# 41. Saga

A.	Population (2010)	Total	846,146
		Male	398,787
		Female	447,359
В.	Over-75 population growth	rate (2010~2030)	135% (29 <sup>th</sup> growth rate)
C.	At-home mortality rate (20	010)	8.0% (1 <sup>st</sup> lowest)

#### I. Cancer mortality rate \*1[2010]

1. Cancer mortality rate 1201	0]	
I - 1 All cancer	I - 2 Improvement in cancer mortal	lity rate ※ 2006~2010
Total 87.9 (worst 10)	Total 7.7% (worst 33)	
Male 116.7 (worst 9)	Male 8.7% (worst 27)	
Female 63.5 (worst 13)	Female 7.8% (worst 39)	
I - 3 Stomach	I - 4 Colon	I-5 Lung
Total 11.0 (worst 31)	Total 8.2 (worst 47)	Total 15.1 (worst 17)
Male 16.5 (worst 31)	Male 11.3 (worst 43)	Male 24.9 (worst 12)
Female 6.3 (worst 29)	Female 5.4 (worst 46)	Female 6.7 (worst 25)
I - 6 Liver	I - 7 Breast	
Total 10.3 (worst 5)	Female 12.5 (worst 3)	
Male 16.7 (worst 7)		
Female 4.7 (worst 2)		

II. Cancer screening rate, smoking rate [2010]				
II - 1 Screening (stomach)*2	II-2 Screening (lung) *2	II-3 Screening (colon) *2		
Total 32.7% (worst 34)	Total 25.9% (worst 25)	Total 24.5% (worst 22)		
Male 35.6% (worst 27)	Male 27.3% (worst 24)	Male 27.3% (worst 21)		
Female 30.1% (worst 34)	Female 24.7% (worst 26)	Female 22.0% (worst 20)		
II-4 Screening (breast) *2	II-5 Screening (uterine) *3	II - 6 Smoking rate		
Female 23.2% (worst 18)	Female 25.5% (worst 27)	Total 21.3% (worst 17)		
		Male 34.7% (worst 12)		

ш. С	Cancer care resources [as of June 2012]	
<b>Ⅲ-</b> 1	No. of certified cancer specialists *4	73.3 (worst 15)
<b>Ⅲ-2</b>	No. of cancer drug therapy specialists *4	9.5 (worst 44)
<b>Ⅲ-</b> 3	No. of certified radiation therapy specialists *4	3.5 (worst 12)
<b>Ⅲ-4</b>	No. of certified radiation therapy technicians *4	0.0 (worst 1)
<b>Ⅲ-</b> 5	No. of specialist cancer care nurses *4	0.0 (worst 1)
Ⅲ-6	No. of certified chemotherapy nurses *4	4.7 (worst 7)

Female

7.7% (worst 35)

 $<sup>^{*1}</sup>$  below 75 years of age, age adjusted, per 100,000 population  $^{*2}$  Ages 40 and over  $^{*3}$  Ages 20 and over

<sup>\*4</sup> per 1 million population

No. of certified radiation therapy nurses *4	0.0 (worst 1)
No. of certified palliative care nurses *4	5.9 (worst 11)
No. of certified pain management nurses *4	3.6 (worst 23)
No. of certified home-visit nurses *4	2.4 (worst 40)
No. of hospice beds *4	62.6 (worst 41)
No. of comprehensive cancer centers	4
(Breakdown: prefectural comprehensive cancer center 1,	regional comprehensive cancer center 3 )
	No. of certified palliative care nurses *4 No. of certified pain management nurses *4 No. of certified home-visit nurses *4 No. of hospice beds *4 No. of comprehensive cancer centers

(Breakdown: prefectural comprehensive cancer center 1, regional comprehensive cancer center 3)				
IV. Information about the structure of prefe	ectura	l cance	er control programs [as of July 2012]	
※All items that apply are indicated by  ॐ mark. Fig	gures shown	n in () indi	cate the number of o confirmations and responses received from all 47 pr	efectures.
<organization></organization>				
IV - 1 There is a dedicated cancer control department (20/47)	0	<b>I</b> V-2	There is a website (or section of a website) specifically for cancer control information (35/47)	-
<ordinances></ordinances>				
IV - 3 An ordinance for promotion of cancer control programs has been enacted (19/47)	-	IV - 4	There is movement towards enacting an ordinance for promotion of cancer control programs (9/47)	0
IV - 5 The establishment of a cancer control ordinance, or the movement towards it, is an governmental initiative (4/47)	0	IV - 6	The establishment of a cancer control ordinance, or the movement towards it, is a lawmaker-led initiative $(17/47)$	-
<plans, etc.=""></plans,>				
IV - 7 An interim appraisal of the prefecture's cancer control plan has been conducted (18/47)	-	IV - 8	The prefecture is scheduled to develop its next cancer control plan during 2012 (47/47)	0
IV - 9 An action plan will be formulated for implementation of the prefecture's next cancer control plan (15/47)	-	IV - 10	Information/data on cancer control in the prefecture, such as an annual report, has been compiled and published $\ (10/47)$	-
IV - 11 Events relating to cancer control are held on a regular, annual basis (17/47)	-	<b>I</b> V - 12	The prefecture undertakes its own survey of conditions relating to cancer and cancer control in the region $(25/47)$	0
The prefecture undertakes its own patient satisfaction  IV-13 survey of conditions relating to cancer and cancer control in the region (8/47)	-			
<budgets etc.=""></budgets>				
IV - 14 There is a process for collecting the opinions of residents on cancer control measures (21/47)	-	IV - 15	There is a process for collecting the opinions of residents on the following year's budget for cancer control (8/47)	-
IV - 16 Information relating to the cancer control budget, evaluation, etc. is made publicly available on the internet etc. (15/47)	-			
<prefectural assembly=""></prefectural>				
IV - 17 There is a non-partisan caucus of assembly members relating to cancer control (7/47)	-			
<patient activity="" and="" patient="" support=""></patient>				
IV - 18 A general counseling & support center has been established through the prefectural budget (9/47)	-	IV - 19	Information and guidance relating to patient groups is provided through the prefecture's website and literature (24/47)	0
There is a budget and structure in place to support patient saloons, study meetings etc. (27/47)	0			
<committee etc.=""></committee>				
IV - 21 Title of the dedicated cancer control departme	nt [	健康増進	課がん対策推断担当 』	
IV - 22 No. of times Prefectural Committee for Promo	otion of	Cancer (	Control met in 2011 (average 1.3) : 1	
			l is scheduled to meet in 2012 (average 3.0) : 2	
IV - 24 No. of times Prefectural Committee for Cance	r Care (	Collabora	ation met in 2011 (average 1.7) : 1	
IV - 25 No. of members of Prefectural Committee for Promotion of Cancer Control:				
	Patients/Patient-related (average 2.3) 2, Total 17			

# 42. Nagasaki

A.	Population (2010)	Total	1,420,166
		Male	663,130
		Female	757,036
В.	Over-75 population growth	rate (2010~2030)	134% (31 <sup>st</sup> growth rate)
C.	At-home mortality rate (20	010)	9.0% (7 <sup>th</sup> lowest)

	_		*4	
Т	Cancor	mortality	/rata '	「つしょし」
Ι.	Caricer	mortanty	ומוכ	

I . Cancer mortality rate *1[2	010]	
I - 1 All cancer	I - 2 Improvement in cancer mor	rtality rate ※ 2006~2010
Total 88.3 (worst 9)	Total 5.3% (worst 19)	_
Male 113.1 (worst 14)	Male 9.2% (worst 33)	_
Female 67.4 (worst 3)	Female -0.9% (worst 11)	<u>_</u>
I - 3 Stomach	I - 4 Colon	I - 5 Lung
Total 11.5 (worst 24)	Total 9.9 (worst 30)	Total 15.4 (worst 9)
Male 17.5 (worst 19)	Male 12.7 (worst 29)	Male 23.4 (worst 20)
Female 6.4 (worst 27)	Female 7.4 (worst 25)	Female 8.5 (worst 2)
I - 6 Liver	I - 7 Breast	
Total 8.5 (worst 15)	Female 10.6 (worst 22)	_
Male 13.6 (worst 16)	_	
Female 4.0 (worst 12)		

II. Cancer screening rate, smoking rate [2010]				
II - 1 Screening (stomach)*2	II-2 Screening (lung) *2	II-3 Screening (colon) *2		
Total 25.3% (worst 3)	Total 20.7% (worst 11)	Total 19.7% (worst 4)		
Male 29.8% (worst 4)	Male 22.3% (worst 12)	Male 22.6% (worst 4)		
Female 21.9% (worst 4)	Female 19.1% (worst 12)	Female 17.3% (worst 3)		
II - 4 Screening (breast) *2	II-5 Screening (uterine) *3	II - 6 Smoking rate		
Female 21.0% (worst 7)	Female 21.8% (worst 8)	Total 20.6% (worst 22)		
		Male 34.9% (worst 11)		
		Female 8.9% (worst 26)		

Ⅲ. Cancer care resources [as of June 2012]			
<b>Ⅲ</b> -1	No. of certified cancer specialists *4	97.2 (worst 32)	
<b>II</b> -2	No. of cancer drug therapy specialists *4	3.5 (worst 11)	
<b>I</b> II-3	No. of certified radiation therapy specialists *4	3.5 (worst 11)	
<b>Ⅲ-4</b>	No. of certified radiation therapy technicians *4	0.0 (worst 1)	
<b>I</b> I-5	No. of specialist cancer care nurses *4	0.0 (worst 1)	
<b>Ⅲ-</b> 6	No. of certified chemotherapy nurses *4	7.0 (worst 28)	

 $<sup>^{*1}</sup>$  below 75 years of age, age adjusted, per 100,000 population  $^{*2}$  Ages 40 and over  $^{*3}$  Ages 20 and over

per 1 million population

Ⅲ-7	No. of certified radiation therapy nurses *4	0.7 (worst 34)
<b>II</b> -8	No. of certified palliative care nurses *4	16.9 (worst 46)
<b>Ⅲ-</b> 9	No. of certified pain management nurses *4	4.2 (worst 31)
<b>Ⅲ-1</b> 0	No. of certified home-visit nurses *4	2.1 (worst 34)
<b>Ⅲ-11</b>	No. of hospice beds *4	45.1 (worst 32)
<b>Ⅲ-12</b>	No. of comprehensive cancer centers	6
	(Breakdown: prefectural comprehensive cancer center 1,	regional comprehensive cancer center 5 )

#### Information about the structure of prefectural cancer control programs [as of July 2012] \*\*All items that apply are indicated by a mark. Figures shown in () indicate the number of ○ confirmations and responses received from all 47 prefectures. <Organization> There is a website (or section of a website) There is a dedicated cancer control department **I**V - 1 ₩-2 $\bigcirc$ $\bigcirc$ (20/47)specifically for cancer control information (35/47) <Ordinances> An ordinance for promotion of cancer control There is movement towards enacting an ordinance for **IV** - 3 **IV** - 4 programs has been enacted (19/47) promotion of cancer control programs (9/47) The establishment of a cancer control ordinance, or the The establishment of a cancer control ordinance, or the **IV** - 6 **IV** - 5 $\bigcirc$ movement towards it, is an governmental initiative (4/47)movement towards it, is a lawmaker-led initiative (17/47) < Plans, etc. > An interim appraisal of the prefecture's cancer The prefecture is scheduled to develop its next cancer IV - 7 ₩-8 $\bigcirc$ control plan has been conducted (18/47) control plan during 2012 (47/47) An action plan will be formulated for implementation of Information/data on cancer control in the prefecture, such as **W**-9 IV - 10 the prefecture's next cancer control plan (15/47) an annual report, has been compiled and published (10/47) Events relating to cancer control are held on a The prefecture undertakes its own survey of conditions IV - 11 $\bigcirc$ IV - 12 relating to cancer and cancer control in the region (25/47) regular, annual basis (17/47) The prefecture undertakes its own patient satisfaction IV - 13 survey of conditions relating to cancer and cancer $\bigcirc$ control in the region (8/47) <Budgets etc.> There is a process for collecting the opinions of residents There is a process for collecting the opinions of IV - 14 TV - 15 residents on cancer control measures (21/47) on the following year's budget for cancer control (8/47) Information relating to the cancer control budget, evaluation, TV - 16 etc. is made publicly available on the internet etc. (15/47)<Prefectural assembly> There is a non-partisan caucus of assembly members relating to cancer control (7/47) < Patient support and Patient activity > A general counseling & support center has been Information and guidance relating to patient groups is provided IV - 18 IV - 19 established through the prefectural budget (9/47) through the prefecture's website and literature (24/47) There is a budget and structure in place to support IV - 20 patient saloons, study meetings etc. (27/47) <Committee etc.> IV - 21 Title of the dedicated cancer control department 『 保健医療対策協議会がん対策部会 』 IV - 22 No. of times Prefectural Committee for Promotion of Cancer Control met in 2011 (average 1.3): 0 IV - 23 No. of times Prefectural Committee for Promotion of Cancer Control is scheduled to meet in 2012 (average 3.0): 4 IV - 24 No. of times Prefectural Committee for Cancer Care Collaboration met in 2011 (average 1.7): 1 IV - 25 No. of members of Prefectural Committee for Promotion of Cancer Control: Patients/Patient-related (average 2.3) 1, Total 13

# 43. Kumamoto

A. Population (2010) Total 1,809,626 850,748 Male Female 958,878

133% (34<sup>th</sup> growth rate) B. Over-75 population growth rate  $(2010\sim2030)$ 

8.6% (2<sup>nd</sup> lowest) C. At-home mortality rate (2010)

## or mortality rate \*1[2010]

1. Cancer mortality rate [201	0]	
I - 1 All cancer	I - 2 Improvement in cancer mortal	lity rate ※ 2006~2010
Total 79.3 (worst 40)	Total 3.4% (worst 11)	
Male 100.3 (worst 43)	Male 7.8% (worst 22)	
Female 61.2 (worst 24)	Female -1.9% (worst 7)	
I - 3 Stomach	I - 4 Colon	I - 5 Lung
Total 7.8 (worst 46)	Total 9.0 (worst 41)	Total 14.3 (worst 29)
Male 10.9 (worst 46)	Male 11.4 (worst 41)	Male 22.4 (worst 33)
Female 5.1 (worst 43)	Female 6.9 (worst 31)	Female 7.4 (worst 11)
I - 6 Liver	I - 7 Breast	
Total 9.2 (worst 11)	Female 10.4 (worst 24)	
Male 14.6 (worst 10)		
Female 4.2 (worst 9)		

II. Cancer screening rate, sm	oking rate [2010]	
II - 1 Screening (stomach)*2	II-2 Screening (lung) *2	II-3 Screening (colon) *2
Total 36.1% (worst 41)	Total 29.0% (worst 40)	Total 28.3% (worst 40)
Male 40.1% (worst 41)	Male 30.0% (worst 37)	Male 31.0% (worst 40)
Female 33.0% (worst 40)	Female 28.3% (worst 42)	Female 26.1% (worst 37)
II-4 Screening (breast) *2	II-5 Screening (uterine) *3	II - 6 Smoking rate
Female 31.6% (worst 44)	Female 29.5% (worst 44)	Total 19.7% (worst 32)
		Male 32.8% (worst 26)
		Female 8.6% (worst 27)

### Ⅲ. Cancer care resources [as of June 2012]

<b>Ⅲ-</b> 1	No. of certified cancer specialists *4	115.5 (worst 40)
<b>Ⅲ-2</b>	No. of cancer drug therapy specialists *4	3.3 (worst 10)
<b>Ⅲ-</b> 3	No. of certified radiation therapy specialists *4	4.4 (worst 24)
<b>Ⅲ-4</b>	No. of certified radiation therapy technicians *4	0.0 (worst 1)
<b>Ⅲ-</b> 5	No. of specialist cancer care nurses *4	1.7 (worst 20)
<b>Ⅲ-</b> 6	No. of certified chemotherapy nurses *4	5.5 (worst 14)

<sup>\*1</sup> below 75 years of age, age adjusted, per 100,000 population \*2 Ages 40 and over \*3 Ages 20 and over

per 1 million population

Ⅲ-7	No. of certified radiation therapy nurses *4	1.1 (worst	42)
<b>II</b> -8	No. of certified palliative care nurses *4	9.4 (worst	29)
<b>II</b> -9	No. of certified pain management nurses *4	4.4 (worst	35)
<b>Ⅲ-1</b> 0	No. of certified home-visit nurses *4	1.7 (worst	25)
<b>Ⅲ-11</b>	No. of hospice beds *4	66.3 (worst	42)
Ⅲ-12	No. of comprehensive cancer centers	8	
	(Breakdown: prefectural comprehensive cancer center 1,	regional comp	orehensive cancer center 7 )

#### Information about the structure of prefectural cancer control programs [as of July 2012] \*\*All items that apply are indicated by a mark. Figu res shown in () indicate the number of confirmations and responses received from all 47 prefectures <Organization> There is a website (or section of a website) There is a dedicated cancer control department W - 1 ₩-2 (20/47)specifically for cancer control information (35/47) <Ordinances> An ordinance for promotion of cancer control There is movement towards enacting an ordinance for **IV** - 3 **IV** - 4 programs has been enacted (19/47) promotion of cancer control programs (9/47) The establishment of a cancer control ordinance, or the The establishment of a cancer control ordinance, or the **IV** - 6 **IV** - 5 movement towards it, is a lawmaker-led initiative (17/47) movement towards it, is an governmental initiative (4/47)< Plans, etc. > An interim appraisal of the prefecture's cancer The prefecture is scheduled to develop its next cancer IV - 7 ₩-8 $\bigcirc$ control plan has been conducted (18/47) control plan during 2012 (47/47) An action plan will be formulated for implementation of Information/data on cancer control in the prefecture, such as **W**-9 IV - 10 the prefecture's next cancer control plan (15/47) an annual report, has been compiled and published (10/47) Events relating to cancer control are held on a The prefecture undertakes its own survey of conditions IV - 11 $\bigcirc$ IV - 12 relating to cancer and cancer control in the region (25/47) regular, annual basis (17/47) The prefecture undertakes its own patient satisfaction IV - 13 survey of conditions relating to cancer and cancer control in the region (8/47) <Budgets etc.> There is a process for collecting the opinions of residents There is a process for collecting the opinions of IV - 14 TV - 15 0 residents on cancer control measures (21/47) on the following year's budget for cancer control (8/47) Information relating to the cancer control budget, evaluation, IV - 16 etc. is made publicly available on the internet etc. (15/47)<Prefectural assembly> There is a non-partisan caucus of assembly members relating to cancer control (7/47) < Patient support and Patient activity > A general counseling & support center has been Information and guidance relating to patient groups is provided IV - 18 IV - 19 established through the prefectural budget (9/47) through the prefecture's website and literature (24/47) There is a budget and structure in place to support IV - 20 patient saloons, study meetings etc. (27/47) <Committee etc.> IV - 21 Title of the dedicated cancer control department IV - 22 No. of times Prefectural Committee for Promotion of Cancer Control met in 2011 (average 1.3): 0 IV - 23 No. of times Prefectural Committee for Promotion of Cancer Control is scheduled to meet in 2012 (average 3.0): 1 IV - 24 No. of times Prefectural Committee for Cancer Care Collaboration met in 2011 (average 1.7): 0 IV - 25 No. of members of Prefectural Committee for Promotion of Cancer Control: Patients/Patient-related (average 2.3) 3, Total 18

# 44. Oita

A.	Population (2010)	Total	1,187,599
		Male	561,248
		Female	626,351
B.	Over-75 population growth	rate (2010~2030)	135% (29 <sup>th</sup> growth rate)
C.	At-home mortality rate (20	010)	8.8% (5 <sup>th</sup> lowest)

I. Cancer mortality rate [20]	010]	
I - 1 All cancer	I - 2 Improvement in cancer more	tality rate ※ 2006~2010
Total 77.4 (worst 42)	Total 6.1% (worst 22)	_
Male 105.2 (worst 34)	Male 1.6% (worst 4)	
Female 53.5 (worst 45)	Female 12.0% (worst 46)	_
I - 3 Stomach	I - 4 Colon	I-5 Lung
Total 8.2 (worst 44)	Total 8.4 (worst 46)	Total 14.0 (worst 36)
Male 12.5 (worst 44)	Male 11.0 (worst 45)	Male 22.9 (worst 29)
Female 4.5 (worst 45)	Female 6.1 (worst 43)	Female 6.3 (worst 31)
I - 6 Liver	I - 7 Breast	
Total 9.7 (worst 7)	Female 9.0 (worst 40)	_
Male 16.7 (worst 6)		_
Female 3.6 (worst 18)	_	

II. Cancer screening rate, smoking rate [2010]		
II - 1 Screening (stomach)*2	II-2 Screening (lung) *2	II-3 Screening (colon) *2
Total 32.6% (worst 30)	Total 23.6% (worst 20)	Total 25.7% (worst 26)
Male 35.6% (worst 26)	Male 24.1% (worst 17)	Male 28.5% (worst 28)
Female 30.1% (worst 33)	Female 23.1% (worst 21)	Female 23.4% (worst 26)
II - 4 Screening (breast) *2	II-5 Screening (uterine) *3	II - 6 Smoking rate
Female 28.5% (worst 39)	Female 28.6% (worst 42)	Total 19.7% (worst 30)
	<del>-</del>	Male 32.0% (worst 34)
		Female 7.7% (worst 38)

Ш. С	■. Cancer care resources [as of June 2012]			
<b>Ⅲ-</b> 1	No. of certified cancer specialists *4	74.9 (worst 18)		
<b>II</b> -2	No. of cancer drug therapy specialists *4	5.1 (worst 25)		
<b>Ⅲ-</b> 3	No. of certified radiation therapy specialists *4	5.1 (worst 27)		
Ⅲ-4	No. of certified radiation therapy technicians *4	0.8 (worst 26)		
Ⅲ-5	No. of specialist cancer care nurses *4	1.7 (worst 21)		
Ⅲ-6	No. of certified chemotherapy nurses *4	10.9 (worst 42)		

 $<sup>^{*1}</sup>$  below 75 years of age, age adjusted, per 100,000 population  $^{*2}$  Ages 40 and over  $^{*3}$  Ages 20 and over

<sup>\*4</sup> per 1 million population

Ⅲ-7	No. of certified radiation therapy nurses *4	0.8 (worst 38)
<b>II</b> -8	No. of certified palliative care nurses *4	10.9 (worst 37)
<b>II</b> -9	No. of certified pain management nurses *4	3.4 (worst 20)
<b>Ⅲ-1</b> 0	No. of certified home-visit nurses *4	10.1 (worst 47)
<b>Ⅲ-11</b>	No. of hospice beds *4	42.1 (worst 30)
Ⅲ-12	No. of comprehensive cancer centers	7
	(Breakdown: prefectural comprehensive cancer center 1,	regional comprehensive cancer center 6 )

#### Information about the structure of prefectural cancer control programs [as of July 2012] \*\*All items that apply are indicated by a mark. Figures shown in () indicate the number of ○ confirmations and responses received from all 47 prefectures. <Organization> There is a website (or section of a website) There is a dedicated cancer control department W - 1 ₩-2 $\bigcirc$ (20/47)specifically for cancer control information (35/47) <Ordinances> An ordinance for promotion of cancer control There is movement towards enacting an ordinance for **IV** - 3 **IV** - 4 programs has been enacted (19/47) promotion of cancer control programs (9/47) The establishment of a cancer control ordinance, or the The establishment of a cancer control ordinance, or the **IV** - 6 **IV** - 5 movement towards it, is a lawmaker-led initiative (17/47) movement towards it, is an governmental initiative (4/47)< Plans, etc. > An interim appraisal of the prefecture's cancer The prefecture is scheduled to develop its next cancer IV - 7 ₩-8 $\bigcirc$ control plan has been conducted (18/47) control plan during 2012 (47/47) An action plan will be formulated for implementation of Information/data on cancer control in the prefecture, such as **W**-9 IV - 10 the prefecture's next cancer control plan (15/47) an annual report, has been compiled and published (10/47) Events relating to cancer control are held on a The prefecture undertakes its own survey of conditions IV - 11 IV - 12 relating to cancer and cancer control in the region (25/47) regular, annual basis (17/47) The prefecture undertakes its own patient satisfaction IV - 13 survey of conditions relating to cancer and cancer control in the region (8/47) <Budgets etc.> There is a process for collecting the opinions of residents There is a process for collecting the opinions of IV - 14 TV - 15 residents on cancer control measures (21/47) on the following year's budget for cancer control (8/47) Information relating to the cancer control budget, evaluation, IV - 16 $\bigcirc$ etc. is made publicly available on the internet etc. (15/47)<Prefectural assembly> There is a non-partisan caucus of assembly members relating to cancer control (7/47) < Patient support and Patient activity > A general counseling & support center has been Information and guidance relating to patient groups is provided IV - 18 IV - 19 established through the prefectural budget (9/47) through the prefecture's website and literature (24/47) There is a budget and structure in place to support IV - 20 patient saloons, study meetings etc. (27/47) <Committee etc.> IV - 21 Title of the dedicated cancer control department IV - 22 No. of times Prefectural Committee for Promotion of Cancer Control met in 2011 (average 1.3) : 1 IV - 23 No. of times Prefectural Committee for Promotion of Cancer Control is scheduled to meet in 2012 (average 3.0): 2 IV - 24 No. of times Prefectural Committee for Cancer Care Collaboration met in 2011 (average 1.7): 1 IV - 25 No. of members of Prefectural Committee for Promotion of Cancer Control: Patients/Patient-related (average 2.3) 0, Total 17

# 45. Miyazaki

A.	Population (2010)	Total	1,131,381
		Male	531,473
		Female	599,908
B.	Over-75 population growth	rate (2010~2030)	140% (26 <sup>th</sup> growth rate)

C. At-home mortality rate (2010) 8.9% (6<sup>th</sup> lowest)

#### I. Cancer mortality rate \*1[2010]

I. Cancer mortality rate '[20	10]	
I - 1 All cancer	I - 2 Improvement in cancer mort	ality rate ※ 2006~2010
Total 82.0 (worst 27)	Total 1.9% (worst 5)	
Male 105.5 (worst 31)	Male 4.4% (worst 9)	
Female 61.5 (worst 22)	Female -1.3% (worst 10)	_
I - 3 Stomach	I - 4 Colon	I - 5 Lung
Total 9.8 (worst 41)	Total 8.9 (worst 44)	Total 14.6 (worst 22)
Male 14.2 (worst 41)	Male 11.2 (worst 44)	Male 23.3 (worst 25)
Female 6.1 (worst 31)	Female 6.9 (worst 34)	Female 7.0 (worst 17)
I - 6 Liver	I - 7 Breast	
Total 8.3 (worst 16)	Female 9.7 (worst 33)	_
Male 12.8 (worst 19)		-
Female 4.3 (worst 7)	-	

## II. Cancer screening rate, smoking rate [2010]

II. Carloci sorccining rate, sinc	ming rate [2010]	
II - 1 Screening (stomach)*2	II-2 Screening (lung) *2	II - 3 Screening (colon) *2
Total 29.3% (worst 17)	Total 20.9% (worst 12)	Total 21.4% (worst 7)
Male 34.3% (worst 22)	Male 22.1% (worst 11)	Male 24.9% (worst 8)
Female 25.4% (worst 18)	Female 19.9% (worst 15)	Female 18.5% (worst 8)
II-4 Screening (breast) *2	II-5 Screening (uterine) *3	II - 6 Smoking rate
Female 24.6% (worst 24)	Female 23.9% (worst 18)	Total 21.1% (worst 18)
		Male 35.1% (worst 8)
		Female 8.4% (worst 30)

### Ⅲ. Cancer care resources [as of June 2012]

No. of certified cancer specialists *4	65.4 (worst	10)
No. of cancer drug therapy specialists *4	2.7 (worst	8)
No. of certified radiation therapy specialists *4	3.5 (worst	13)
No. of certified radiation therapy technicians *4	0.0 (worst	1)
No. of specialist cancer care nurses *4	1.8 (worst	24)
No. of certified chemotherapy nurses *4	7.1 (worst	29)
	No. of certified cancer specialists *4  No. of cancer drug therapy specialists *4  No. of certified radiation therapy specialists *4  No. of certified radiation therapy technicians *4  No. of specialist cancer care nurses *4  No. of certified chemotherapy nurses *4	No. of cancer drug therapy specialists *4 2.7 (worst No. of certified radiation therapy specialists *4 3.5 (worst No. of certified radiation therapy technicians *4 0.0 (worst No. of specialist cancer care nurses *4 1.8 (worst

 $<sup>^{*1}</sup>$  below 75 years of age, age adjusted, per 100,000 population  $^{*2}$  Ages 40 and over  $^{*3}$  Ages 20 and over

<sup>\*4</sup> per 1 million population

Ⅲ-7	No. of certified radiation therapy nurses *4	0.0 (worst 1)
<b>II</b> -8	No. of certified palliative care nurses *4	5.3 (worst 10)
<b>II</b> -9	No. of certified pain management nurses *4	1.8 (worst 6)
<b>Ⅲ-1</b> 0	No. of certified home-visit nurses *4	0.9 (worst 13)
<b>Ⅲ-11</b>	No. of hospice beds *4	53.0 (worst 37)
<b>Ⅲ-12</b>	No. of comprehensive cancer centers	3
	(Breakdown: prefectural comprehensive cancer center 1,	regional comprehensive cancer center 2 )

	(Breakdown: prefectural comprehensive cancer	center	l, region	nal comprehensive cancer center 2 )	
IV. In	formation about the structure of prefe	ectura	I cance	er control programs [as of July 2012]	
	※All items that apply are indicated by a mark. Fig.	gures showr	n in () indi	cate the number of o confirmations and responses re ceived from all 47 pr	efectures.
<organ< td=""><td>ization&gt;</td><td></td><td></td><td></td><td></td></organ<>	ization>				
IV - 1	There is a dedicated cancer control department (20/47)	-	<b>I</b> V - 2	There is a website (or section of a website) specifically for cancer control information (35/47)	0
<ordina< td=""><td>nnces&gt;</td><td></td><td></td><td></td><td></td></ordina<>	nnces>				
11/ - :3	An ordinance for promotion of cancer control programs has been enacted (19/47)	0	IV - 4	There is movement towards enacting an ordinance for promotion of cancer control programs (9/47)	-
IV - 5	The establishment of a cancer control ordinance, or the movement towards it, is an governmental initiative $(4/47)$	-	IV - 6	The establishment of a cancer control ordinance, or the movement towards it, is a lawmaker-led initiative $(17/47)$	-
<plans,< td=""><td>etc.&gt;</td><td></td><td></td><td></td><td></td></plans,<>	etc.>				
IV - /	An interim appraisal of the prefecture's cancer control plan has been conducted (18/47)	-	IV - 8	The prefecture is scheduled to develop its next cancer control plan during 2012 (47/47)	0
IV - 9	An action plan will be formulated for implementation of the prefecture's next cancer control plan (15/47)	-	<b>IV</b> - 10	Information/data on cancer control in the prefecture, such as an annual report, has been compiled and published $(10/47)$	-
IV - 11	Events relating to cancer control are held on a regular, annual basis (17/47)	-	IV - 12	The prefecture undertakes its own survey of conditions relating to cancer and cancer control in the region $(25/47)$	-
IV - 13	The prefecture undertakes its own patient satisfaction survey of conditions relating to cancer and cancer control in the region (8/47)	-			
<budge< td=""><td>ts etc.&gt;</td><td></td><td></td><td></td><td></td></budge<>	ts etc.>				
1V - 14	There is a process for collecting the opinions of residents on cancer control measures (21/47)	-	IV - 15	There is a process for collecting the opinions of residents on the following year's budget for cancer control (8/47)	-
IV - ID	Information relating to the cancer control budget, evaluation, etc. is made publicly available on the internet etc. (15/47)	-			
< Prefec	tural assembly>				
10/ - 1/	There is a non-partisan caucus of assembly members relating to cancer control (7/47)	-			
<patien< td=""><td>t support and Patient activity&gt;</td><td></td><td></td><td></td><td></td></patien<>	t support and Patient activity>				
IV - 18	A general counseling & support center has been established through the prefectural budget (9/47)	-	IV - 19	Information and guidance relating to patient groups is provided through the prefecture's website and literature (24/47)	-
10 - 70	There is a budget and structure in place to support patient saloons, study meetings etc. (27/47)	0			
<comn< td=""><td>nittee etc.&gt;</td><td></td><td></td><td></td><td></td></comn<>	nittee etc.>				
IV - 21	Title of the dedicated cancer control departme	ent [	_ ]		
IV - 22	No. of times Prefectural Committee for Promo	otion of	Cancer (	Control met in 2011 (average 1.3) : 0	
<b>IV</b> - 23	No. of times Prefectural Committee for Promotion	of Canc	er Contro	l is scheduled to meet in 2012 (average 3.0) : 3	
<b>IV</b> - 24	No. of times Prefectural Committee for Cance	er Care (	Collabora	ation met in 2011 (average 1.7) : 1	
₩ - 25	<b>Ⅳ</b> - 25 No. of members of Prefectural Committee for Promotion of Cancer Control:				
	Patients/Patient-related (average 2.3) 1,	Total	10		

## 46. Kagoshima

A.	Population (2010)	Total	1,700,683
		Male	795,367
		Female	905,316
В.	Over-75 population growth	rate $(2010 \sim 2030)$	123% (44 <sup>th</sup> growth rate)
C.	At-home mortality rate (2	010)	9.1% (8 <sup>th</sup> lowest)

## I. Cancer mortality rate \*1[2010]

1. Cancer mortality rate [201	0J	
I - 1 All cancer	I - 2 Improvement in cancer morta	ality rate ※ 2006~2010
Total 83.7 (worst 21)	Total 2.2% (worst 6)	
Male 106.9 (worst 25)	Male 11.0% (worst 42)	
Female 63.0 (worst 15)	Female -13.2% (worst 2)	
I - 3 Stomach	I - 4 Colon	I-5 Lung
Total 9.1 (worst 43)	Total 9.2 (worst 36)	Total 13.9 (worst 37)
Male 12.5 (worst 43)	Male 11.3 (worst 42)	Male 23.2 (worst 26)
Female 6.0 (worst 33)	Female 7.4 (worst 27)	Female 5.7 (worst 38)
I - 6 Liver	I - 7 Breast	
Total 8.0 (worst 17)	Female 9.6 (worst 36)	
Male 11.6 (worst 27)	·	
Female 4.7 (worst 3)		

II. Cancer screening rate, smo	oking rate [2010]	
II - 1 Screening (stomach)*2	II - 2 Screening (lung) *2	II-3 Screening (colon) *2
Total 32.0% (worst 27)	Total 28.9% (worst 39)	Total 26.2% (worst 27)
Male 36.7% (worst 32)	Male 30.6% (worst 40)	Male 30.6% (worst 38)
Female 28.1% (worst 25)	Female 27.5% (worst 37)	Female 22.5% (worst 22)
II-4 Screening (breast) *2	II-5 Screening (uterine) *3	II - 6 Smoking rate
Female 26.0% (worst 37)	Female 26.1% (worst 33)	Total 18.4% (worst 45)
	-	Male 32.3% (worst 31)
		Female 6.8% (worst 44)

#### Ⅲ. Cancer care resources [as of June 2012] No. of certified cancer specialists \*4 Ⅲ-1 79.4 (worst 24) No. of cancer drug therapy specialists \*4 **Ⅲ-2** 3.5 (worst 13) No. of certified radiation therapy specialists \*4 **Ⅲ-**3 4.7 (worst 26) No. of certified radiation therapy technicians \*4 **Ⅲ-4** 0.0 (worst 1) No. of specialist cancer care nurses \*4 **Ⅲ-**5 0.0 (worst 1) No. of certified chemotherapy nurses \*4 Ш-6 9.4 (worst 39)

<sup>\*1</sup> below 75 years of age, age adjusted, per 100,000 population \*2 Ages 40 and over \*3 Ages 20 and over

<sup>\*4</sup> per 1 million population

Ⅲ-7	No. of certified radiation therapy nurses *4	0.6 (worst 31)
<b>Ⅲ-8</b>	No. of certified palliative care nurses *4	10.0 (worst 32)
Ⅲ-9	No. of certified pain management nurses *4	2.9 (worst 15)
Ⅲ-10	No. of certified home-visit nurses *4	0.6 (worst 7)
Ⅲ-11	No. of hospice beds *4	40.6 (worst 26)
<b>Ⅲ-12</b>	No. of comprehensive cancer centers	9
	(Breakdown: prefectural comprehensive cancer center 1,	regional comprehensive cancer center 8 )

#### Information about the structure of prefectural cancer control programs [as of July 2012] \*\*All items that apply are indicated by a mark . Figures shown in () indicate the number of confirmations and responses received from all 47 prefectures. <Organization> There is a website (or section of a website) There is a dedicated cancer control department W - 1 ₩-2 $\bigcirc$ (20/47)specifically for cancer control information (35/47) <Ordinances> An ordinance for promotion of cancer control There is movement towards enacting an ordinance for **IV** - 3 **IV** - 4 programs has been enacted (19/47) promotion of cancer control programs (9/47) The establishment of a cancer control ordinance, or the The establishment of a cancer control ordinance, or the **IV** - 6 **IV** - 5 movement towards it, is a lawmaker-led initiative (17/47) movement towards it, is an governmental initiative (4/47)< Plans, etc. > An interim appraisal of the prefecture's cancer The prefecture is scheduled to develop its next cancer IV - 7 ₩-8 $\bigcirc$ control plan has been conducted (18/47) control plan during 2012 (47/47) An action plan will be formulated for implementation of Information/data on cancer control in the prefecture, such as **W**-9 IV - 10 the prefecture's next cancer control plan (15/47) an annual report, has been compiled and published (10/47) Events relating to cancer control are held on a The prefecture undertakes its own survey of conditions IV - 11 IV - 12 $\bigcirc$ relating to cancer and cancer control in the region (25/47) regular, annual basis (17/47) The prefecture undertakes its own patient satisfaction IV - 13 survey of conditions relating to cancer and cancer control in the region (8/47) <Budgets etc.> There is a process for collecting the opinions of residents There is a process for collecting the opinions of IV - 14 TV - 15 residents on cancer control measures (21/47) on the following year's budget for cancer control (8/47) Information relating to the cancer control budget, evaluation, IV - 16 etc. is made publicly available on the internet etc. (15/47)<Prefectural assembly> There is a non-partisan caucus of assembly members relating to cancer control (7/47) < Patient support and Patient activity > A general counseling & support center has been Information and guidance relating to patient groups is provided IV - 18 IV - 19 established through the prefectural budget (9/47) through the prefecture's website and literature (24/47) There is a budget and structure in place to support IV - 20 patient saloons, study meetings etc. (27/47) <Committee etc.> IV - 21 Title of the dedicated cancer control department IV - 22 No. of times Prefectural Committee for Promotion of Cancer Control met in 2011 (average 1.3) : 1 IV - 23 No. of times Prefectural Committee for Promotion of Cancer Control is scheduled to meet in 2012 (average 3.0): 4 IV - 24 No. of times Prefectural Committee for Cancer Care Collaboration met in 2011 (average 1.7): 1 IV - 25 No. of members of Prefectural Committee for Promotion of Cancer Control: Patients/Patient-related (average 2.3) 2, Total 17

# 47. Okinawa

A.	Population (2010)	Total	1,385,104
		Male	679,237
		Female	705,867
B.	Over-75 population growth	rate (2010~2030)	175% (6 <sup>th</sup> growth rate

B. Over-75 population growth rate  $(2010\sim2030)$  175%  $(6^{th}$  growth rate) C. At-home mortality rate (2010) 11.9%  $(23^{rd}$  lowest)

#### I. Cancer mortality rate \*1[2010]

I. Cancer mortality rate '[2010	0]	
I - 1 All cancer	I - 2 Improvement in cancer mortal	lity rate ※ 2006~2010
Total 77.3 (worst 44)	Total 4.1% (worst 13)	
Male 96.5 (worst 46)	Male 9.2% (worst 32)	
Female 58.7 (worst 37)	Female -4.1% (worst 4)	
I - 3 Stomach	I - 4 Colon	I - 5 Lung
Total 5.6 (worst 47)	Total 12.1 (worst 4)	Total 12.2 (worst 46)
Male 8.7 (worst 47)	Male 17.7 (worst 1)	Male 18.2 (worst 45)
Female 2.6 (worst 47)	Female 6.5 (worst 36)	Female 6.5 (worst 30)
I - 6 Liver	I - 7 Breast	
Total 5.8 (worst 42)	Female 12.5 (worst 2)	
Male 9.0 (worst 42)		
Female 2.7 (worst 38)		

## II. Cancer screening rate, smoking rate [2010]

II. Cancer screening rate, sin	OKING Tale [2010]	
II - 1 Screening (stomach)*2	II-2 Screening (lung) *2	II-3 Screening (colon) *2
Total 29.9% (worst 19)	Total 24.4% (worst 22)	Total 22.7% (worst 11)
Male 32.3% (worst 11)	Male 24.4% (worst 19)	Male 24.1% (worst 7)
Female 27.7% (worst 23)	Female 24.5% (worst 25)	Female 21.2% (worst 18)
II-4 Screening (breast) *2	II-5 Screening (uterine) *3	II - 6 Smoking rate
Female 29.2% (worst 41)	Female 28.9% (worst 43)	Total 20.4% (worst 24)
		Male 32.2% (worst 32)
		Female 9.3% (worst 19)

## Ⅲ. Cancer care resources [as of June 2012]

Ⅲ-1	No. of certified cancer specialists *4	73.6 (worst 16)
<b>Ⅲ-2</b>	No. of cancer drug therapy specialists *4	1.4 (worst 3)
<b>Ⅲ-</b> 3	No. of certified radiation therapy specialists *4	2.9 (worst 4)
<b>Ⅲ-4</b>	No. of certified radiation therapy technicians *4	0.0 (worst 1)
<b>Ⅲ-</b> 5	No. of specialist cancer care nurses *4	0.0 (worst 1)
<b>Ⅲ-</b> 6	No. of certified chemotherapy nurses *4	2.2 (worst 1)

 $<sup>^{*1}</sup>$  below 75 years of age, age adjusted, per 100,000 population  $^{*2}$  Ages 40 and over  $^{*3}$  Ages 20 and over

<sup>\*4</sup> per 1 million population

<ul> <li>Ⅲ-7 No. of certified radiation therapy nurses *4 0.0 (worst 1)</li> <li>Ⅲ-8 No. of certified palliative care nurses *4 7.9 (worst 21)</li> <li>Ⅲ-9 No. of certified pain management nurses *4 0.7 (worst 2)</li> <li>Ⅲ-10 No. of certified home-visit nurses *4 0.7 (worst 9)</li> <li>Ⅲ-11 No. of hopping hodg *4 23 (worst 23)</li> </ul>	
<ul> <li>III-9 No. of certified pain management nurses *4 0.7 (worst 2)</li> <li>III-10 No. of certified home-visit nurses *4 0.7 (worst 9)</li> </ul>	
<b>II</b> -10 No. of certified home-visit nurses *4 0.7 (worst 9)	
III 11 No of hooping hads *4	
$\blacksquare$ -11 No. of hospice beds *4 36.8 (worst 23)	
<b>Ⅲ-12</b> No. of comprehensive cancer centers 3	
(Breakdown: prefectural comprehensive cancer center 1 , regional comprehensive cancer center 2 )	
IV. Information about the structure of prefectural cancer control programs [as of July	y 2012]
%All items that apply are indicated by a mark. Figures shown in () indicate the number of ○ confirmations and responses receive	ed from all 47 prefectures.
<organization></organization>	
$\mathbb{N}$ - 1 There is a dedicated cancer control department $(20/47)$ There is a website (or section of a specifically for cancer control information)	. ( )
<ordinances></ordinances>	
IV - 3 An ordinance for promotion of cancer control programs has been enacted (19/47)  IV - 4 There is movement towards enacting an ordinance promotion of cancer control programs (9/4)	( )
IV - 5 The establishment of a cancer control ordinance, or the movement towards it, is an governmental initiative (4/47)  IV - 6 The establishment of a cancer control ordinal movement towards it, is a lawmaker-led initiative (4/47)	_
<plans, etc.=""></plans,>	
N-7 An interim appraisal of the prefecture's cancer control plan has been conducted (18/47)  N-8 The prefecture is scheduled to develop its recontrol plan during 2012 (47/47)	next cancer
IV - 9 An action plan will be formulated for implementation of the prefecture's next cancer control plan (15/47) Information/data on cancer control in the prefect an annual report, has been compiled and published	_
IV - 11 Events relating to cancer control are held on a regular, annual basis (17/47)  Events relating to cancer control are held on a regular, annual basis (17/47)  The prefecture undertakes its own survey of relating to cancer and cancer control in the region	( )
The prefecture undertakes its own patient satisfaction	
IV-13 survey of conditions relating to cancer and cancer -	
control in the region (8/47)	
Sudgets etc.> There is a process for collecting the opinions of There is a process for collecting the opinions of There is a process for collecting the opinions.	of residents
IV - 14 residents on cancer control measures (21/47) - IV - 15 IV - 15 on the following year's budget for cancer control	_
IV - 16 Information relating to the cancer control budget, evaluation, etc. is made publicly available on the internet etc. (15/47)	
<pre><pre><pre><pre></pre></pre></pre></pre>	
IV - 17 There is a non-partisan caucus of assembly members relating to cancer control (7/47)	
<patient activity="" and="" patient="" support=""></patient>	
IV - 18 A general counseling & support center has been established through the prefectural budget (9/47)  IV - 19 Information and guidance relating to patient group through the prefecture's website and literature (24/2)	
IV - 20 There is a budget and structure in place to support patient saloons, study meetings etc. (27/47)	

#### <Committee etc.>

- IV 21 Title of the dedicated cancer control department  $\mathbb{F} \mathbb{J}$
- $\mathbb{IV}$  22 No. of times Prefectural Committee for Promotion of Cancer Control met in 2011 (average 1.3) : 0
- IV 23 No. of times Prefectural Committee for Promotion of Cancer Control is scheduled to meet in 2012 (average 3.0) : -
- IV 24 No. of times Prefectural Committee for Cancer Care Collaboration met in 2011 (average 1.7) : 4
- IV 25 No. of members of Prefectural Committee for Promotion of Cancer Control:

Patients/Patient-related (average 2.3) 3, Total 14

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