

## Malignant Neoplasms in One City in Japan: Based on a Study of Trends

According to vital statistics in the Journal of Health and Welfare Statistics (1), malignant neoplasms were the leading cause of death in Japan in 2008. This marks the 28<sup>th</sup> straight year that malignant neoplasms were the leading cause of death (1). The top 3 causes of death in Japan in 2008 were malignant neoplasms, heart disease and cerebrovascular disease; these illnesses had a mortality rate per 100 000 population of 272.3, 144.4 and 100.9, respectively (1). Measures to prevent malignant neoplasms must be examined from a variety of perspectives. Trends for deaths due to malignant neoplasms must be studied in detail from a regional perspective. This report examined the ranking of malignant neoplasms as a cause of death, mortality rates for malignant neoplasms, and the percentage of deaths due to malignant neoplasms by cause of death from 1996–1998, 2001–2003 and 2006–2008 in Kawasaki City, Kanagawa Prefecture (2). This report also discussed the need for further measures to prevent malignant neoplasms based on trends during these three periods.

In all three periods of 1996–1998, 2001–2003 and 2006–2008, malignant neoplasm ranked as the leading cause of death. The mortality rate for malignant neoplasms (per 100 000 population) ranged from 166.1 to 175.6 in 1996–1998, from 189.0 to 195.4 in 2001–2003 and from 206.2 to 208.9 in 2006–2008. The percentage of deaths due to malignant neoplasms by cause of death was 32.2–33.0 in 1996–1998, 32.3–34.3 in 2001–2003 and 32.0–34.0 in 2006–2008. According to these results, malignant neoplasms remain one of the leading causes of death in Kawasaki City and effective measures at preventing these neoplasms are needed. In the last few years, Japan has implemented measures to counter cancer from various perspectives (3, 4). More specific and comprehensive measures to counter cancer must be studied and implemented in Kawasaki City and other regions of Japan in order to bring about a marked decline in the mortality rate from malignant neoplasms. Thus, these measures must be studied in relevant areas and bodies in these areas must act in closer concert to enhance these measures.

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**Keywords:** Cause of death, malignant neoplasms, trend

### REFERENCES

1. Journal of Health and Welfare Statistics. Health and Welfare Statistics Association 2010; **57**: 410–1. (in Japanese)
2. Kawasaki City. <http://www.city.kawasaki.jp/35/35syomu/chousa/nenpou/index.html>.
3. Shimada Y. [Ganchiryounohenkatokongonokadai]. Nursing Today 2010; **25**: 18–23. (in Japanese)
4. Kagioka K, Matsuda H, Kiriake M, Yarino R, Matsumoto A, Mizuta J et al. Work of palliative care team. Surgical Therapy 2007; **96**: 879–84. (in Japanese)