cancers are inherited. Modifiable risk factors such as smoking, obesity, lack of exercise and excess sun exposure, as well as environmental exposures, explain up to 90-95% of all cancer cases (Anand et al., 2008). Prevention, early detection and treatment remain at the forefront in the battle to reduce the burden of cancer (OECD, 2013).

In 2013, the average rate of mortality attributable to cancer across OECD countries was just over 200 per 100 000 population (Figure 3.8). Mortality due to cancer was lowest in Mexico, Turkey, Finland, Switzerland and Japan, with rates less than 180 per 100 000 population. Hungary, Slovenia, the Slovak Republic and Denmark bear the highest cancer mortality burden, with rates in excess of 240 per 100 000 population.

Mortality due to cancer is consistently higher for men than for women in all countries. The gender gap is particularly wide in Korea, Turkey, Estonia, Spain and Portugal, with rates among men more than twice those for women. This gender gap can be explained partly by the greater prevalence of risk factors among men, notably smoking rates.

Among men, lung cancer imposes the highest mortality burden, accounting for 26% of all cancer-related deaths (Figure 3.9). In Turkey, Greece, Poland, Hungary and Belgium, this percentage was over 30%. For women, lung cancer accounted for 17% of all cancer-related deaths. In many countries, lung cancer mortality rates for men have decreased over the last 20 years. But lung cancer mortality has risen for women in several countries such as France and Spain where it has more than doubled since 1990. These conflicting trends are, to a large degree, explained by the high number of females who started smoking several decades later than males (in the 1980s and 1990s).

Breast cancer is the second most common cause of cancer mortality in women in many OECD countries. While there has been an increase in the incidence of breast cancer over the past decade, mortality has declined in most countries due to earlier diagnosis and better treatment. Mortality from breast cancer increased somewhat in Korea and Japan, although the rates there remained the lowest in 2013. Mortality rates from breast cancer in 2013 were highest in Denmark, Hungary, Belgium, Ireland, Slovenia and the Netherlands (see indicator “Screening, survival and mortality for breast cancer” in Chapter 8).

Colorectal cancer is a major cause of cancer mortality among both men and women (second-highest cause of cancer mortality in men and third in women). In 2013, colorectal cancer mortality was lowest in Mexico and Turkey, and highest in Hungary and the Slovak Republic (see indicator “Survival and mortality for colorectal cancer” in Chapter 8).

Prostate cancer has become the most common cancer among men in many OECD countries, particularly among men aged 65 years and over. Mortality from prostate cancer remains lower than for lung cancer in all countries except in Chile and Mexico, where it is the leading cause of cancer deaths in men, and in some Nordic countries (Iceland, Norway and Sweden) where mortality from prostate and lung cancer are almost equal. Mortality rates from prostate cancer in 2013 were lowest in Japan and Korea, and highest in Estonia and Iceland.

In most OECD countries, cancer-related mortality rates have fallen since 1990. On average, rates fell by 17% between 1990 and 2013. Substantial declines in mortality from stomach cancer, colorectal cancer, lung cancer for men, breast, cervical and ovarian cancer for women, as well as prostate cancer for men contributed to this reduction. However, these gains were partially offset by increases in the number of deaths due to cancer of the liver, skin and pancreas for both sexes, as well as lung cancer for women.

**Definition and comparability**

Mortality rates are based on numbers of deaths registered in a country in a year divided by the size of the corresponding population. The rates have been directly age-standardised to the 2010 OECD population to remove variations arising from differences in age structures across countries and over time. The source is the WHO Mortality Database. Deaths from all cancers are classified to ICD-10 codes C00-C97. The international comparability of cancer mortality data can be affected by differences in medical training and practices as well as in death certification across countries.

**References**


3. HEALTH STATUS

Mortality from cancer

3.8. Cancer mortality, 2013 (or nearest year)


3.9. Main causes of cancer deaths among men and women in OECD countries, 2013


Information on data for Israel: http://oe.cd/israel-disclaimer