

GALLBLADDER AND EXTRAHEPATIC BILE DUCT

ICD-10 C23-24

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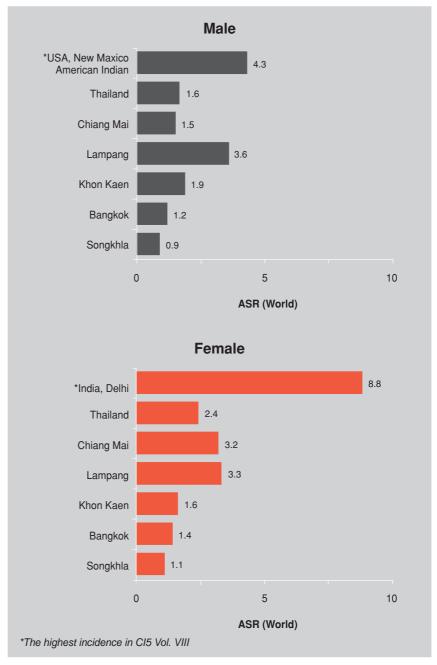
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In Thailand during the period 1995-1997, carcinoma of gallbladder and extrahepatic duct is not included in the top ten of the most frequency. The estimated incidence rate is 1.6 per 100 000 among males and 2.4 per 100 000 among females. Females (728 cases) are affected by gallbladder and extrahepatic bile duct cancer more than

males (377 cases) in a ratio of 1.9:1.

Gallbladder cancer and extrahepatic bile duct carcinoma are the tenth in frequency in Lampang in both males (ASR = 3.6) and females (ASR = 3.3) which is the highest incidence rate among five centers. Female are affected more than males in Chiang Mai, Bangkok and Songkhla although in

Figure 2.8.1 Gallbladder and extrahepatic bile duct cancer in different regions, 1995-1997



Lampang and Khon Kaen males are affected more than females. The lowest incidence is in Songkhla in both males (ASR = 0.9) and females (ASR = 1.1) (Figure 2.8.1).

Age-specific incidence rates in both males and females are higher in Chiang Mai and Lampang than the other regions. Cancer of gallbladder and extrahepatic duct is hardly seen below 25 years of age. The majority of cases occurs after the age of 55 in men and 45 in women with the peak incidence in the seventh decade for both sexes (Figure 2.8.2).

The percentage of histologically verified cases varies from 27.3% in Khon Kaen to 84.6% in Songkhla in men and from 32.4% in Khon Kaen to 76.5% in Songkhla in women. The percentage of death certificate only cases varies from 0.0% in Songkhla to 15.2% in Khon Kaen in men and from 0.0% in Songkhla to 14.3% in Bangkok in women (Table 2.8.1). The most common histological type is adenocarcinoma.

From the two volumes of Cancer in Thailand during 1988-1991(Vatanasapt *et al.*,1993) and 1992-1994 (Deerasamee *et al.*, 1999), gallbladder and extrahepatic bile duct cancer shows an increase trend in both males and females in Khon Kaen, Bangkok and Song-

Figure 2.8.2 Age-specific incidence rates of gallbladder and extrahepatic bile duct cancer, 1995-1997

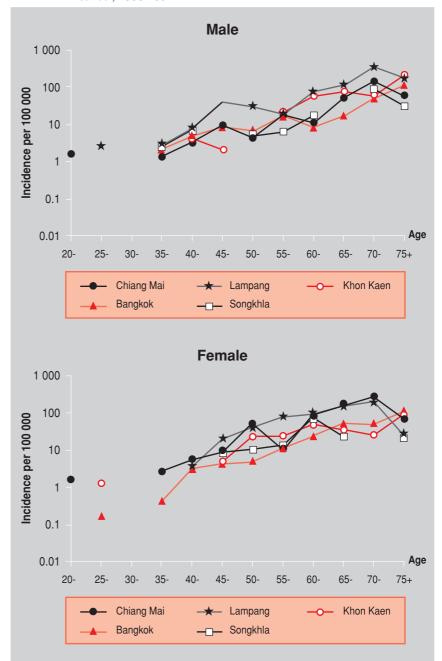
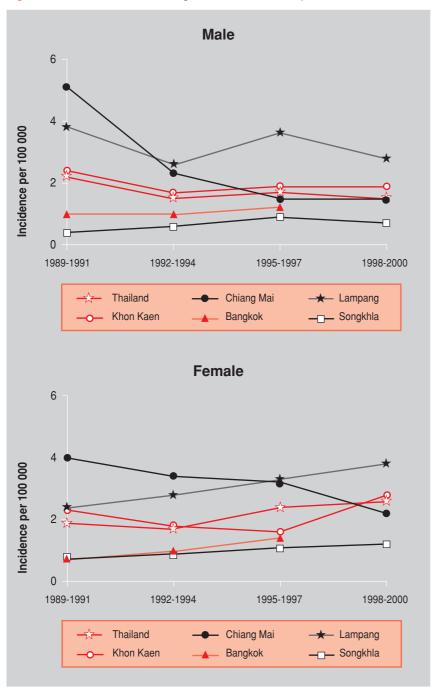


Table 2.8.1 Percentage of histologically verified and death certificate only cases, gallbladder and extra hepatic bile duct

| | 1995-1997 | | | | 1998-2000 | | | |
|------------|-----------|--------|-------|--------|-----------|--------|-------|--------|
| | % HV | | % DCO | | % HV | | % DCO | |
| | Male | Female | Male | Female | Male | Female | Male | Female |
| Chiang Mai | 69.7 | 60.3 | 3.0 | 1.5 | 75.0 | 78.8 | 0.0 | 0.0 |
| Lampang | 53.5 | 54.8 | 4.7 | 9.5 | 55.6 | 51.8 | 8.3 | 3.6 |
| Khon Kaen | 27.3 | 32.4 | 15.2 | 2.9 | 40.8 | 47.1 | 0.0 | 0.0 |
| Bangkok | 72.6 | 69.5 | 13.1 | 14.3 | | | | |
| Songkhla | 84.6 | 76.5 | 0.0 | 0.0 | 54.6 | 90.9 | 0.0 | 0.8 |

%HV = percentage of histologically verified cases, %DCO = percentage of death certificate only cases

Figure 2.8.3 Trend in incidence of gallbladder and extrahepatic bile duct cancers



khla. In Lampang it shows an increasing incidence rate especially in females. Although in Chiang Mai it shows a declining trend in both sexes (Figure 2.8.3).

The highest incidence rate in the world in men is seen in USA, New Maxico, American Indian (ASR = 4.3) and in women in India, Delhi (ASR = 8.8) (Figure 2.8.1).