



NEWS RELEASE

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Provincial Health Services Authority

World Cancer Day: time to bust five cancer myths

Vancouver – The BC Cancer Agency is working to dispel some common misconceptions about cancer, a disease that will be diagnosed in more than 24,000 people in the province in 2013.

In support of World Cancer Day (Monday February 4), here are five key cancer myths that may affect people's health and outlook:

Myth # 1 - There is nothing you can do about getting cancer

More than 50 per cent of cancers are preventable! Take charge of your health and follow these key lifestyle tips: Be tobacco-free; eat food that is good for you; keep your weight within your recommended Body Mass Index (BMI) level; get moving every day; and stay sun-safe.

Myth # 2 - Cancer is a death sentence

Better detection and treatment have resulted in more people living after cancer today than 30 years ago. Between 2000-2004, of those diagnosed with cancer, 83 per cent of children and 63 per cent of adults were alive five years later. That compares to only 48 per cent of children and 46 per cent of adults diagnosed between 1970 and 1974.

Myth # 3 - Cancer is a lot more common now than in the past

The likelihood of getting cancer has risen, by approximately six per cent over the last 30 years. Between 1974 and 2004, the likelihood of getting cancer before age 75 in BC only rose from 27 to 33 per cent. So although the actual number of people now diagnosed may seem much higher than a few decades ago (24,000 cases in 1970-74 compared to 63,000 in 2000-04), the increase in cancer cases is primarily due to population growth.

Myth # 4 – Most cancers are hereditary

Most cancers are actually not due to a hereditary risk. Only five to ten per cent of cancers are related to an inherited gene mutation. Age is the biggest risk factor for cancer; other common risks include smoking and diet.

Myth # 5 - In spite of large investments in cancer research, we are not making progress

Over the past 30 years, there has been considerable progress made in many childhood cancers, Hodgkin's lymphoma, cervical, testicular, and stomach cancers. The likelihood of dying from these diseases has fallen by 50 per cent!

There have been improvements in many other areas of cancer detection and treatment as well, but there is no single solution to curing cancer. The future of cancer care and research will focus on how to best individualize treatment for each patient, using both their genetics and genomic changes within cancer cell DNA to determine the best treatment.

Quotes:

Dr. Andy Coldman, vice-president, Population Oncology, BC Cancer Agency

"As we get older people often know more people who have been affected by cancer, which can leave the impression that things are getting worse. However the overall likelihood of being diagnosed with cancer has not increased greatly and you can take preventative steps to reduce your risk.

Take advantage of BC Cancer Agency screening programs for cervical and breast cancer and if you notice a change in your body, seek medical advice so it can be checked. Most cancers in their early stages have a much higher cure rate than a diagnosis that is found later on."

Sam Abraham, vice-president, Research, BC Cancer Agency

"Researchers are continually working to uncover new and better ways to detect and treat cancer in order to improve patient outcomes and quality of life. We've come a long way in understanding cancer, which affects all of us in some way. Research underwrites our future, and provides a pathway of hope for patients and their families. There are many exciting discoveries still to come in the fight against cancer."

The BC Cancer Agency is part of the Provincial Health Services Authority (PHSA), a specialist in prevention. PHSA is committed to sharing expertise and knowledge to promote health and prevent illness, manage chronic conditions, and lessen the burden of disease in high risk populations. PHSA encourages British Columbians to participate in screening programs for the early detection of disease to ensure the best health outcome possible.

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