

FACT SHEET LYMPHOMAS

What are lymphomas?

- Lymphoma is a general term that includes 35 different sub-types of the disease. These can be divided into two main types: Hodgkin Lymphoma and non-Hodgkin lymphomas (or B-cell and T-cell lymphomas).
- Lymphomas are a cancer of white cells produced by the bone marrow and matured in the lymphatic system. The cancer may originate in the lymph glands or organs such as the liver, spleen, bowel or bone marrow.

Incidence:

- Lymphomas are the most common form of haematological or blood cancer in Australia.
- Lymphomas are the fifth most common form of cancer in Australiaⁱ (fifth in Australian women and the sixth most common in Australian men).
- Lymphoma is the sixth most common cause of cancer death.
- The incidence of lymphomas has more than doubled over the past 20 years for no known reason and continues to rapidly increase in Australia.
- In developed countries, over the 50 year period from 1950 – 2000, the incidence of non-Hodgkin lymphoma (NHL) increased dramatically by about 300%. Since the 1990's, the rates of lymphoma have started to flatten out at the elevated level of incidence.
- In 2009, approximately 5,500 Australians are projected to be diagnosed with lymphomas; the equivalent of 12 people every day. Of these, most (89%) have non-Hodgkin lymphomaⁱⁱ.
- In 2010, it is projected there will be 4,734 Australians diagnosed with non-Hodgkin lymphoma (an increase of 30.5% since 2002)ⁱⁱ.
- Non-Hodgkin lymphoma had the fifth highest increase in cancer incidence in the 10 years between 1993 and 2003ⁱⁱⁱ.

Survival:

- Five years after diagnosis about 62% of people will have survived non-Hodgkin lymphoma^{iv} and 85% Hodgkin lymphoma (HL).
- Survival rates for younger people are better than for older people.

Table 1: NHL Survival with age between 1998-2004^{iv}

Persons	1 year % survival	5 year % survival
0-19 yrs	89.9	84.4
20-29yrs	87.9	80.5
30-39yrs	88.1	79.9
40-49yrs	90.3	80.8
50-59yrs	88.5	74.5
60-69yrs	83.3	65.8
70-79yrs	71.5	51.3
80-89yrs	55.8	37.3
90+ yrs	36.2	20.6
All ages	77.9	62.1

- Clinical trial data show survival rates could be significantly improved with the newer combination therapies.
- Non-Hodgkin lymphoma is the sixth most common cause of cancer death.
- Lymphomas are seen in all age groups but are more common in people aged 50+. The peak age for diagnosis of Hodgkin Lymphoma is between 15 and 30 years.
- Australia's incidence and mortality rates for non-Hodgkin's lymphoma are the same as NZ and Canada, higher than the UK but lower than USAⁱ.
- People with non-Hodgkin lymphoma recorded the third best improvement in survival in cancer from under 50% to over 60% five years after diagnosis between 1982 and 2004.
 - For males with non-Hodgkin lymphoma, survival increased from 46% in 1982 – 1986 to 62% in 1998 – 2004^{iv}
 - For females with non-Hodgkin lymphoma, survival increased from 48% in 1982 – 1986 to 63% in 1998 – 2004^{iv}.

Causes:

- Despite the fact that the incidence of lymphoma is increasing each year, the causes of lymphomas is unknown, but it does seem to be related to western lifestyle.
- Severe immunodeficiency and rare infections leading to chronic inflammation are established risk factors for lymphoma.

Treatment:

- Treatment depends on the exact type of lymphoma, the stage of the disease at diagnosis and how fast it is likely to grow and cause problems in the body. It also depends on the person's age and their general health.
- The best outcome for patients with lymphoma is dependent on accurate diagnosis and immediate commencement of appropriate treatment.
- Treatment can involve chemotherapy, radiotherapy and monoclonal antibodies. In some instances, a stem cell transplant is required to treat the disease that has relapsed (come back) or where there is a high likelihood that the disease will relapse in the future.

The impact:

- Lymphoma can develop in anyone, of any age, at any time.
- Diagnosis with an aggressive lymphoma can turn lives upside down overnight. Families from rural or regional Australia often need to quickly relocate to major cities to be closer to treatment centres. This is usually for extended periods of time.
- Relocation is particularly traumatic as it often occurs after diagnosis, resulting in patients and families adjusting to their new circumstances without the benefit of established local support networks. Combined with costly medical bills and loss of income, many families find themselves in financially crippling circumstances whilst coping with the shock and emotional turmoil associated with the diagnosis.
- On average, treatment of haematological cancers lasts for many months but can continue for years.

**For further information or support, please contact the Foundation:
1800 620 420 or www.leukaemia.org.au**

Last updated October 2008

ⁱ Cancer in Australia 2000, Australian Institute of Health and Welfare (AIHW) & Australia Associated Cancer Registry (2003)

ⁱⁱ Cancer incidence projections for Australia 2002-2011 – AIHW (2005)

ⁱⁱⁱ Cancer in Australia – An Overview – AIHW (2006)

^{iv} Cancer survival and prevalence in Australia – Cancers diagnosed from 1982 to 2004 – AIHW & AACR (2008)