

# Incidenza e variazioni temporali dei mesoteliomi nel mondo

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## KEY WORDS

Malignant mesothelioma; incidence; recording areas; time trend; asbestos

## SUMMARY

«**Mesothelioma incidence and time trend in the World**». **Background:** Due to its adaptability to different uses, asbestos was increasingly employed in many working and domestic areas up to the 1970s-1980s, when its aetiological role in the onset of pleural mesothelioma (Mm) was recognized. Since then Mm cases have been continuously increasing and no decline is expected until 2020, despite the fact that most industrialized countries banned asbestos use a few decades ago. **Objectives:** The aim of this study was to analyse Mm incidence in the World during the last ten years, also considering asbestos consumption in different areas. **Methods:** Incidence age-standardized rates (ASR) from Cancer Registries included in Cancer Incidence in Five Continents, Vol. VII and VIII, and, when appropriate, standardized rate ratio (SRR) with confidence interval were estimated. **Results:** The highest incidence rates among males were observed in Liguria and Australia. After Liguria, Maastricht and Scotland in Europe, North East Regions and Piedmont in Italy showed high rates. Among females, the highest incidence rates were observed in Liguria, among black women in New Orleans and in the province of Varese. SRRs revealed increased rates, not always significant, in almost all areas among males and in about 50% of the areas among females, although the variation was significant only in Varese. **Conclusions:** These results confirmed a relationship between Mm risk and asbestos use, revealing high incidence rates in Australia (mining), Italy (shipyards, building, goods handling, heavy industries and sea trade) and Great Britain (shipyards). Mm cases increased in areas with elevated incidence rates, suggesting that larger amounts of asbestos were probably used for a longer period. Finally, no Mm cases were registered in some areas, which probably signifies a lack (or a delay) of risk referred to the investigated period.