

Cancer: an overview

A guide for managers and human resources professionals

Almost 40% of new cancer cases in Australia occur in people of working age, so workplaces are often required to support employees affected by cancer. To help you create a cancer-friendly workplace, this fact sheet provides general information about cancer, its risk factors and current treatments. It also addresses some key myths about cancer.

What is cancer?

Cancer is a disease of the cells. Cells are the body's basic building blocks – they make up tissues and organs. The body constantly makes new cells to help us grow, replace worn-out tissue and heal injuries.

Normally, cells multiply and die in an orderly way, so that each new cell replaces one lost. Sometimes, however, cells become abnormal and keep growing. In solid tumours, the abnormal cells form a mass or lump called a tumour. In some cancers, such as leukaemia, the abnormal cells build up in the blood.

Not all tumours are cancer. Benign tumours tend to grow slowly and usually don't move into other parts of the body or turn into cancer. Cancerous tumours, also known as malignant tumours, have the potential to spread. They may invade nearby tissue, destroying normal cells. The cancer cells can break away and travel through the bloodstream or lymph vessels to other parts of the body.

The cancer that first develops in a tissue or organ is called the primary cancer. It is considered localised cancer if it has not spread to other parts of the body. If the primary cancer cells grow and form another tumour at a new site, it is called a secondary cancer or metastasis. A metastasis keeps the name of the original cancer (e.g. lung cancer that has spread to the bones is called metastatic lung cancer).

How common is cancer in Australia?

About 170,000 new cases of cancer will be diagnosed in Australia in 2024 (excluding basal and squamous cell carcinoma of the skin).¹



Almost **1 in 2 people** will be diagnosed with cancer by the age of 85.

The most common types of cancer are:

- breast
- prostate
- bowel (colorectal)
- melanoma
- lung.

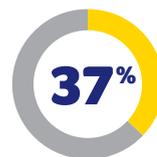


Together, these 5 cancers account for almost 60% of all cancers diagnosed in Australia.



Many cancers can be treated successfully, and more than **70%** of people diagnosed with cancer will still be alive 5 years after their treatment.

Cancer in the working population



A growing number of people are diagnosed with cancer while still in the workforce. About **37%** of people diagnosed with cancer are of working age (20–64).



Most people newly diagnosed are 65 years or older (63%) and may be retired, but their carer may be a family member or younger person in paid employment.

Cancer myths and facts

There are many misconceptions about cancer, and this can make it more challenging to manage in the workplace. Below we address some of the key myths about cancer and provide the facts.



Myth 	Fact 
There is no effective treatment for cancer	Cancer treatment greatly reduces the risk of cancer getting worse; many people lead a full and productive life after cancer treatment. In many cases, treatment causes all signs and symptoms of cancer to disappear.
A cancer diagnosis will always lead to death	Factors such as the type of cancer, how early it is diagnosed, and access to treatment, as well as a person's age, fitness and medical history, all affect how a person responds to treatment.
Surgery causes cancer to spread through the body	Specialist surgeons know how to take biopsy samples safely and remove tumours without causing cancer to spread. The surgeon may take out some healthy tissue around the cancer to ensure all the cancer cells are removed.
Radiation therapy makes people radioactive	Radiation can be delivered to the cancer from outside the body (external beam radiation therapy or EBRT) or from inside the body (brachytherapy). In EBRT, radiation does not stay in the body and the person will not be radioactive. It is safe for people to mix with co-workers, clients, children and pregnant women after EBRT. In brachytherapy, however, some people may be radioactive for a short time. Doctors will guide people on any precautions needed in the workplace.
Cancer is contagious	You can't "catch" cancer. It can't be transmitted from one person to another by breathing the same air or touching. Some contagious infections can increase the risk of developing cancer (e.g. human papillomavirus), but cancer itself is not contagious.
People with cancer are too ill to work	Some people are unable to work due to treatment side effects. Improvements in treatment, however, mean many people can work during treatment and recovery, and when living with advanced cancer, with the support of their employer. Some people find that working during treatment provides a sense of purpose and normality.
Injuries can cause cancer	Bumps, bruises or other injuries do not cause cancer. Sometimes, doctors may discover a tumour when they are treating a person for an injury, but it was not the injury that caused the cancer. Long-term inflammation may, at times, increase the risk of certain cancers, but this is rare.
Nothing can be done to prevent cancer	About 1 in 3 cases of cancer in Australia could be prevented if people changed certain behaviours. Simple steps to reduce the risk of cancer include: stopping smoking, protecting skin from the sun, drinking less alcohol, exercising more, maintaining a healthy weight, eating more fruit and vegetables, and cutting down on red and processed meat.
Thinking positively can cure cancer	There is little evidence to link a positive attitude with curing cancer. Cancer is not caused by negative thoughts, and treatment can be stressful and tiring. There is no right way to feel – experiencing a range of emotions is normal.

► Visit Cancer Council's iheard.com.au for more information about common misconceptions about cancer.

What are the risk factors?

The causes of many cancers are not fully understood. However, there are risk factors that may make some people more susceptible than others. These include:

- smoking tobacco/exposure to second-hand smoke
- exposure to UV radiation (e.g. from sunlight)
- drinking too much alcohol
- eating too much red and processed meat
- not eating enough fruit and vegetables
- carrying extra body weight
- lack of physical activity
- chronic infections, including the human papillomavirus (HPV) and hepatitis B or C
- family history
- hormonal factors
- exposure to hazardous substances, chemicals, dust or radiation (e.g. asbestos, uranium, benzene, coal tar, wood dust, diesel exhaust, lead, silica dust).

Having a risk factor doesn't necessarily mean that a person will get cancer. However, people who are aware of risk factors can sometimes make lifestyle changes to reduce their risk.

How is cancer treated?

Treatment for cancer is often successful if the cancer is found early. Most cancers are treated with surgery, chemotherapy and radiation therapy (radiotherapy). Other treatments, such as hormone therapy, immunotherapy and targeted therapy, can also be used for some types of cancer.

Treatments may be used alone or in combination. Many people will have several cycles of treatment over several weeks or months.

“The radiation therapy department was able to schedule sessions for first thing in the morning to fit in with my work schedule. The sessions were really quick and I was able to drive straight to work afterwards. As a working mum, being able to continue going to work was so beneficial ... having the support of my colleagues was invaluable.” ANNIE

Main types of cancer treatments

Surgery

A procedure performed by a surgeon to remove cancerous tissue and some healthy tissue around it. It may be a major, invasive operation or a relatively minor procedure.



Radiation therapy (radiotherapy)

The use of targeted radiation to kill or damage cancer cells so they cannot grow, multiply or spread. The radiation is usually in the form of x-ray beams.

Drug therapies

Drugs are given into the bloodstream so the treatment can travel throughout the body. This is called systemic treatment, and includes:

- **Chemotherapy** – This uses drugs to kill cancer cells or slow their growth. There are many different types of chemotherapy drugs. They are usually given through a vein (intravenously), but some may be given as tablets, cream or injections.
- **Hormone therapy** – This treatment blocks the body's natural hormones, which sometimes help cancers grow. Hormone therapy may be given as tablets or injections.
- **Immunotherapy** – This uses the body's own immune system to fight cancer. Immunotherapy drugs are usually administered into a vein (intravenously).
- **Targeted therapy** – This uses drugs to target specific features of cancer cells and stop the cancer growing and spreading. It is generally given in tablet form (orally).



Cultural considerations

A person's beliefs can influence their attitude towards cancer. Many cultures do not talk openly about cancer. This may affect how the employee or the employer responds to the diagnosis or shares information about cancer. Other points to keep in mind include:

- People may think that cancer is contagious, caused by bad luck or always fatal.
- In some cases, carers and family members may not tell the person with cancer about the diagnosis, believing that this information will hasten their decline.

- Some people may believe that cancer has been sent to test them or is a punishment.
- People with cancer may feel ashamed or fear being stigmatised in the workplace.
- While it's important to understand the impact of cultural or spiritual beliefs about cancer, don't assume that all people within a particular religion or culture practise the same rituals or have the same beliefs.



Side effects of treatment

Many people who have treatment for cancer experience side effects. These vary depending on the treatments given. Side effects also vary from person to person, even among people having the same treatment.

Side effects can occur during or after treatment. They may get better after a short time or last for a long time. Side effects sometimes develop many months, or even years, after treatment ends. These are called late effects.

As treatments have improved, more people are able to keep working throughout treatment with the support of their employers. Continuing to work may be important for some people because it helps to keep their lives as normal as possible. Other people may need some time off during treatment and recovery. Cancer or the treatment side effects may mean that some people need to stop working altogether.

Where to get help and information

Call Cancer Council 13 11 20 for more information about cancer in the workplace. You can request free copies of our booklets on cancer treatments and side effects, or download digital copies from your local Cancer Council website.

ACT	actcancer.org
NSW	cancercouncil.com.au
NT	cancer.org.au/nt
QLD	cancerqld.org.au
SA	cancersa.org.au
TAS	cancer.org.au/tas
VIC	cancervic.org.au
WA	cancerwa.asn.au
Australia	cancer.org.au

Workplace fact sheets – Other online fact sheets, such as *Talking to an employee about cancer* and *Creating cancer-friendly workplaces*, are available on your local Cancer Council website.

Acknowledgements

This fact sheet has been developed by Cancer Council NSW on behalf of all other state and territory Cancer Councils as part of a National Cancer Information Subcommittee initiative. We thank the expert and consumer reviewers of this fact sheet and also the experts, consumers and editorial teams who have worked on current and previous versions of this information.

[See our full list of expert and consumer reviewers.](#)

Note to reader

This fact sheet is intended as a general introduction and should not be seen as a substitute for medical, legal or financial advice. You should obtain

independent advice relevant to your specific situation from appropriate professionals. Information on cancer, including the diagnosis, treatment and prevention of cancer, is constantly being updated and revised by medical professionals and the research community. While all care is taken to ensure accuracy at the time of publication, Cancer Council Australia and its members exclude all liability for any injury, loss or damage incurred by use of or reliance on the information provided in this fact sheet.

Reference

1. Australian Institute of Health and Welfare (AIHW), *Cancer Data in Australia 2024*, AIHW, Canberra, viewed 21 August 2024, available from aihw.gov.au/reports/cancer/cancer-data-in-Australia.

This fact sheet is funded through the generosity of the people of Australia. To support Cancer Council, call your local Cancer Council or visit your local website.



Cancer Council acknowledges Traditional Custodians of Country throughout Australia and recognises the continuing connection to lands, waters and communities. We pay our respects to Aboriginal and Torres Strait Islander cultures and to Elders past, present and emerging.

