

Trends in net survival from prostate cancer in six European Latin countries: results from the SUDCAN population-based study

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Cancer survival is a key measure of the effectiveness of a health-care system. European Latin countries have some differences in their health system; therefore, it is of interest to compare them in terms of survival from cancer. Prostate cancer data from six countries (Belgium, France, Italy, Portugal, Spain, and Switzerland) were extracted from the EURO CARE-5 database (end of follow-up: 1 January 2009). First, the net survival (NS) was studied over the 2000–2004 period using the Pohar-Perme estimator. For trend analyses, the study period was specific to each country. Trends in NS over the 1989–2004 period and changes in the pattern of cancer excess mortality rate until 5 years after the diagnosis were examined using a multivariate excess mortality rate model. A striking increase in survival from prostate cancer occurred in European Latin countries at all ages studied. In the last period of the study, there was little difference in age-standardized NSs from prostate cancer between the six countries. The trends of the survival followed those of the incidence (except in Spain in the elderly); the increases in incidence were the highest at ages 60–70 years and, in the elderly (around 80 years), the incidence did not increase in Switzerland. The increases in NS can mainly be

explained by lead-time and overdiagnosis effects. The epidemiological interpretability of the changes in prostate cancer survival in Latin countries is strongly compromised by the biases inherent to the extensive prostate-specific antigen testing. *European Journal of Cancer Prevention* 25:S114–S120 Copyright © 2016 Wolters Kluwer Health, Inc. All rights reserved.

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