Does the morphology of cutaneous melanoma help explain the international differences in survival? Results from 1,578,482 adults diagnosed during 2000-2014 in 59 countries (CONCORD-3)

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Conflicts of interest: The authors declare they have no conflicts of interest.

Data availability: These data are provided to us by more than 300 cancer registries worldwide. We hold the data in trust from each of the participating registries to perform the analyses agreed in the protocol. The protocol prohibits us from other analyses and from sharing the raw data with other parties without express approval from the participating cancer registries.

Ethics approval: This study contains the results of secondary analysis of sensitive personal data, carried out with statutory approval from the Health Research Authority and ethical approval from the NHS Research Ethics Service

What's already known about this topic?

The histopathologic features of cutaneous melanoma vary markedly world-wide. The proportion of melanomas with the more aggressive acral lentiginous or nodular histologic subtypes is higher in populations with predominantly dark skin than in those with predominantly fair skin. We set out to assess the extent to which these differences in morphology may explain international variation in survival from melanoma of the skin when all histologic sub-types are combined, as is usually the case.

What does this study add?

The study provides, for the first time, international comparisons of population-based survival at five years for the main histologic sub-types of melanoma for over 1.5 million adults diagnosed during 2000-2014. It highlights the less favourable distribution of histologic subtypes in Asia and Central and South America, and the poorer prognosis for nodular and acral lentiginous melanomas. We found that later stage at diagnosis does not fully explain the higher excess risk of death for nodular and acral lentiginous melanoma than for superficial spreading melanoma. 133. 2022. 0. Downloaded from https://onlinelibrary.wiley.com. By Test- on [19/05/2022]. Re-use and distribution is strictly not permitted, except for Open Access article

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Summary

Background

CONCORD-3 highlighted wide disparities in population-based 5-year net survival during 2000-2014. Clinical evidence suggests marked international differences in the proportion of lethal acral and nodular subtypes.

Objectives

We aim to assess whether the differences in morphology may explain global variation in survival.

Methods

We grouped melanoma into seven morphology categories: malignant melanoma, not otherwise specified (ICD-O-3 morphology code 8720), superficial spreading melanoma (8743), lentigo maligna melanoma (8742), nodular melanoma (8721), acral lentiginous melanoma (8744), desmoplastic melanoma (8745) and other morphologies (8722-8723, 8726-8727, 8730, 8740-8741, 8746, 8761, 8770-8774, 8780).

We estimated net survival with the non-parametric Pohar-Perme estimator, correcting for background mortality by single year of age, sex and calendar year in each country or region. All-ages survival estimates were standardised with the International Cancer Survival Standard weights. We fitted a flexible parametric model to estimate the effect of morphology on the hazard of death.

Results

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Worldwide, the proportion of nodular melanoma ranged between 7%-13%. Acral lentiginous melanoma accounted for less than 2% of all registrations but was more common in Asia (6%) and Central and South America (7%). 36% of tumours were classified as superficial spreading melanoma.

During 2010-2014, age-standardised 5-year net survival for superficial spreading melanoma was 95% or higher in Oceania, North America and most European countries, but only 71% in Taiwan. Survival for acral lentiginous melanoma ranged between 66%-95%. Nodular melanoma had the poorest prognosis everywhere.

The multivariable analysis of data from registries with complete information on stage and morphology found that sex, age and stage at diagnosis only partially explain the higher risk of death for nodular and acral lentiginous subtypes.

Conclusions

This study provides the broadest picture of distribution and population-based survival trends for the main morphological sub-types of cutaneous melanoma in 59 countries. The poorer prognosis for nodular and acral lentiginous melanomas, more frequent in Asia and Latin America, suggests the need for health policies aimed at specific populations to improve awareness, early diagnosis and access to treatment.

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Introduction

The incidence of cutaneous melanoma has been rising steadily in most populations of Caucasian origin over the past 50 years.^{1,2} It is now one of the 10 most common malignancies in Oceania, North America and Europe, with age-standardised incidence rates in the range 7.0 to 36.6 per 100,000 person-years. By contrast, melanoma is rare in populations of Asian and African origin, where incidence rates are in the range 0.4–3.0.³

The histopathologic features of cutaneous melanoma vary markedly world-wide. The proportion of melanomas with the more aggressive acral lentiginous or nodular histologic types is higher in populations with predominantly dark skin than in those with predominantly fair skin.^{4,5}

The third cycle of the CONCORD programme for the global surveillance of cancer survival (CONCORD-3)⁶ highlighted wide disparities in 5-year net survival from cutaneous melanoma, which was lower in Asian populations than in the rest of the world. Age-standardised 5-year net survival for adults (15-99 years) diagnosed during 2010-2014 was 90% or higher in the US, Australia, New Zealand and most Nordic countries, but 60% or lower in Ecuador, China, Korea, Singapore and Taiwan.

Stage at diagnosis is recognised as the most important predictor of survival.⁷⁻¹⁰ Age at diagnosis is also a prognostic factor, and several studies have shown much higher survival for younger patients.¹¹⁻¹⁵

The prognostic role of morphology in cutaneous melanoma is controversial, however. Traditionally, melanomas of the skin have been classified into three fairly well-defined subgroups, characterised by different patterns of growth: superficial spreading and lentigo maligna melanoma, which is characterised by a long period of superficial growth; nodular melanoma, which is more likely to penetrate into the deeper layers of the skin if not removed, and acral lentiginous melanoma, which mostly develops on the extremities but displays similar biological behaviour to that of nodular melanoma.¹⁶ Despite the advent of high-resolution genomics and other proposed approaches for the classification of melanocytic tumours, the diagnosis of the histology and how it fits into the WHO Classification of Tumours, commonly known as the WHO 'Blue Books'.¹⁷

However, the morphology classification has not been considered useful for prognostic purposes, because of the idea that the clinical development of all melanomas is similar, whatever the histologic subtype, spreading horizontally within the epidermis and then extending vertically into the dermis, and that they converge in their biologic behaviour once they metastasise.¹⁸

In this study, we aimed to describe the histologic distribution of cutaneous melanoma in 59 countries that contributed data to CONCORD-3, for adults diagnosed during 2000-2014, and to produce the first international comparison of trends in population-based age-standardised 5-year net survival by morphology sub-type. We also aimed to examine the role of morphology sub-type on the prognosis of cutaneous melanoma.

Materials and Methods

Anonymised individual tumour registrations for patients diagnosed during 2000-2014 with one of 18 cancers or groups of malignancies, including melanoma, were provided for CONCORD-3 by 322 population-based cancer registries in 71 countries worldwide. Patients were followed

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Manage Preferences Accept All Reject All up for their vital status to 31 December 2014. Data acquisition, ethical approval and data quality control have been described elsewhere.⁶

We asked participating registries to submit all registrations for malignant melanoma, regardless of anatomic site. Melanoma was defined by morphology codes in the range 8720-8790 in the International Classification of Diseases for Oncology, third revision [ICD-O-3].¹⁹ We focused this analysis of survival on melanomas arising in the skin (ICD-O-3 topography C44.0-C44.9), including the skin of the labia majora (C51.0), vulva (C51.9), penis (C60.9) and scrotum (C63.2). Survival from melanomas arising in internal organs and in the eye will be examined in a subsequent analysis. To facilitate quality control and comparison of the intensity of early diagnostic and screening activity, we requested all melanoma registrations, regardless of behaviour, whether benign (behaviour code 0), uncertain (1), *in situ* (2) or invasive (3). However, survival analyses included only primary, invasive melanomas.

Records with incomplete data, or of tumours that were benign, *in situ*, of uncertain behaviour, metastatic from another organ, or unknown if primary or metastatic, or for patients with age outside the range 15-99 years, were not included in survival analyses. We excluded tumours registered only from a death certificate or discovered at autopsy, since their survival is unknown, as well as records for which the sex or vital status was unknown, and those with an invalid date or sequence of dates.

Patients were grouped into seven morphology categories with the ICD-O-3 classification: malignant melanoma, not otherwise specified (NOS; morphology code 8720), superficial spreading melanoma (8743), lentigo maligna melanoma (8742), nodular melanoma (8721), acral lentiginous melanoma (8744), desmoplastic melanoma (8745) and other morphologies (8722-8723, 8726-8727, 8730, 8740-8741, 8746, 8761, 8770-8774, 8780).

Patients were grouped by calendar period of diagnosis: 2000-2004, 2005-2009, 2010-2014. We examined time trends in the morphology distribution in each country. We also estimated trends in age-standardised 5-year net survival by country and morphology with the non-parametric Pohar Perme estimator,²⁰ using the STATA²¹ command *stns.*²² The cohort approach was used for patients diagnosed during 2000-2004 and 2005-2009, because they had all been followed up for at least five years. We used the period approach²³ to estimate survival for patients diagnosed during 2010-2014, because 5 years of follow-up for vital status were not available for all patients by 31 December 2014.

To control for wide differences in background mortality between geographical areas, men and women, and over time, we constructed life tables of all-cause mortality in the general population for each country or registry by single year of age, sex, calendar year and, where possible, by race/ethnicity (Israel, Singapore, United States, Australian Northern Territory, and New Zealand).

We estimated five-year net survival by morphology in each of five age groups (15-44, 45-54, 55-64, 65-74 and 75-99 years). We obtained age-standardised estimates for all age-groups combined using the International Cancer Survival Standard type 2 weights for the five age groups (0.28, 0.17, 0.21, 0.20 and 0.14).²⁴ We did not estimate survival if fewer than ten patients were available for analysis in a given combination of morphology group and calendar period. If 10-49 patients were available in a given calendar period, we only estimated survival for all ages combined. If 50 or more patients were diagnosed in 2000-2004 and in 2005-2009, we attempted survival estimation for each age group in each calendar period. For 2010-2014, we estimated net survival using the period approach, including in the analyses all patients diagnosed during the 5 years 2010-2014, plus those diagnosed before 2010 who were still alive at the beginning of 2010. Therefore, for 2010-2014 the threshold of 50 or more patients for attempting age-standardisation applies to the combined cohort of patients. If a single age-

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specific estimate could not be obtained, we merged the data for adjacent age groups and assigned the combined estimate to both age groups before standardisation for age. If two or more age-specific estimates could not be obtained, we present only the unstandardised estimate for all ages combined. The pooled estimates for countries with more than one registry do not include data from registries for which the estimates were less reliable. Less reliable estimates are shown with a flag (§) in Table 2 when they are the only available information from a given country or territory (see footnote in Table 2 for the definition of less reliable estimates). We comment in the text only on reliable, age-standardised survival estimates. Continental regions were defined using the United Nations Geoscheme.²⁵

To estimate the effect of morphology on the hazard of death due to melanoma, we fitted a flexible parametric model on the log cumulative hazard scale, using *stpm2*²⁶ in STATA. We restricted this analysis to registries where at least 65% of registrations had a specific morphology code, i.e. not malignant melanoma, NOS. Among these registries, we further selected those for which data on stage were available for at least 75% of registrations in one of the following classifications: UICC Tumour-Node-Metastasis staging system, 7th edition,²⁷ Condensed TNM,²⁸ or SEER Summary Stage 2000.²⁹ With this constraint, we were able to include data from one regional cancer registry in Germany (Lower Saxony), two registries in Spain (Basque Country and Granada) and the Norwegian national cancer registry.

For each country, we first fitted a model with only morphology as a covariable (model 1). We then included, as additional covariables, sex, a restricted cubic spline for the effect of age at diagnosis (4 degrees of freedom) and stage at diagnosis (metastatic vs. non metastatic) (model 2). We excluded patients for which stage at diagnosis was unknown (complete case analysis).

Results

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We obtained data from 284 registries in 59 countries on 2,303,095 adults who were diagnosed with melanoma during 2000-2014 (Table 1). Among these, 49% were diagnosed in North America, 37% in Europe, 12% in Oceania, and only 2% in Asia and less than 1% in both Africa and in Central and South America.

We excluded from survival analysis 637,957 patients (28%) who were diagnosed with an *in situ* tumour, ranging from 11% in Central and South America to 35% in North America. The proportion of *in situ* melanoma was 20% or higher in 10 countries (Table 1), suggesting a highly effective approach to early diagnosis. We additionally excluded 78,587 patients for other reasons (see footnote in Table 1). The proportion of melanomas of benign or uncertain behaviour was particularly high in Norway (22%), highlighting intensive activity of monitoring atypical naevi and pre-malignant lesions.

Of the 1,586,551 eligible patients, we further excluded 7,139 patients (0.5%) who were diagnosed only from a death certificate or discovered at autopsy and 930 patients (less than 0.1%) for other reasons. Finally, 1,578,482 patients diagnosed with a primary, invasive melanoma of the skin were available for survival analysis (99.5% of those eligible). More than 99% of these tumours were microscopically confirmed, either cytologically or histologically.

About 42% of the tumours were registered as malignant melanoma, NOS. The proportion was generally high in countries in Asia (76%), Central and South America (63%), North America (51%) and Africa (46%) and much lower in Oceania (33%). In Europe, the proportion of melanomas with a non-specific morphology was higher in Eastern European countries (57%) than in Southern (37%), Northern (32%) and Western European countries (27%). The proportion of melanomas diagnosed with a non-specific morphology fell substantially in Australia (from 40% in 2000-2004 to 26% in 2010-2014), Denmark (from 42% to 11%), Iceland

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(from 36% to 18%), Italy (from 32% to 19%), Lithuania (from 85% to 35%), Portugal (from 70% to 35%) and the United Kingdom (from 39% to 23%) (Table A1).

Overall, superficial spreading melanoma was the second most common histology (36% of all cases). It accounted for more than half the patients in Denmark, France, Iceland, the Netherlands, Norway, Sweden and Switzerland (Figure 1). Nodular melanoma accounted for 7% of all cases in North America and Asia, 9% in Oceania and 13% in Central and South America. In Europe, 12% of the cases were registered as nodular melanoma, with higher proportions in Czech Republic, Ireland, Norway, Romania, Slovakia and Sweden. About 6% of adults were diagnosed with lentigo maligna melanoma, ranging from 2% in Asia to 8% in Oceania. Acral lentiginous melanoma was very rare in North America, Europe and Oceania (less than 2% of all cases) but the proportion was higher in Central and South America (more than 10% in Colombia, Costa Rica, Guadeloupe and Martinique) and Asia (more than 10% in Korea, Singapore and Taiwan). Desmoplastic melanoma represented less than 1% of the patients. The proportion of patients diagnosed with other morphologies was higher than 20% in Estonia, Italy and Latvia.

Malignant melanoma, not otherwise specified

Age-standardised 5-year net survival varied widely between world regions (Table 2). It was in the range 85-89% in Oceania and North America during 2010-2014. It was higher than 80% in all Western European countries and ranged from 54% to 79% in Eastern Europe. In Central and South America, age-standardised 5-year net survival ranged from 57% in Ecuador to 76% in Costa Rica and Puerto Rico. Five-year survival was lower than 70% in all Asian countries except Israel (88%), and as low as 47% in Taiwan.

Five-year survival increased between 2000-04 and 2010-14 by 10% or more in China (from 36 to 48%), Bulgaria (from 52 to 62%), Croatia (from 66 to 77%) and Estonia (from 71 to 83%).

Superficial spreading melanoma

Age-standardised 5-year net survival for patients diagnosed during 2010-2014 was 90% or higher in North America, Oceania and almost all European countries; survival was lower than 90% only in Slovakia, Poland, Lithuania, Portugal and Bulgaria. In Asia, survival ranged from 71% in Taiwan to 98% in Israel (Figure 2).

Lentigo maligna melanoma

This sub-type of melanoma had the most favourable prognosis: age-standardised 5-year net survival was close to 100% in North America, Australia and most European countries. Estimates were not available for most countries in Central and South America and Asia because of the small numbers of patients diagnosed with this specific sub-type.

Nodular melanoma

The prognosis for nodular melanoma was the poorest in all continents. Age-standardised 5year net survival for patients diagnosed during 2010-2014 reached 72% in Canada and United States, 77% in New Zealand and 80% in Australia. In Central and South America, it ranged from 58% in Costa Rica to 72% in Argentina, and in Europe, from 58% in Poland to 80% in Ireland. Survival improved dramatically in Bulgaria (from 46% in 2000-2004 to 64% in 2010-2014) and in Portugal (from 59% to 76%).

Acral lentiginous melanoma

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Five-year net survival for adults diagnosed during 2010-2014 was in the range 77-82% in North America and Oceania and 70-95% in Europe. Most of the estimates for countries in Asia and Central and South America were not age-standardised because of the small numbers of patients available for survival analysis.

Five-year net survival for adults diagnosed with desmoplastic melanoma during 2010-2014 ranged between 76% and 91%. Estimates were not available for Central and South America or for most countries in Asia because of the small numbers of patients available for analysis.

With the excess hazard of death for patients with superficial spreading melanoma taken as the reference category, the excess hazard ratio for patients diagnosed with nodular melanoma was 21.8 (95%Cl 14.7-32.3) in Germany, 12.1 (8.1-18.1) in Spain and 6.7 (5.7-7.9) in Norway (Table 3). The excess hazard ratios were lower after controlling for sex, age and stage at diagnosis, but the excess hazard of death for patients with nodular melanoma was still 13.5 (9.6-18.9) times higher in Germany, 6.7 (4.8-9.3) times higher in Spain and 4.1 (3.6-4.8) times higher in Norway, than for patients in the same country diagnosed with superficial spreading melanoma.

The excess hazard ratio for patients diagnosed with acral lentiginous melanoma vs. superficial spreading melanoma was 15.2 (9.0-25.5), 9.0 (5.2-15.5) and 1.7 (0.5-5.1) in Germany, Spain, and Norway, respectively. After controlling for sex, age and stage at diagnosis, the excess hazard of death for patients with acral lentiginous melanoma was still 10.8-fold (6.8-17.1) in Germany, 5.0-fold (3.1-8.1) in Spain and 2.2-fold (1.0-4.9) higher in Norway, than in patients diagnosed with superficial spreading melanoma.

Discussion

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This study of over 1.5 million adults diagnosed with cutaneous melanoma world-wide during 2000-2014 has highlighted wide international differences in the distribution of histologic subtypes as well as in survival by sub-type. The prognosis is poorest everywhere for nodular and acral lentiginous melanoma.

The prognostic role of the morphology of cutaneous melanomas is controversial. Clinical guidelines indicate that stage at diagnosis is the most important prognostic factor. The prevalent idea is that melanomas of different morphologies converge in their biologic behaviour once they metastasize,³⁰ so the recommended treatment options do not differ between morphological sub-types at a given stage at diagnosis. Clinical guidelines even indicate that the histologic sub-type is only an optional item for inclusion in pathology reports.³¹

Probably for this reason, the primary histologic sub-types of melanoma are often poorly specified, if at all, in pathology reports.^{11,14} In turn, this determines the high proportion of melanomas that are coded as "malignant melanoma, not otherwise specified (NOS)" in cancer registry data.¹³ In this global study, 43% of melanomas were registered as malignant melanoma NOS. The proportion varied widely, and was higher in Asia, Central and South America and Eastern Europe, as has been shown elsewhere.^{13,32} However, our study shows that the proportion of melanomas with poorly specified morphology has fallen in most countries over the last 15 years, suggesting improvements in pathological practice.³³

Overall, superficial spreading melanoma was the most frequent of the specific morphologies, and the proportion has been increasing over time. It is generally associated with an excellent prognosis in Europe, North America and Oceania, as has been shown in previous studies.^{13,14,30,34} Several international studies have shown an increasing incidence of thinner melanomas (1mm or less),^{15,35-41} as a result of raised public awareness and earlier detection, especially for superficial spreading melanomas. The result is an increasing number of people

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with melanoma who are less likely to die because of their tumours. This phenomenon may help explain the improvement in the already high 5-year net survival from superficial spreading melanoma.

Acral lentiginous melanoma represented less 1% of the patients in Europe, North America and Oceania, but almost 6% of the patients in Asia and 7% in Central and South America. Very few studies have focused on survival from cutaneous melanoma in Asia and Central and South America, perhaps because the overall incidence is much lower than in fairer-skinned populations. In Singapore, acral lentiginous melanoma accounted for 16% of all cases diagnosed during 2008-2017.⁴² In a study of 915 patients diagnosed during 1997-2011 in Brazil, the acral sub-type accounted for 7% of all cases and that 5-year cause-specific survival was much lower (51%) than for superficial spreading melanoma (82%).⁴³ A study of 142 patients in China confirmed the poor prognosis for patients with acral lentiginous melanoma; 5-year cause-specific survival was 53%.⁴⁴ By contrast, an analysis of 252 patients diagnosed in a single institution in Japan during 2001-2014 showed no difference between 5-year survival for acral and non-acral lentiginous subtypes (59% vs. 62% in men and 71% vs. 85% in women),⁴⁵ although the numbers of patients were too small to derive definitive conclusions.

Our study found that age-standardised five-year net survival for acral lentiginous melanoma was generally lower than for other morphologies, with the only exception of nodular melanoma, and globally in the range 66-95%. The poorer prognosis for acral lentiginous melanoma, which usually develops on the palms, the sole of the foot or underneath the nails, is commonly ascribed to delayed diagnosis, because these areas are not routinely examined by patients or primary care physicians.⁴⁶ Moreover, the proportion of the acral sub-type is higher in Blacks than Caucasians;⁴⁷ but because the risk of melanoma in black populations is perceived to be low, the lack of secondary prevention is also considered a major cause of late diagnosis.^{48,49}

Nodular melanoma had the poorest prognosis in all countries, as has been reported elsewhere.⁵⁰⁻⁵² Forty years ago, a multivariable analysis of 339 patients diagnosed in a single institution in the US during 1960-1977 found that the increased risk associated with nodular histology was confounded by an increase in thickness and ulceration; in other words, the higher risk of death was due to more advanced stage at diagnosis, not intrinsic to the morphologic sub-type.⁵³ On the basis of this conclusion from a small study, the American Joint Committee on Cancer did not include histologic sub-type in the cutaneous melanoma staging system, because it was not considered to be a significant prognostic factor.⁵⁴ Thirty years later, however, a very large population-based study of 118,508 patients diagnosed in the US with superficial spreading or nodular melanoma during 1973-2012 showed that morphology is in fact an independent predictor of survival.³⁰ After controlling for thickness, ulceration, mitotic index and stage at diagnosis, nodular sub-type remained an independent risk factor for death from melanoma (HR 1.55, 95% CI 1.41 to 1.70). Another population-based study of 82,901 patients diagnosed in Germany during 1997-2013 showed that differences in 5-year survival by histologic subtype were partially explained by tumour size.⁵⁵

Our population-based study confirms these findings. The multivariable analysis of data from four population-based registries with complete information on stage and morphology highlights a much higher excess risk of death with nodular or acral lentiginous melanoma than for superficial spreading melanoma, after controlling for major confounders. Sex, age and stage at diagnosis only partially explain the higher risk of death for nodular and acral lentiginous subtypes. The different magnitude of the excess hazard ratios in Germany, Spain and Norway may be due to the low baseline hazard for superficial spreading melanoma in Germany, where national skin cancer screening for people aged 35 years or more with health insurance was introduced in 2008. This may have improved early detection of the generally slow-growing, less aggressive superficial spreading melanomas.⁵⁵

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Our study has also shown that while five-year survival from cutaneous melanoma in Eastern Europe has been increasing in recent years, survival continues to lag behind the rest of Europe for each morphologic sub-type of melanoma. A study of seven common malignancies diagnosed in Europe during 2000-2007 found that late stage at diagnosis alone did not explain the lower survival for melanoma of the skin in Eastern Europe.⁵⁶ In the current study, data on stage at diagnosis in Eastern European countries were only available for Russia and Slovakia, where the proportion of metastatic disease (6% and 7%) was higher than in Norway (2%) and Denmark (3%) (data not shown). More detailed information on morphology would have helped investigate the reasons for the persistent gap in survival.

The high proportion of melanomas registered with poorly specified morphology was the major limitation of our study, because it limited the interpretation of net survival estimates for melanomas with specific morphological sub-types in all countries. Information on stage at diagnosis was also limited; complete data could have contributed disentangling the prognostic role of morphology at international level. Additionally, we were not able to control for surgical margins, a relevant prognostic factor, because these data were not available.

Our study is the largest analysis to date of survival from cutaneous melanoma. It provides, for the first time, international comparisons of population-based survival for the main histologic sub-types of melanoma in more than 50 countries. The higher frequency and poorer survival of nodular acral lentiginous melanomas in Asia and in Central and South America suggest the need for health policies in these populations that are designed to improve public awareness, and especially to facilitate earlier diagnosis and prompt access to optimal treatment.

References

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1. van der Esch EP, Muir CS, Nectoux J, et al. Temporal change in diagnostic criteria as a cause of the increase of malignant melanoma over time is unlikely. *Int J Cancer* 1991; **47**: 483-90.

2. Coleman MP, Estève J, Damiecki P, Arslan A, Renard H. Trends in cancer incidence and mortality. Lyon: International Agency for Research on Cancer; 1993.

3. International Agency for Research and Cancer. Cancer Incidence in Five Continents, Vol. XI. Lyon, France; 2017.

4. Chen YJ, Wu CY, Chen JT, Shen JL, Chen CC, Wang HC. Clinicopathologic analysis of malignant melanoma in Taiwan. J Am Acad Dermatol 1999; **41**: 945-9.

5. Ishihara K, Saida T, Otsuka F, Yamazaki N, The Prognosis Statistical Investigation Committee of the Japanese Skin Cancer S. Statistical profiles of malignant melanoma and other skin cancers in Japan: 2007 update. *Int J Clin Oncol* 2008; **13**: 33-41.

 Allemani C, Matsuda T, Di Carlo V, et al. Global surveillance of trends in cancer survival 2000-14 (CONCORD-3): analysis of individual records for 37 513 025 patients diagnosed with one of 18 cancers from 322 population-based registries in 71 countries. *Lancet* 2018; **391**: 1023-75.

7. Schoffer O, Schülein S, Arand G, et al. Tumour stage distribution and survival of malignant melanoma in Germany 2002-2011. *BMC Cancer* 2016; **16**(1): 936-48.

 Rockberg J, Amelio JM, Taylor A, Jörgensen L, Ragnhammar P, Hansson J. Epidemiology of cutaneous melanoma in Sweden. Stage-specific survival and rate of recurrence. *Int J Cancer* 2016; 139: 2722-9.

 Xing Y, Chang GJ, Hu CY, et al. Conditional survival estimates improve over time for patients with advanced melanoma: results from a population-based analysis. *Cancer* 2010; **116**: 2234-41.
 Kemeny MM, Busch E, Stewart AK, Menck HR. Superior survival of young women with malignant melanoma. *Am J Surg* 1998; **175**: 437-44.

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11. Galceran J, Uhry Z, Marcos-Gragera R, et al. Trends in net survival from skin malignant melanoma in six European Latin countries: Results from the SUDCAN population-based study. *Eur J Cancer Prev* 2017; **26**: S77-S84.

12. Enninga EAL, Moser JC, Weaver AL, et al. Survival of cutaneous melanoma based on sex, age, and stage in the United States, 1992-2011. *Cancer Med* 2017; **6**: 2203-12.

13. Crocetti E, Mallone S, Robsahm TE, et al. Survival of patients with skin melanoma in Europe increases further: Results of the EUROCARE-5 study. *Eur J Cancer* 2015; **51**: 2179-90.

14. Pollack LA, Li J, Berkowitz Z, et al. Melanoma survival in the United States, 1992 to 2005. *J Am Acad Dermatol* 2011; **65**: S78-86.

15. Downing A, Yu XQ, Newton-Bishop J, Forman D. Trends in prognostic factors and survival from cutaneous melanoma in Yorkshire, UK and New South Wales, Australia between 1993 and 2003. *Int J Cancer* 2008; **123**: 861-6.

16. Clark WH, From L, Bernardino EA, Mihm Jr MC. The histogenesis and biologic behaviour of primary human malignant melanomas of the skin. *Cancer Research* 1969; **29**: 705-26.

Elder DE, Massi D, Scolyer RA, Willemze R. WHO Classification of Skin Tumours. 4th ed; 2018.
 Ackerman AB, David KM. A unifying concept of malignant melanoma: biologic aspects. *Hum Pathol* 1986; 17: 438-40.

19. Fritz A, Percy C, Jack A, et al. International classification of diseases for oncology (ICD-O) – first revision of 3rd edition. Geneva: World Health Organization; 2013.

20. Pohar Perme M, Stare J, Estève J. On estimation in relative survival. *Biometrics* 2012; **68**: 113-20.

StataCorp. Stata Statistical Software: Release 15. College Station, TX: StataCorp LLC.; 2017.
 Clerc-Urmès I, Grzebyk M, Hedelin G. Net survival estimation with stns. *Stata Journal* 2014; 14: 87-102.

23. Brenner H, Gefeller O. An alternative approach to monitoring cancer patient survival. *Cancer* 1996; **78**: 2004-10.

24. Corazziari I, Quinn M, Capocaccia R. Standard cancer patient population for age standardising survival ratios. *Eur J Cancer* 2004; **40**: 2307-16.

25. United Nations Statistic Division. Methodology; standard countries or area codes for statistical use (M49). 2022. <u>https://unstats.un.org/unsd/methodology/m49/</u> (accessed 11 Feb 2022).

26. Lambert PC, Royston P. Further development of flexible parametric models for survival analysis. *The Stata Journal* 2009; **9**: 165-90.

27. Edge SB, Compton CC. The American Joint Committee on Cancer: the 7th edition of the AJCC cancer staging manual and the future of TNM. *Ann Surg Oncol* 2010; **17**: 1471-4.

28. Berrino F, Brown M, Moller C, Sobin L. ENCR recommendation: Condensed TNM for Coding the Extent of Disease. Lyon: Europen Network of Cancer Registries; 2002.

29. Young JL, Roffers SD, Ries LAG, Fritz AG, Hurlbut AA. SEER Summary Staging Manual-2000: codes and coding instructions; 2001.

30. Lattanzi M, Lee Y, Simpson D, et al. Primary melanoma histologic subtype: impact on survival and response to therapy. J Natl Cancer Inst 2019; **111**: 180-8.

31. Swetter SM, Tsao H, Bichakjian CK, et al. Guidelines of care for the management of primary cutaneous melanoma. *J Am Acad Dermatol* 2019; **80**: 208-50.

32. de Vries E, Sierra M, Pineros M, Loria D, Forman D. The burden of cutaneous melanoma and status of preventive measures in Central and South America. *Cancer epidemiol* 2016: **44**: 100-9.

 Barbarić J, Coebergh JW, Šekerija M. Completeness of Data on Malignant Melanoma Skin Sites and Morphology in the Croatian National Cancer Registry 2000-2014: An Overview of Recent Progress. Acta Dermatovenerol Croat 2017; 25: 285-91.

34. Green AC, Baade P, Coory M, Aitken JF, Smithers M. Population-based 20-year survival among people diagnosed with thin melanomas in Queensland, Australia. *J Clin Oncol* 2012; **30**: 1462-7.

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 Baade P, Meng X, Youlden D, Aitken J, Youl P. Time trends and latitudinal differences in melanoma thickness distribution in Australia, 1990–2006. *Int J Cancer* 2012; **130**: 170-8.
 Montella A, Gavin A, Middleton R, Autier P, Boniol M. Cutaneous melanoma mortality starting to change: a study of trends in Northern Ireland. *Eur J Cancer* 2009; **45**: 2360-6.
 Lyth J, Eriksson H, Hansson J, et al. Trends in cutaneous malignant melanoma in Sweden 1997-2011: thinner tumours and improved survival among men. *Br J Dermatol* 2015; **172**: 700-6.
 Armstrong A, Powell C, Powell R, et al. Are we seeing the effects of public awareness campaigns? A 10-year analysis of Breslow thickness at presentation of malignant melanoma in the South West of England. *Journal of Plastic, Reconstructive & Aesthetic Surgery* 2014; **67**: 324-30.
 Sacchetto L, Zanetti R, Comber H, et al. Trends in incidence of thick, thin and in situ

melanoma in Europe. Eur J Cancer 2018; 92: 108-18.

 Shaikh WR, Dusza SW, Weinstock MA, Oliveria SA, Geller AC, Halpern AC. Melanoma thickness and survival trends in the United States, 1989 to 2009. *J Natl Cancer Inst* 2016; 108.
 Rubio-Casadevall J, Puig-Vives M, Puigdemont M, et al. Patterns of increased incidence and survival of cutaneous melanoma in Girona (Spain) 1994-2013: a population-based study. *Clinical and Translational Oncology* 2018: 1-9.

Singapore Cancer Registry. 50 years of cancer registration (1968-2017). Singapore; 2019.
 Vazquez V L, Silva TB, Vieira Mde A, et al. Melanoma characteristics in Brazil: demographics, treatment, and survival analysis. *BMC Res Notes* 2015; 8: 4.

 Lv J, Dai B, Kong Y, Shen X, Kong J. Acral melanoma in Chinese: a clinicopathological and prognostic study of 142 cases. *Sci* 2016; 6: 31432.

45. Wada M, Ito T, Tsuji G, et al. Acral lentiginous melanoma versus other melanoma: A singlecenter analysis in Japan. J Dermatol 2017; 44: 932-8.

46. Albreski D, Sloan SB. Melanoma of the feet: misdiagnosed and misunderstood. *Clin Dermatol* 2009; **27**: 556-63.

47. Bradford PT, Goldstein AM, McMaster ML, Tucker MA. Acral lentiginous melanoma:

incidence and survival patterns in the United States, 1986-2005. Arch Dermatol 2009; 145: 427-34.
Kundu RV, Kamaria M, Ortiz S, West DP, Rademaker AW, Robinson JK. Effectiveness of a knowledge-based intervention for melanoma among those with ethnic skin. J Am Acad Dermatol 2010; 62: 777-84.

49. Byrd KM, Wilson DC, Hoyler SS, Peck GL. Advanced presentation of melanoma in African Americans. *J Am Acad Dermatol* 2004; **50**: 21-4.

50. Mahendraraj K, Sidhu K, Lau CS, McRoy GJ, Chamberlain RS, Smith FO. Malignant melanoma in African-Americans: a population-based clinical outcomes study involving 1106 African-American patients from the Surveillance, Epidemiology, and End Results (SEER) Database (1988-2011). *Medicine* 2017; **96**: e6258.

51. Shaikh WR, Xiong M, Weinstock MA. The contribution of nodular subtype to melanoma mortality in the United States, 1978 to 2007. *Arch Dermatol* 2012; **148**: 30-6.

52. Mar V, Roberts H, Wolfe R, English DR, Kelly JW. Nodular melanoma: a distinct clinical entity and the largest contributor to melanoma deaths in Victoria, Australia. *J Am Acad Dermatol* 2013; **68**: 568-75.

53. Balch CM, Murad TM, Soong SJ, Ingalls AL, Halpern NB, Maddox WA. A multifactorial analysis of melanoma: prognostic histopathological features comparing Clark's and Breslow's staging methods. *Ann Sura* 1978: **188**: 732-42.

54. Balch CM, Buzaid AC, Soong SJ, et al. New TNM melanoma staging system: linking biology and natural history to clinical outcomes. *Semin Surg Oncol* 2003; **21**: 43-52.

55. Brunssen A, Jansen L, Eisemann N, et al. A population-based registry study on relative survival from melanoma in Germany stratified by tumor thickness for each histologic subtype. *J Am Acad Dermatol* 2019; **80**: 938-46.

56. Minicozzi P, Walsh PM, Sánchez M-J, et al. Is low survival for cancer in Eastern Europe due principally to late stage at diagnosis? *Eur J Cancer* 2018; **93**: 127-37.

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Oceania-Australia: E Chalker, M Smith (Australian Capital Territory Cancer Registry); R Walton, H You (NSW Cancer Registry); S Qin Li, S Dugdale (Northern Territory of Australia Cancer Registry); J Moore, S Philpot (Queensland Cancer Registry); R Pfeiffer, H Thomas (South Australian Cancer Registry); B Silva Ragaini, A Venn (Tasmanian Cancer Registry); SM Evans, L te Marvelde (Victorian Cancer Registry); V Savietto, R Trevithick (Western Australian Cancer Registry); D Currow* (Cancer Institute NSW); New Zealand: C Fowler, C Lewis (New Zealand Cancer Registry)

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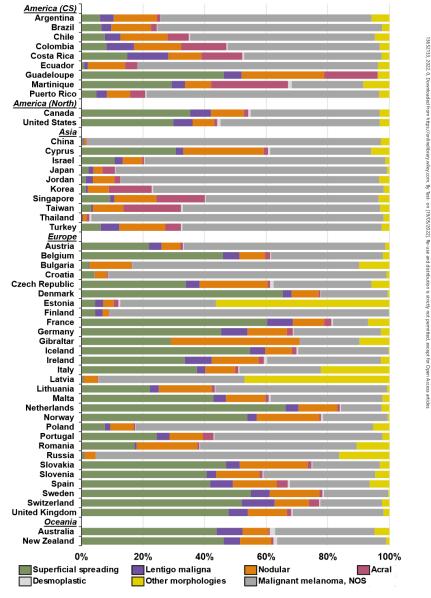


Figure 1 – Morphology distribution by continent and country, all periods combined

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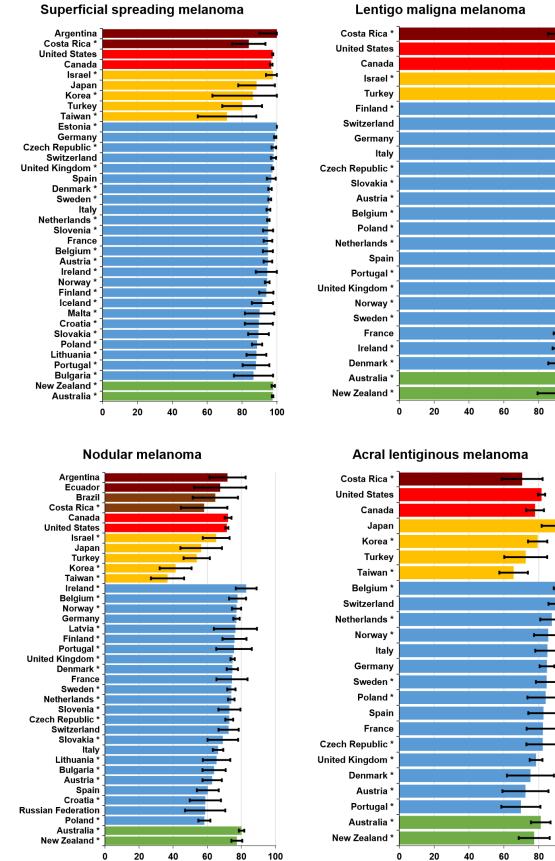
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Figure 2: Age-standardised 5-year net survival for patients diagnosed with cutaneous melanoma during 2010-2014 by continent, country and morphology group



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Table 1: Data quality indicators, patients diagnosed with melanoma of the skin during 2000-2014, by continent and country

		-	Ineligi	ble (%)	_	Exclusi	ons (%)	-		Data quality i	ndicators (%	(6)
	Calendar period	Patients submitted	Incomplete dates	ln situ	Other †	Eligible patients	DCO	Other ¶	Available for analysis	MV	Non-specific morphology	Lost to follow-up	Censored
AFRICA		498	9.6	0.0	9.2	404	0.0	8.9	368	91.3	45.9	3.0	54.1
Algerian registries	2000-2014	331	13.3	0.0	0.9	284	0.0	12.7	248	99.2	25.0	0.0	47.6
Mauritius *	2010-2012	5	0.0	0.0	20.0	4	0.0	0.0	4	100.0	100.0	0.0	0.0
Nigeria (Ibadan)	2005-2014	87	4.6	0.0	16.1	69	0.0	0.0	69	72.4	92.8	0.0	87.0
South Africa (Eastern C	Ca 2000-2014	75	0.0	0.0	37.3	47	0.0	0.0	47	76.6	83.0	23.4	44.7
AMERICA (Central and	South)	10,610	3.2	10.7	5.1	8,599	1.4	0.3	8,452	99.0	62.4	0.5	6.8
Argentinian registries	2000-2013	1,196	4.7	0.8	3.3	1,092	0.7	0.0	1,084	99.6	67.7	0.0	0.0
Brazilian registries	2000-2014	2,169	0.7	12.7	5.6	1,758	4.8	0.0	1,674	99.2	73.1	0.0	2.0
Chilean registries	2000-2012	569	0.0	0.0	2.5	555	0.2	0.0	554	99.5	60.1	0.0	19.3
Colombian registries	2000-2014	1,698	3.8	5.2	10.0	1,376	0.2	0.0	1,373	98.8	49.4	0.0	25.0
Costa Rica *	2002-2014	1,448	0.0	0.0	0.8	1,436	0.0	0.3	1,432	98.3	44.7	0.0	0.0
Ecuadorian registries	2000-2013	1,483	11.2	8.4	6.5	1,096	0.4	1.1	1,080	98.8	78.0	0.2	5.3
Guadeloupe (France)	2008-2013	60	0.0	13.3	0.0	52	0.0	0.0	52	100.0	0.0	0.0	71.2
Martinique (France)	2000-2012	177	0.0	0.0	2.8	172	0.0	4.7	164	100.0	23.2	25.0	0.0
Puerto Rico *	2000-2011	1,810	2.2	34.6	4.5	1,062	2.2	0.0	1,039	99.3	75.6	0.0	0.0
AMERICA (North)		1,134,825	0.6	35.2	2.7	706,357	0.5	0.0	703,094	99.2	51.1	3.8	0.1
Canadian registries	2000-2014	94,011	0.1	17.2	4.5	73,496	0.3	0.0	73,278	95.6	41.8	0.0	0.0
US registries	2000-2014	1,040,814	0.6	36.0	2.6	632,861	0.5	0.0	629,816	100.0	0.0	2.6	0.1
ASIA		41,718	0.5	14.9	8.4	31,768	1.1	0.3	31,337	98.2	76.4	0.4	2.0
Chinese registries	2003-2013	1,733	0.2	0.0	16.1	1,450	0.1	0.0	1,449	99.0	95.4	4.8	0.2
Cyprus *	2004-2014	687	3.6	3.1	6.1	599	1.7	0.0	589	99.7	32.8	0.0	53.7
Indian registries	2000-2014	61	0.0	0.0	8.2	56	0.0	7.1	52	98.1	94.2	3.8	5.8
Israel *	2000-2013	18,303	0.0	28.3	4.2	12,348	0.7	0.0	12,265	98.0	78.1	0.0	0.0
Japanese registries	2000-2014	6,462	1.3	10.4	22.3	4,263	5.7	0.0	4,018	95.3	88.1	0.0	2.4
Jordan *	2000-2014	306	0.3	1.0	27.8	217	0.0	1.4	214	99.5	84.1	14.0	0.0
Korea *	2000-2014	5,824	0.9	0.0	0.0	5,771	0.0	0.0	5,771	98.6	74.9	0.0	0.0
Kuwait *	2000-2013	21	0.0	0.0	14.3	18	0.0	0.0	18	100.0	72.2	0.0	0.0
Qatar *	2000-2014	61 504	0.0	1.6	8.2	55	0.0	0.0	55	98.2	87.3	0.0	70.9
Singapore *	2000-2014	521	0.0	9.0 3.4	20.3	368	0.3 0.0	0.0 0.0	367	100.0 100.0	56.1	0.0	0.0
Taiwan *	2000-2014	3,123 817	0.3 0.0	0.0	0.6 5.9	2,988 769	0.0	0.0 9.6	2,988 695	99.7	64.0 95.0	0.0 0.3	0.0 3.9
Thai registries Turkish registries	2000-2014 2000-2013	3,799	1.4	4.8	18.4	2,866	0.0	9.0 0.0	2,856	99.3	64.8	0.3	4.8
Ţ	2000 2010												
EUROPE	2000-2014	842,368	0.1 0.0	16.8 24.2	5.3 5.9	651,577 19,742	0.5 2.9	0.1 0.1	647,719 19,150	99.3 97.5	34.1 65.4	1.7 0.0	3.9 0.0
Austria *	2000-2014 2004-2014	28,233 29,278	0.0	24.2	2.4	21,905	0.0	0.1	21,905	97.5 99.9	36.3	1.9	0.0
Belgium * Bulgaria *	2004-2014 2000-2014	29,278 6,057	0.0	22.0	2.4	6,056	3.0	0.0	5,875	99.9 100.0	73.7	0.0	0.0
Croatia *	2000-2014	8,602	0.0	2.0	3.5	8,038	3.4	0.0	7,848	99.9	90.4	0.0	0.0
Czech Republic *	2000-2014	33,285	0.0	16.0	0.5	27,802	0.0	0.0	27,800	100.0	31.8	0.0	0.0
Denmark *	2000-2014	24,683	0.0	0.0	0.2	24,630	0.0	0.0	24,630	99.7	21.6	0.6	0.0
Estonia *	2000-2012	2,556	0.0	11.8	9.9	2,002	0.9	0.0	1,983	98.4	31.1	1.2	0.0
Finland *	2000-2012	15,873	0.4	0.0	5.3	14,968	0.1	0.0	14,949	100.0	90.8	0.3	0.0
French registries	2000-2010	14,962	0.3	0.0	6.0	14,017	0.0	2.4	13,677	100.0	11.4	3.4	0.0
German registries	2000-2014	99,363	0.3	16.2	2.6	80,338	2.0	0.0	78,713	99.4	28.4	0.6	28.7
Gibraltar *	2000-2010	39	0.0	12.8	7.7	31	0.0	0.0	31	100.0	19.4	0.0	51.6
Iceland *	2000-2014	715	0.0	0.0	0.3	713	0.0	0.0	713	99.9	29.3	0.0	0.0
Ireland *	2000-2013	14,683	0.0	35.3	0.1	9,475	0.1	0.0	9,470	99.8	36.9	0.0	0.0
Italian registries	2000-2014	53,776	0.0	7.8	5.4	46,634	0.1	0.0	46,607	98.2	26.5	1.2	1.5
Latvia *	2000-2014	2,507	0.0	0.0	0.2	2,503	0.1	0.0	2,501	99.8	47.5	0.0	0.0
Lithuania *	2000-2012	4,129	0.0	6.3	13.4	3,317	0.0	0.0	3,317	100.0	55.8	0.0	0.9
Malta *	2000-2013	725	0.0	14.2	10.9	543	0.4	0.0	541	99.6	36.4	0.0	0.0
Netherlands *	2000-2014	80,641	0.0	20.0	6.6	59,141	0.0	0.1	59,088	100.0	13.2	1.1	0.0
Norway *	2000-2014	31,469	0.0	8.6	27.9	19,997	0.0	0.0	19,994	99.9	21.0	0.3	0.0
Poland *	2000-2014	38,834	0.0	0.2	7.3	35,932	0.0	0.3	35,834	100.0	77.1	0.0	0.0
Portugal *	2000-2014	10,897	0.3	11.3	2.5	9,358	0.0	0.0	9,358	99.3	54.6	2.1	0.1
Romania (Cluj)	2006-2012	515	0.0	3.9	11.5	436	0.0	0.0	436	98.9	50.9	0.0	0.0
Russian registries	2000-2014	5,081	0.0	0.1	2.9	4,927	0.1	0.2	4,914	99.5	79.0	2.5	0.7
Slovakia *	2000-2010	7,933	0.0	11.1	7.3	6,478	1.4	0.0	6,389	100.0	21.9	0.0	0.0
Slovenia *	2000-2013	7,442	0.0	18.8	5.9	5,605	0.0	0.0	5,603	100.0	36.3	0.1	0.0
Spanish registries	2000-2013	14,567	0.5	18.8	3.2	11,292	0.3	0.1	11,242	99.7	25.8	0.6	0.1
Sweden *	2000-2014	58,528	0.0	30.2	6.7	36,925	0.0	0.0	36,921	100.0	20.8	0.3	0.1
Swiss registries	2000-2014	19,030	0.0	19.4	2.1	14,923	0.1	0.1	14,893	99.9	20.0	7.2	7.9
United Kingdom *	2000-2014	227,965	0.1	22.9	4.8	163,761	0.2	0.0	163,337	98.5	30.8	4.3	0.0
OCEANIA		273,076	0.2	29.6	1.5	187,846	0.2	0.0	187,512	99.0	32.8	0.0	0.0
		044 400	0.2	33.5	1.4	450 504	0.1	0.0	156,302	98.9	32.3	0.0	0.0
Australia *	2000-2014	241,133	0.2			156,531	0.1	0.0				0.0	
Australia * New Zealand *	2000-2014 2000-2014	241,133 31,943	0.2	0.0	2.0	31,315	0.1	0.0	31,210	99.7	35.3	0.0	0.0

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Other †: records with incomplete data or for tumours that are benign (behaviour code 0), of uncertain behaviour (behavior code 1), metastatic from another organ (behavior code 6), or unknown if primary or metastatic (behavior code 9); or for patients with age outside the range 15–99 years (adults); or with a topography code that is not in the range for skin (VAR20=C440-C449), or the skin of the labia majora (C510), vulva (C519), penis (C609) or scrotum (C632).

Other ¶: tumour coded with unknown vital status; or for patients for which the sex is unknown.

MV: Microscopically verified

* Data with 100% coverage of the national population

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lanoma ogies	95% CI	14.6 - 75.0 55.6 - 89.5 26.6 - 77.5	- 94. - 61.		9.0 - 75.6 7.2 - 62.8	59.1 - 100.0	23.2 - 86.3			34.7 - 100.0 26.7 - 88.9	71.7 - 79.4 77.6 - 83.6 77.7 - 84.2	82.9 - 85.3 84.1 - 86.4 83.0 - 85.5	37.1 - 89.4 41.1 - 98.7	34.4 - 100.0 36.8 - 90.5	35.4 - 66.1 34.3 - 67.9 52.9 - 76.2	7.9 - 63.6 16.5 - 75.9
Other melanoma morphologies	No. NS (%)	10 44.8 44 72.6 11 52.0			15 42.3 § 10 35.0 §	23 88.2	13 54.7			15 68.1 11 57.8	661 75.6 926 80.6 762 80.9		15 63.2 17 69.9	\$	58 50.7 42 51.1 64 64.6	
SON						- 84.2 - 77.4 - 82.6	- 65.1 - 66.6 - 63.8		- 100.0	- 78.4 - 85.0 - 83.9		- 86.7 6,317 - 88.4 6,469 - 88.8 4,988				
Malignant melanoma, NOS	95% CI	57.8 - 57.0 - 58.5 -		w	ഗഗഗ	67.0 62.5 69.2	47.3 - 53.5 - 50.2 -		§ 76.0 - 1	66.4 74.9 68.5	82.9 - 84.9 82.9 - 84.6 84.0 - 85.6		26.0 - 46.0 39.8 - 49.5 43.2 - 53.6	§ 59.6 § 64.6 § 58.9	83.1 87.9 86.3	64.7 64.3 64.7
ant me	No. NS (%)	66.7 62.9 65.2		57.0 55.8 55.6	54.9 64.7 55.8	75.6 69.9 75.9	56.2 60.1 57.0		92.1	72.4 79.9 76.2	83.9 83.7 84.8	86.4 88.2 88.5	36.0 44.7 48.4	84.7 75.1 69.7	84.8 89.3 87.8	
Maligna	No.	131 320 277	359 437 251	59 57 154	196 219 43	104 183 318	146 319 332		28	296 340 149	8,737 10,731 11,139	96,459 111,496 101,623	110 538 623	15 86 92	2,648 3,614 3,314	703 1,605 999
Desmoplastic melanoma	95% CI										69.4 - 89.8 85.3 - 95.5 87.3 - 96.4	85.3 - 89.3 87.3 - 91.0 87.8 - 91.5			20.7 - 81.2	
olastic	No. NS (%)										79.6 90.4 91.8	87.3 89.1 89.7			51.0	
Desmol	No. N										131 194 266	2,082 2,442 2,255			£	
snc	% CI		36.0 - 95.6 3.4 - 60.7	38.2 - 89.9 46.8 - 100.0	62.1 - 100.0 61.4 - 89.7 56.9 - 84.4	59.0 - 91.5 62.1 - 86.2 58.8 - 82.2	17.8 - 77.2 2.9 - 52.3 1.4 - 52.8		42.3 - 100.0 62.1 - 100.0	33.4 - 79.5 7.7 - 62.8 18.2 - 82.8	81.6 - 90.5 77.0 - 86.2 72.8 - 83.0	79.9 - 84.6 80.6 - 84.6 79.6 - 83.7			41.0 - 92.2 51.6 - 100.0 56.6 - 100.0	68.5 - 96.2 81.7 - 100.0
al lentigine melanoma	(%)		65.8 32.1	64.1 80.5 §	81.6 § 75.6 § 70.6 §	75.3 74.2 70.5	47.5 27.6 27.1		78.0 § 84.0 §	56.4 35.3 50.5	86.1 81.6 77.9	82.2 82.6 81.6			66.6 80.8 79.3	82.4 93.2
Acr	No. NS (%)		9 7	18 25			555		²⁰	27 14	297 366 391	1,771 2,229 2,317			8 3 3	78
ılar melanoma	95% CI	50.7 - 91.7 45.8 - 70.4 61.3 - 82.6	61.8 - 81.7 56.7 - 80.8 51.5 - 78.1	0.0 - 39.7 30.2 - 71.4 39.0 - 88.0	24.8 - 58.8 51.3 - 75.4 43.7 - 69.7	55.2 - 90.1 49.3 - 68.5 44.6 - 71.9	46.1 - 92.2 44.3 - 77.7 52.3 - 82.9	0.0 - 90.8		27.4 - 74.5 20.8 - 56.9 31.3 - 92.8	69.8 - 74.4 67.6 - 71.8 70.3 - 74.3	68.6 - 70.5 70.3 - 72.0 70.7 - 72.4		62.8 - 84.7 59.9 - 82.9	63.0 - 76.2 62.5 - 75.3 57.4 - 73.2	36.2 - 68.4 44.3 - 68.7
lar me	(%)	71.2 58.1 71.9	71.7 68.8 64.8	Ś	ഗഗഗ		69.1 61.0 67.6	Ś		50.9 38.9 62.0		69.5 71.2 71.6		73.8 § 71.4 §	69.6 68.9 65.3	52.3 56.5
Nodu	No. NS	30 76 44					24 53 53			25 36 17 0 0	2,076 2,661 3,119			59 94	251 (316 (208 (53 57
naligna oma	95% CI	85.9 - 100.0 85.7 - 100.0	100.0 - 100.0 77.2 - 100.0 72.8 - 100.0	61.5 - 100.0 48.1 - 100.0	85.1 79.6 86.4	<i>100.0 - 100.0</i> 89.9 - 100.0 85.3 - 100.0				92.9 - 100.0	95.9 - 99.4 96.4 - 99.3 94.6 - 99.0				92.2 - 100.0 88.4 - 100.0 93.6 - 100.0	59.0 - 100.0 57.8 - 100.0
Lentigo maligna melanoma	No. NS (%)	24 100.0 21 100.0	100.0 96.5 95.3	95.2 87.9 §	16 100.0 § 53 99.6 § 17 96.0 §	33 100.0 51 97.5 103 93.6				22 100.0	1,219 97.6 1,492 97.8 2,301 96.8	10,760 98.7 13,531 99.3 14,191 99.6			141 97.6 110 97.5 74 98.7	31 90.1 25 89.0
spreading oma	95% CI	92.3 - 100.0 90.0 - 100.0	65.0 - 100.0 68.9 - 100.0	100.0 - 100.0 100.0 - 100.0	70.0 - 100.0 71.0 - 98.5	95.8 - 100.0 78.9 - 93.7 74.4 - 93.4		0.0 - 0.2	76.2 - 100.0 89.5 - 100.0 90.0 - 100.0	28.2 - 96.6 50.4 - 93.3 41.0 - 100.0	94.1 - 96.1 95.4 - 97.0 96.0 - 97.5	96.5 - 97.2 97.1 - 97.8 97.3 - 97.9		88.9 - 100.0 78.8 - 95.8	90.1 - 96.5 90.4 - 98.0 93.8 - 100.0	69.6 - 99.9 77.8 - 98.9
Superficial spreading melanoma	No. N	1) 31 98.5 26 100.0			29 85.0 § 49 84.8 §	47 100.0 71 86.3 90 83.9		16 0.1 §	12 92.6 § 18 100.0 § 18 100.0 §	12 62.4 19 71.9 20 70.8	6,720 95.1 8,352 96.2 10,737 96.8	51,276 96.8 66,456 97.5 65,610 97.6		72 96.2 § 101 87.3 §	585 93.3 407 94.2 335 97.7	
		IRAL AND SOUTH) 2000-2004 2005-2009 2010-2014	2000-2004 2005-2009 2010-2014	2000-2004 2005-2009 2010-2014	2000-2004 2005-2009 2010-2014	2000-2004 2005-2009 2010-2014	2000-2004 2005-2009 2010-2014	2000-2004 2005-2009 2010-2014	2000-2004 2005-2009 2010-2014	2000-2004 2005-2009 2010-2014	TH) 2000-2004 6 2005-2009 8 2010-2014 10	2000-2004 51 2005-2009 66 2010-2014 65	2000-2004 2005-2009 2010-2014	2000-2004 2005-2009 2010-2014	2000-2004 2005-2009 2010-2014	2000-2004 2005-2009 2010-2014

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	Supe	Superficial spreading melanoma	oreading ma	Lentigo maligna melanoma	naligna oma	IDON	ılar me	Nodular melanoma	Acr	Acral lentiginous melanoma		Desmonlastic melanoma	stic me		alionant	melan	Maliqnant melanoma. NOS	<u>5</u> F	ther melanom morphologies	Other melanoma mornhologies
I	NON	No. NS (%)	95% CI	No. NS (%)	95% CI	No. NS (%)	(%)	95% CI		2	5% CI	No. NS (%)	%)		NON	S (%)	95% CI	N ON	(%)	95% CI
2000-2004 2005-2009 2010-2014	17 27 39		61.5 - 100.0 66.5 - 100.0 63.0 - 100.0	16 94.2 20 100.0	72.2 - 100.0 85.9 - 100.0	87 113 192	50.4 38.0 41.5	39.2 - 61.6 29.5 - 46.6 32.1 - 50.9	156 73.1 247 80.3 399 79.4		64.6 - 81.6 74.1 - 86.4 73.9 - 84.9	16 53.7	26	.2 - 81.3	982 1,548 1,790	982 47.2 548 51.3 .790 56.2	43.8 - 50.6 48.5 - 54.1 53.5 - 59.0	22 41.6 38 64.2 43 60.8		20.9 - 62.3 47.9 - 80.5 48.5 - 73.2
2000-2004 2005-2009 2010-2014	• •	+	41.3 - 92.5 100.0 - 100.0				39.8 25.2	13.2 - 66.3 8.8 - 41.6	11 11 12 12 12 12 12 12 12 12 12 12 12 1		35.8 - 100.0 34.6 - 89.8 38.9 - 91.5				59 71 76	53.4 55.5 55.6	40.8 - 66.1 45.2 - 65.9 43.5 - 67.6			
2000-2004 2005-2009 2010-2014	10 33 49	93.3 81.3 71.4	73.8 - 100.0 66.0 - 96.6 54.6 - 88.2				40.9 41.8 36.7				56.5 - 77.3 59.4 - 77.0 57.4 - 73.8				612 667 634	46.1 49.6 46.7	41.6 - 50.7 45.2 - 54.0 42.1 - 51.3	23 34 33	51.0 33.5 35.9	26.8 - 75.1 15.1 - 51.8 21.2 - 50.6
2000-2004 2005-2009 2010-2014															103 248 151	44.9 35.9 § 28.0 §	34.4 - 55.4 28.6 - 43.2 21.5 - 34.4			
2000-2004 2005-2009 2010-2014	21 67 91	79.9 § 77.7 80.1	59.2 - 100.0 66.4 - 88.9 68.7 - 91.5	20 84.8 § 58 97.3 94 96.4	67.1 - 100.0 85.8 - 100.0 90.5 - 100.0	48 187 192	59.9 § 52.3 53.9	42.1 - 77.7 44.3 - 60.4 46.2 - 61.6	10 67 65	61.6 § 26 73.8 6; 72.5 6(26.3 - 96.9 62.3 - 85.3 60.2 - 84.9				181 810 858	51.9 § 52.5 56.4	42.9 - 60.8 48.6 - 56.4 52.6 - 60.1	36 33	63.2 55.9	45.2 - 81.3 41.8 - 69.9
2000-2004 2005-2009 2010-2014	1,433 1,236 1,522	98.2 95.6 94.9	96.1 - 100.0 93.3 - 97.9 92.4 - 97.3	258 97.3 245 99.6 290 98.7	88.3 - 100.0 96.7 - 100.0 95.5 - 100.0	384 405 383	75.0 67.2 62.9	70.0 - 80.1 61.7 - 72.7 57.3 - 68.6	55 54 54 54	60.9 45 71.3 56 72.4 58	45.6 - 76.1 56.4 - 86.3 59.2 - 85.6	11 70.3 22 100.0 23 100.0).3 40.7).0 85.2).0 100.0	17 - 99.9 12 - 100.0 10 - 100.0	3,306 4,044 5,180	77.9 81.9 87.1	76.3 - 79.6 80.5 - 83.4 85.8 - 88.4	89 97 65	60.2 68.6 70.5	48.7 - 71.7 59.4 - 77.9 59.7 - 81.2
2000-2004 2005-2009 2010-2014	619 3,852 5,590	93.9 94.3 95.4	90.3 - 97.5 92.9 - 95.6 94.1 - 96.7	50 99.3 380 98.0 725 98.5	<i>81.7 - 100.0</i> 95.2 - 100.0 96.1 - 100.0	121 785 940	75.6 70.7 74.9	67.2 - 83.9 66.7 - 74.6 71.3 - 78.5	23 146 190	77.3 56 85.5 78 87.7 8	56.0 - 98.5 78.1 - 92.9 81.5 - 94.0	25 100.0 43 72.4	0.0 84.3 4 48.7	.3 - 100.0 .7 - 96.1	645 3,181 4,128	80.8 85.1 88.5	77.1 - 84.4 83.5 - 86.7 87.1 - 90.0	31 177 250	90.5 82.2 83.3	64.1 - 100.0 75.5 - 88.9 77.1 - 89.5
2000-2004 2005-2009 2010-2014			45.5 - 100.0 55.1 - 98.5 75.4 - 97.8				46.2 57.9 64.0	36.6 - 55.7 50.8 - 65.0 57.2 - 70.9							1,245 1,421 1,661	51.6 57.1 61.6	48.3 - 54.9 54.1 - 60.2 58.8 - 64.4			36.7 - 54.0 27.2 - 42.8 32.0 - 47.8
2000-2004 2005-2009 2010-2014	39 288	90.6 89.6	75.2 - 100.0 81.6 - 97.7			122 174	70.4 58.9	61.2 - 79.6 49.8 - 68.1	25 (67.9 33	33.9 - 100.0				2,174 2,622 2,298	66.3 74.6 77.1	63.8 - 68.7 72.5 - 76.6 75.0 - 79.1	57	80.8	66.6 - 95.0
lic * 2000-2004 2005-2009 2010-2014	2,214 3,142 4,082	97.0 98.1 98.2	95.1 - 98.9 96.7 - 99.6 96.9 - 99.6	361 97.9 438 97.0 442 99.0	93.9 - 100.0 93.3 - 100.0 96.3 - 100.0	2,016 2,080 2,033	71.2 73.0 73.0	68.8 - 73.7 70.6 - 75.3 70.7 - 75.3		86.3 67 83.5 77 82.3 72	67.5 - 100.0 75.2 - 91.9 72.9 - 91.7	46 59 106 77 142 80	59.1 41. 77.9 68 80.2 72	41.7 - 76.5 68.8 - 87.0 72.4 - 87.9	2,546 2,964 3,335	71.3 77.2 78.9	69.2 - 73.4 75.4 - 79.1 77.2 - 80.7	507 540 567		72.6 - 82.3 75.8 - 84.3 77.3 - 85.6
2000-2004 2005-2009 2010-2014	2,597 5,384 8,123	92.7 95.3 96.0	90.9 - 94.5 94.1 - 96.4 95.1 - 97.0	136 97.3 218 88.6 329 93.6	85.1 - 100.0 78.8 - 98.4 88.6 - 98.6	444 757 943	72.3 72.4 74.8	67.4 - 77.2 68.8 - 76.0 71.5 - 78.1	17 66		66.1 - 100.0 73.9 - 94.7 61.8 - 88.8	43 100.0	0.0 87.7	.7 - 100.0	2,318 1,778 1,229	83.6 78.1 77.1	81.6 - 85.5 75.8 - 80.3 74.7 - 79.5	27 61 69	85.5 90.4 90.9	66.8 - 100.0 80.0 - 100.0 79.9 - 100.0
2000-2004 2005-2009 2010-2014	27 1 32 1 28 1	100.0 100.0 100.0	93.0 - 100.0 100.0 - 100.0 100.0 - 100.0	28 100.0 15 95.0 11 100.0	85.5 - 100.0 71.3 - 100.0 96.1 - 100.0	24 14 29	82.7 71.6 56.2	58.1 - 100.0 45.3 - 97.8 34.4 - 78.0	17 @	64.0 17	17.3 - 100.0				109 203 305	71.0 70.0 82.7	62.0 - 80.1 63.4 - 76.7 74.0 - 91.4	410 500 207	66.3 73.7 78.2	60.8 - 71.8 69.2 - 78.1 72.5 - 83.8
2000-2004 2005-2009 2010-2014	137 539	92.8 93.9	87.0 - 98.5 89.9 - 98.0	102 100.0 260 100.0	93.8 - 100.0 97.3 - 100.0	76 216	72.0 76.0	62.6 - 81.5 69.0 - 83.1	10	79.1 42 93.1 68	42.8 - 100.0 68.4 - 100.0				3,576 4,452 5,539	84.8 87.0 88.1	83.3 - 86.4 85.7 - 88.3 86.9 - 89.3			
2000-2004 2005-2009 2010-2014	2,552 4,419 1,109	94.6 95.7 94.9	93.0 - 96.2 94.5 - 96.9 92.4 - 97.4	375 92.7 640 95.9 115 94.5	87.6 - 97.8 92.9 - 99.0 88.6 - 100.0	518 706 158	70.1 70.9 74.6	65.5 - 74.8 66.5 - 75.2 65.4 - 83.7	114 155 38 38	76.5 6 83.1 7 82.4 7	67.7 - 85.3 75.2 - 91.0 73.1 - 91.7	16 69 42 75	69.6 37. 75.5 56.	37.9 - 100.0 56.1 - 94.9	565 817 167	82.8 83.5 83.3	79.2 - 86.5 79.7 - 87.4 76.4 - 90.1	352 483 62	87.7 90.6 89.1	83.3 - 92.1 87.1 - 94.2 80.7 - 97.4
2000-2004 2005-2009 2010-2014	6,566 11,019 11,676	99.2 98.8 99.0	98.2 - 100.0 98.1 - 99.5 98.4 - 99.7	1,235 99.4 2,057 99.4 1,990 99.4	98.0 - 100.0 97.9 - 100.0 97.9 - 100.0	2,415 3,394 3,188	74.4 77.7 77.2	72.3 - 76.4 76.0 - 79.5 75.3 - 79.0	319 478 450	85.4 80 83.7 79 84.7 80	80.4 - 90.4 79.4 - 88.0 80.5 - 89.0	39 91 56 80 78 91	91.4 77. 80.9 63. 91.6 82	77.2 - 100.0 63.6 - 98.3 82.5 - 100.0	3,734 5,649 6,095	83.8 84.6 86.6	82.3 - 85.3 83.4 - 85.9 85.4 - 87.8	481 649 625	78.3 79.8 82.7	73.9 - 82.7 75.9 - 83.7 78.8 - 86.7
2000-2004 2005-2009 2010-2014	124 132 134	92.5 87.4 91.7	85.6 - 99.3 79.7 - 95.2 85.6 - 97.8	13 78.2 16 82.3	48.1 - 100.0 55.9 - 100.0		78.9 61.6 56.0	59.4 - 98.3 31.3 - 91.9 29.6 - 82.5							92 80 37	88.6 87.7 82.7	79.8 - 97.3 78.8 - 96.6 71.1 - 94.4			
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No. NS (%) No. NS (%) 771 948 771 948 771 946 5,044 944 944 8,677 946 3,636 95.2 12 100.0 12 100.0 73 78.6 3,636 95.2 73 78.6 3,636 95.2 12,494 94.7 1,336 85.2 331 88.3 733 88.3 1,494 94.7 1,214 88.9 1,380 88.6 84.2 84.2 84.2 84.3 3,143 94.5 1,380 88.6 9.7 1,214 88.9 1,244 91.0 85.4 1,144 88.9 1,494 91.0 36.3 1,494 91.0 36.5 1,144 88.3 1,494 91.0 36.5 1,144 91.0 1,492 90.5 1,144 91.0 1,492 90.5 1,144 91.0 1,55 7 1,144 91.0 1,144 91.0 1		cmoncloud	Nodu	om rel	Nodific molecular	5	cmonclose	200 0	itaclact	Deemonlastic melanoma	Malianat	aclow	Malianant melanema NOC	5	morphologies	ouner melanoma mornhologios
771 94.8 771 94.8 980 95.0 1,427 96.2 5,044 94.4 8,5,044 94.4 3,636 95.2 12 700.0 85 37.856 3336 85.2 3336 85.2 3336 85.2 3336 85.2 3336 85.2 3336 85.2 3336 85.2 3336 85.2 3336 85.2 3337 90.1 8,355 90.1 8,355 91.7 1,214 88.8 91.7 1,214 95.4 90.0 36.9 91.7 1,214 88.0 96.0 95.4 1,414 88.0 36.5 90.0 36.3 95.4 36.3 95.4 1,414 88.3 <t< th=""><th>No. NS (%)</th><th>S (%) 95% CI</th><th>No. NS (%)</th><th>(%)</th><th>95% CI</th><th>No. NS (%)</th><th>s (%) 95% CI</th><th>N</th><th>No. NS (%)</th><th></th><th>No. NS (%)</th><th>S (%)</th><th>95% CI</th><th>No. NS (%)</th><th>(%) s</th><th>95% CI</th></t<>	No. NS (%)	S (%) 95% CI	No. NS (%)	(%)	95% CI	No. NS (%)	s (%) 95% CI	N	No. NS (%)		No. NS (%)	S (%)	95% CI	No. NS (%)	(%) s	95% CI
5,044 94.4 8,677 94.6 3,636 95.2 12 700.0 73 88.3 336 85.2 331 88.3 55 87.6 85 93.7 55 87.6 88 90.1 88 90.1 88 93.7 12,494 94.7 13,344 94.7 18,354 94.7 18,354 94.7 18,354 94.7 18,354 94.7 3,143 93.7 3,143 93.7 3,143 93.7 3,143 94.5 13,80 88.9 1,330 88.6 1,330 88.6 1,330 88.6 1,144 88.0 1,144 88.0 1,1494 91.0 36.5 89.5 36.5 90.5 <	0 184 95.7 7 294 97.5 8 359 96.0	90.0 - 100.0 93.9 - 100.0 92.3 - 99.8	418 7 527 7 494 7	71.6 73.4 76.9	66.5 - 76.8 68.9 - 77.9 72.1 - 81.7	36 73 52 63 69 72	73.8 54.2 - 93.3 63.6 44.7 - 82.5 72.5 58.5 - 86.5		64.6 77.4 8 80.7	36.2 - 93.0 58.7 - 96.2 67.1 - 94.3	1,007 1,365 1,121	82.0 84.3 86.8	79.0 - 85.1 81.8 - 86.8 84.2 - 89.4	78 124 61	78.5 79.3 81.1	68.1 - 89.0 71.0 - 87.7 70.8 - 91.5
12 700.0 73 78 73 78 336 85.2 331 88.3 333 88.3 59 700.0 85 87.6 88 90.1 88 90.1 88 90.1 12,494 94.7 3,143 93.7 3,143 93.7 3,143 93.7 3,143 93.7 3,143 93.7 3,143 93.7 3,143 93.7 3,143 93.7 3,143 93.7 3,143 93.7 3,145 88.9 1,380 88.6 323 91.7 1,214 88.0 1,214 88.0 1,1494 91.0 36.5 90.5 36.5 90.5 36.5 90.5 36.5 90.5 36.5	435 626 202	96.4 - 100.0 97.6 - 100.0 97.0 - 100.0	1,411 6 2,170 6 904 6	68.5 68.5 66.4	65.7 - 71.2 66.2 - 70.8 63.3 - 69.5	155 8 ⁴ 250 85 96 85		5 54 6 79 0 25		65.8 - 90.3 62.8 - 91.4 64.7 - 93.1	4,548 5,983 1,768	78.9 81.8 79.7	77.6 - 80.3 80.6 - 82.9 78.0 - 81.5	2,515 5,130 2,554	79.4 83.0 82.8	77.6 - 81.3 81.8 - 84.2 81.3 - 84.3
73 78.6 336 85.2 336 85.2 336 85.2 336 85.2 83 90.1 88 90.1 88 90.1 88 90.1 88 90.1 12,494 94.7 18,334 95.1 12,494 94.7 18,334 95.1 18,334 95.1 18,334 95.1 18,334 95.1 323 93.2 323 93.2 323 92.6 1,248 84.2 84.7 88.9 91.7 1,248 1,248 91.7 1,141 86.0 1,141 86.0 1,1494 91.0 36.3 89.5 49.2 90.5	0.0		36 4 32 6 4 32 1	44.5 60.8 76.6	26.3 - 62.7 43.3 - 78.2 63.9 - 89.2						353 424 410	60.7 64.1 69.8	54.7 - 66.8 58.6 - 69.6 64.3 - 75.3	291 357 527	72.7 66.0 73.2	66.2 - 79.1 59.9 - 72.1 67.8 - 78.5
59 100.0 85 87.6 85 87.6 88 90.1 88,326 93.3 12,434 95.1 18,354 95.1 18,354 95.1 18,353 94.5 3,143 93.7 3,143 93.7 3,143 93.7 3,143 93.7 3,143 93.7 3,143 93.7 3,143 93.7 3,143 93.7 3,143 93.7 3,143 94.2 509 88.6 1,214 88.0 1,214 88.0 1,214 88.0 1,214 88.0 1,141 88.3 1,1494 91.0 36.5 492 36.5 90.5 36.5 90.5 36.5 90.5	9 15 87.8 3 39 100.0 0 41 100.0	62.9 - 100.0 85.8 - 100.0 100.0 - 100.0	70 6 273 6 226 6		49.8 - 72.2 60.0 - 73.4 57.4 - 73.6	13 93 13 77	93.7 68.4 - 100.0 77.8 45.1 - 100.0	0.0			938 573 339	66.4 59.5 63.3	62.8 - 70.0 54.8 - 64.2 57.0 - 69.7	12	83.5	56.5 - 100.0
8,326 93.9 12,494 94.7 12,494 94.7 18,354 95.1 3,780 93.7 2,1780 93.7 4,833 94.5 509 84.2 509 84.2 509 84.2 323 92.6 1,380 88.6 1,380 88.6 323 92.6 1,214 88.0 1,214 88.0 1,214 88.0 1,214 88.0 1,214 88.0 90.0 95.4 1,141 85.4 1,1494 91.0 36.3 89.5 49.2 90.5	2.0 1 5 11 100.0	100.0 - 100.0	29 7 15 6 25 6	73.0 61.2 61.0	54.0 - 91.9 35.8 - 86.6 37.1 - 84.9						54 72 71	83.8 76.5 72.4	73.8 - 93.8 68.0 - 85.1 62.6 - 82.2			
2,780 93.7 3,143 93.7 3,143 93.7 3,143 93.7 509 84.2 509 84.2 509 84.2 700 88.9 1,214 88.0 1,214 88.0 17 75.5 58 90.0 16 86.0 1,494 91.0 36.3 89.5 492 90.5	0 509 97.2 5 663 97.9 8 1,317 98.0	93.4 - 100.0 95.4 - 100.0 95.0 - 100.0	2,046 7 2,473 7 2,931 7		74.1 - 78.6 71.0 - 75.0 72.2 - 76.1	132 75 138 8(229 87	79.8 71.9 - 87.8 80.3 72.5 - 88.1 87.5 80.9 - 94.2	8 34 1 60 2 115	 4 86.4 76.8 83.6 	68.3 - 100.0 60.4 - 93.2 76.4 - 90.7	2,630 2,781 2,385	82.5 83.6 84.3	80.5 - 84.5 81.9 - 85.4 82.6 - 86.1	499 517 455	79.4 88.0 85.8	75.2 - 83.5 84.3 - 91.8 81.9 - 89.8
509 84.2 88.9 88.9 1,380 88.6 323 92.6 723 91.7 1,214 88.0 1,214 88.0 1,214 88.0 1,214 88.0 1,214 88.0 1,214 88.0 1,214 88.0 1,214 88.0 1,214 88.0 1,214 88.0 1,25 56.9 90.0 36.4 1,494 91.0 36.3 89.5 492 90.5	3 158 100.0 1 197 97.1 8 266 97.4	87.0 - 100.0 85.4 - 100.0 93.6 - 100.0	1,103 7 1,304 7 1,642 7		71.0 - 77.2 71.2 - 76.9 74.5 - 79.9	40 93 32 84 38 84	93.6 76.3 - 100.0 84.4 68.6 - 100.0 85.5 77.3 - 93.6	0.0 33 0.0 44 6 46	3 71.9 1 100.0 5 75.9	49.8 - 94.1 85.2 - 100.0 61.8 - 89.9	967 1,428 1,798	78.3 83.4 87.0	75.2 - 81.4 81.0 - 85.8 84.9 - 89.0	29 34 59	85.1 64.2 76.5	56.3 - 100.0 45.2 - 83.3 63.9 - 89.1
323 92.6 748 91.7 1,214 88.0 17 75.5 58 90.0 1,141 88.3 1,494 91.0 363 89.5 492 90.5	9 205 98.4 2 259 99.0 6 193 98.7	94.4 - 100.0 95.4 - 100.0 94.6 - 100.0	566 6 956 5 1,216 5		58.5 - 67.9 55.4 - 62.6 54.8 - 61.9		84.3 70.4 - 98.2 90.1 77.4 - 100.0 94.0 73.5 - 94.5 94.5	2 0.0 5 19	53.0	21.4 - 84.7	7,413 9,291 10,938	60.5 64.9 68.1	59.2 - 61.8 63.7 - 66.0 67.1 - 69.1	687 545 655		58.4 - 66.8 62.5 - 71.6 62.1 - 70.9
17 75.5 58 90.0 16 85.4 16 86.0 1,141 88.3 1,494 91.0 363 89.5 492 90.5	0 81 100.0 9 157 97.9 7 151 97.7	<i>100.0 - 100.0</i> <i>88.4 - 100.0</i> 90.9 - 100.0	233 5 355 6 425 7	59.2 63.0 75.8	52.1 - 66.3 57.2 - 68.9 65.3 - 86.2	80 85 136 82 107 69	85.9 74.5 - 97.3 82.4 74.2 - 90.6 69.8 58.6 - 81.0	3 6 15	6 9.2 7 5.5	29.1 - 100.0 3.4 - 87.6	1,766 2,283 1,064	76.2 79.8 81.8	73.8 - 78.5 77.9 - 81.8 77.7 - 85.9	45 66 92	72.1 82.8 74.4	56.5 - 87.6 71.5 - 94.1 62.3 - 86.4
16 85.4 16 86.0 1,141 88.3 1,494 91.0 363 89.5 492 90.5	ოო		33 53 0	61.2 61.7	40.3 - 82.1 42.4 - 81.0						137 85	64.6 63.3	56.1 - 73.0 51.9 - 74.7	27 19	89.5 84.0	73.5 - 100.0 57.1 - 100.0
1,141 88.3 1,494 91.0 363 89.5 492 90.5	0.0		21 8 41 5 115 5	87.9 56.7 58.8	64.2 - 100.0 39.2 - 74.2 47.0 - 70.6						943 1,316 1,623	62.1 61.5 66.4	58.3 - 65.9 58.3 - 64.8 63.3 - 69.5	377 210 216	70.2 69.9 66.6	63.4 - 77.0 61.7 - 78.1 58.6 - 74.6
492 90.5	5 130 86.4 5 138 93.5 4 22 98.9	77.5 - 95.3 86.0 - 100.0 90.9 - 100.0	553 689 164 6		54.6 - 64.4 64.7 - 74.0 60.2 - 78.2	38 81.3 31 67.4	.3 64.1 - 98.6 .4 46.3 - 88.5		11 100.0	37.5 - 100.0	542 720 137	63.0 63.5 54.3	58.1 - 67.8 58.8 - 68.2 44.3 - 64.4	115 77	61.9 48.8	51.8 - 72.0 36.1 - 61.5
2005-2009 882 95.1 92.3 - 97.9 2010-2014 899 95.0 92.1 - 97.9	6 60 <i>90.2</i> 9 74 <i>89.6</i> 9 48 89.0	75.0 - 100.0 76.0 - 100.0 77.0 - 100.0	277 6 284 7 224 7	65.6 71.8 73.1	59.4 - 71.8 65.8 - 77.8 66.6 - 79.5	19 72 18 78 21 65	72.5 43.8 - 100.0 78.8 54.0 - 100.0 65.2 51.1 - 79.3	0.0 0.0			525 724 783	74.9 78.5 79.7	70.3 - 79.4 75.0 - 82.1 76.0 - 83.3	109 114 34	71.3 71.5 68.9	61.8 - 80.8 62.2 - 80.7 57.1 - 80.8
2000-2004 1,465 92.9 90.3 - 95.6 2005-2009 1,996 95.3 93.5 - 97.0 2010-2014 1,198 96.8 94.3 - 99.3	6 268 95.4 0 364 97.8 3 188 97.8	90.8 - 100.0 94.7 - 100.0 93.5 - 100.0	501 6 652 6 411 6		64.3 - 73.5 63.3 - 71.3 54.0 - 66.8	144 71 164 75 83 82	71.9 63.0 - 80.8 79.0 71.9 - 86.1 82.8 74.0 - 91.5		58.6 565.5 39.2	33.7 - 83.4 46.1 - 84.9 10.1 - 68.3	1,049 1,167 659	81.1 82.8 84.6	78.3 - 84.0 80.3 - 85.4 80.5 - 88.6	274 300 130	81.0 85.6 80.6	75.2 - 86.8 80.6 - 90.7 72.3 - 88.9
2000-2004 4,549 33.7 92.6 - 94.9 2005-2009 6,319 95.7 94.8 - 96.6 2010-2014 9,437 95.9 95.1 - 96.7	9 496 99.2 6 732 99.3 7 1,041 96.3	96.7 - 100.0 97.4 - 100.0 92.6 - 99.9	1,509 7 2,077 7 2,375 7	71.9 71.4 74.2	69.0 - 74.8 68.8 - 74.0 71.8 - 76.6	103 8/ 125 81 155 8/	84.0 76.5 - 91.5 81.1 74.3 - 88.0 81.1 74.3 - 90.7 84.6 78.4 - 90.7	5 32 0 67 7 90	2 59.6 7 76.7 36.1	36.4 - 82.9 61.0 - 92.4 75.1 - 97.0	2,477 2,566 2,620	87.5 88.9 90.8	85.8 - 89.2 87.3 - 90.5 89.4 - 92.3	56 56 56	87.5 75.6 83.0	66.8 - 100.0 57.6 - 93.6 71.5 - 94.5
2000-2004 1,022 96.9 94.6 - 99.3 2005-2009 2,134 97.6 96.1 - 99.2 2010-2014 1,725 98.1 96.6 - 99.5	3 157 91.8 2 369 98.6 5 268 100.0	75.5 - 100.0 96.0 - 100.0 97.8 - 100.0	213 7 442 6 256 7	70.8 69.8 72.6	62.8 - 78.7 64.6 - 74.9 66.7 - 78.5	48 86 132 90 122 91	86.9 61.5 - 700.0 90.1 84.3 - 96.0 91.1 85.6 - 96.5	2.0 5 5	3 78.8	57.5 - 100.0	259 852 542	80.4 90.2 88.7	74.6 - 86.2 87.5 - 93.0 85.7 - 91.6	41 107 84	62.2 81.8 83.6	45.7 - 78.7 74.0 - 89.7 75.6 - 91.7

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oer of patients and age-standardised 5-year net survival (NS, %) with 95% confidence interval (95% CI): adults (15-99 years) diagnosed with melanoma of the skin by continent, country, morphology and

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ser of patients and age-standardised 5-year net survival (NS, %) with 95% confidence interval (95% CI): adults (15-99 years) diagnosed with melanoma of the skin by continent, country, morphology and of diagnosis (2000-2004, 2005-2009, 2010-2014)

	Supe	erficial s	Superficial spreading	Ľ	entigo	Lentigo maligna				Acra	Acral lentiginous	inous							Ö	ther me	Other melanoma
		melanoma	oma		mela	melanoma	Nodula	lar melanoma	loma	Ľ	melanoma		Desmop	astic m	Desmoplastic melanoma Malignant melanoma, NOS	Malignant	melan	oma, NOS	-	norphc	morphologies
	No. P	No. NS (%)	95% CI	No. P	No. NS (%)	95% CI	No. NS (5		95% CI	No. NS (%)		95% CI	No. NS (%)	(%)	95% CI	No. N	No. NS (%)	95% CI	No. N	No. NS (%)	95% CI
m * 2000-2004	15,962	97.5	95.5 - 99.5	2,142	98.0		5,109 73		68.6 - 77.6	519 81.7		73.8 - 89.5	155	36.5	1.9 - 71.1	15,485		76.1 - 82.2	951	951 70.3	61.1 - 79.5
2005-2009	25,047	97.4	96.8 - 97.9	3,254	98.0		6,925 74		73.2 - 75.8	714 79	79.7	75.9 - 83.5	225	83.3	76.8 - 89.8	17,094	82.1	81.4 - 82.8	1,189	84.4	81.8 - 87.1
2010-2014	37,002 97.5	97.5	97.1 - 98.0	4,940	4,940 97.4	95.6 - 99.3	8,735 74.9		73.7 - 76.2	1,033 78	78.5 74	74.8 - 82.1	373	82.3	75.3 - 89.3	15,586	84.3	83.6 - 85.1	895	85.0	82.1 - 87.9
2000-2004	18,244	97.4	96.8 - 97.9	3,523	98.6	97.5 - 99.7			77.8 - 80.8		78.1 7	71.5 - 84.6	805	84.6	81.3 - 87.8	19,244	88.5	87.9 - 89.1	2,574	93.2	91.8 - 94.7
2005-2009	24,151	97.5	97.0 - 97.9	5,186	97.9	96.9 - 98.9		79.5 78.	78.0 - 81.0	274 8;	82.3 7(76.6 - 88.0	918	84.9	81.8 - 88.1	17,740	87.9	87.3 - 88.5	2,384	93.2	91.7 - 94.7
2010-2014	26,279	97.5	97.1 - 98.0	4,376	98.3	97.3 - 99.2	4,643 80.	30.2 78.	78.6 - 81.8		81.2 7	75.6 - 86.8	894	84.8	81.4 - 88.2	13,506	87.2	86.4 - 87.9	2,539	94.1	92.6 - 95.6
000-2004		96.9	95.6 - 98.2	563	94.8	91.9 - 97.7			71.7 - 78.8		90.4 82	2.5 - 98.4		79.7	70.4 - 89.1	3,617	86.3	84.8 - 87.8	146	84.9	77.9 - 91.8
2005-2009	4,998	97.2	96.3 - 98.2	488	95.4	92.1 - 98.8	1,034 78		74.7 - 81.2	65 8(71.2 - 90.3	122	88.5 8	82.3 - 94.8	3,891	86.6	85.2 - 88.0	70	81.2	67.7 - 94.8
2010-2014	5,786	97.9	97.0 - 98.9	617	90.06	79.3 - 100.0		77.4 74.	74.2 - 80.6	100 7	77.4 68	68.5 - 86.3	134	89.9	83.9 - 95.8	3,523	87.0	85.6 - 88.5	129	81.6	73.9 - 89.3

overage of the national population

considered less reliable, because 15% or more of patients were (a) lost to follow-up or censored alive within five years of diagnosis (or if diagnosed in 2010 or later, before 31 December 2014), or (b) registered only from a death certificate or at autopsy, or (c) registered with .e., unknown year of bigmosis or unknown year of last vital status vital status vital status are not age-specific net survival estimates that are not age-standardised due to a low number of cases (less than 50), or where two or more age-specific net survival estimates could not be produced.

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	Germ	any (Lower	Saxony)	Sp	anish regis	tries‡		Norway	
	No. (%)	Model 1	Model 2	No. (%)	Model 1	Model 2	No. (%)	Model 1	Model 2
Superficial spreading	9,326 (58.9)	1.0	1.0	1,642 (39.8)	1.0	1.0	8,624 (54.0)	1.0	1.0
Lentigo maligna	1,305 (8.2)	0.2 (0.0-35.1)	0.1 (0.0-26.9)	232 (5.6)	0.4 (0.0-17.2)	0.4 (0.1-2.1)	478 (3.0)	0.3 (0.1-6.4)	0.5 (0.2-1.4)
Nodular	1,514 (9.6)	21.8 (14.7-32.3)	13.5 (9.6-18.9)	627 (15.2)	12.1 (8.1-18.1)	6.7 (4.8-9.3)	3,234 (20.3)	6.7 (5.7-7.9)	4.1 (3.6-4.8)
Acral lentiginous	341 (2.2)	15.2 (9.0-25.5)	10.8 (6.8-17.1)	138 (3.4)	9.0 (5.2-15.5)	5.0 (3.1-8.1)	91 (0.6)	1.7 (0.5-5.1)	2.2 (1.0-4.9)
Malignant melanoma, NOS	2,953 (18.7)	6.5 (4.3-9.9)	5.4 (3.8-7.6)	1,178 (28.6)	4.2 (2.8-6.4)	2.9 (2.0-4.0)	3,338 (20.9)	3.9 (3.3-4.7)	2.8 (2.4-3.3)
Other morphologies	385 (2.4)	8.6 (4.7-15.6)	6.5 (3.8-11.0)	307 (7.4)	5.6 (3.4-9.2)	3.7 (2.4-5.6)	201 (1.2)	4.5 (2.9-6.9)	2.4 (1.6-3.7)

Table 3. Excess hazard ratio of death in patients with malignant melanoma of the skin, by morphologic type (reference category superficial spreading melanoma) in Germany, Spain and Norway

Granada and Basque Country
 * National coverage
Model 1: only including morphology. Model 2: including morphology, sex, age and stage at diagnosis

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