Kidney Cancer
Fact Sheet

What is kidney cancer?

- Kidney cancer is formed in the nephrons – the tiny tubes of the kidney that filter blood and produce urine.
- In 2011, it was estimated that approximately 5,100 people would be diagnosed with kidney cancer, and 1,650 people would die from the disease.¹
- New Brunswick, Prince Edward Island, and Nova Scotia have some of the highest incidence rates of kidney cancer per capita in Canada.²
- Renal cell carcinoma (RCC) is the most common form of kidney cancer in adults, representing about 80 per cent of all kidney cancer.³
- Kidney cancer is considered advanced when the cancer has metastasized, or spread, beyond the primary cancer site. Metastatic cancer is often found in nearby lymph nodes and may spread to either kidneys or other organs or bones.⁴

What is the prognosis for kidney cancer?

- If caught early (in stage I), the relative five-year survival rate for RCC patients is approximately 67 per cent.⁵
- Unfortunately, because RCC is often asymptomatic, it can go undetected for years and is often diagnosed in an advanced stage, when the cancer has spread. Over a quarter of cases are diagnosed at stage IV, which is fatal for the vast majority of people.⁶
- The five year survival rate for a patient diagnosed with metastatic kidney cancer has traditionally been less than 10 per cent.⁷
- The introduction of newer, targeted therapies offers patients the chance to live much longer. Thanks to more kidney cancer research, new treatments and reimbursement for therapies, the mortality rate for kidney cancer has declined across all age groups, with the strongest declines among those aged 15-44 years.⁸

How is kidney cancer different from most other cancers?

Kidney cancer is unlike many other cancers in a number of ways:

Prevention: Although there is some link to smoking and obesity, lifestyle modifications have little effect on the risk of developing kidney cancer. Factors which can increase the risk of developing the disease include:⁹
- Age: RCC usually occurs over the age of 50
- Gender: Men are twice as likely as women to be affected
- Smoking: Smoking increases the risk of RCC – it has been a factor in up to 20 per cent of kidney cancer cases. The risk increases with the amount a person smokes, and there is evidence that exposure to second-hand smoke also increases risk.
- Hypertension and/or obesity
- Long-term dialysis
- Environmental toxins: exposure to coke (used in steel plants), heavy metals, organic solvents and asbestos
**Screening:** Currently there is no population-based screening method for early detection, like a colonoscopy for colon cancer or a mammogram for breast cancer.

**Symptoms:** Unlike many other cancers, kidney cancer is often asymptomatic, existing for many years without any signs and symptoms, and many patients are diagnosed at a late stage.\(^1\)
- Signs and symptoms could include:
  - Pain in the back and side that does not go away
  - A lump in the side or abdomen
  - Unexplained weight loss
  - Blood in the urine

It’s important to note that while these symptoms may indicate kidney cancer, they can often be a result of other non-cancerous diseases.\(^1\)

**Treatment:** Kidney cancer doesn’t usually respond to conventional therapies such as radiation and chemotherapy because of the location and basic filtering function of the kidneys. This makes the need for alternative, effective treatments very important for this disease.

**What treatment options are available for kidney cancer?**

The treatment options that are currently available include surgery (to remove the cancer) or targeted medications (to help shrink the tumours and prevent further spread of the disease).

Health Canada has approved five new targeted treatments for kidney cancer in the past five years. Like many other cancers, one treatment for kidney cancer most likely won’t be enough for most patients. Sequential treatment, starting with a second-line option, is often needed because the first medication will eventually stop working.

However, these treatments are not equally accessible across Canada. In New Brunswick, Prince Edward Island and Nova Scotia, kidney cancer patients only have access to one funded treatment. Newfoundland and Labrador recently joined Ontario, British Columbia, Alberta, and Saskatchewan, in reimbursing a second-line treatment.

Visit [www.kidneycancercanada.ca](http://www.kidneycancercanada.ca) to find out more about how Canadians with kidney cancer and their friends and family can make their voice heard by encouraging provincial governments to help make access to more than one treatment a reality for kidney cancer patients fighting their disease.

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References:

2. Ibid.
9. Ibid.
11. Ibid.