



Breast Cancer and Other Major Cancers Affecting Women in Canada

June 2026

Breast Cancer - Canada Statistics

Breast cancer is the most commonly diagnosed cancer among females in Canada, excluding non-melanoma skin cancers. In 2026, an estimated 32,400 women in Canada will be diagnosed with breast cancer, representing 26% of all new cancer cases in women. Breast cancer can also occur in men, but it is rare; an estimated 300 men in Canada will be diagnosed with breast cancer in 2026 (Canadian Cancer Society, n.d.-a).

Breast cancer is also one of the leading causes of cancer death among females in Canada. In 2026, an estimated 5,400 women in Canada will die from breast cancer, representing 13% of all cancer deaths in women (Canadian Cancer Society, n.d.-a).

Screening for Breast Cancer

Provincial and territorial breast screening programs use screening mammography. A mammogram is an x-ray image of the breast, and screening mammography is used to look for breast cancer before symptoms develop. The Canadian Cancer Society recommends that people aged 40 to 74 have a mammogram every 2 years. People aged 75 or older should talk to their healthcare provider about whether mammography is right for them (Canadian Cancer Society, n.d.-b).

Talk to your healthcare provider about which screening program is best for you and whether you should start screening earlier or screen more often if you are at higher risk. Higher-risk factors can include a strong family history of breast cancer, certain gene mutations such as BRCA1 or BRCA2, a personal history of lobular carcinoma in situ, ductal carcinoma in situ, invasive breast cancer or atypical hyperplasia, previous radiation therapy to the breast or chest, or dense breast tissue (Canadian Cancer Society, n.d.-b).

Lung Cancer - Canada Statistics

Lung and bronchus cancer is one of the most commonly diagnosed cancers in Canada, excluding non-melanoma skin cancers. In 2026, an estimated 32,900 people in Canada will be diagnosed with lung and bronchus cancer, representing 13% of all new cancer cases. Lung and bronchus cancer is the leading cause of cancer death in Canada, with an estimated 19,300 deaths in 2026, representing 22% of all cancer deaths (Canadian Cancer Society, n.d.-c).

Screening for Lung Cancer

Smoking tobacco is the main risk factor for lung cancer, although lung cancer can also develop in people who do not have known risks. The Canadian Cancer Society recommends lung cancer screening with a low-dose CT scan for people aged 55 to 74 who currently smoke tobacco or used to smoke tobacco (Canadian Cancer Society, n.d.-d).

Organized lung cancer screening programs are available in some provinces, and screening guidance may vary by province. People who may be eligible should talk to their healthcare provider about whether lung cancer screening is appropriate for them (Canadian Cancer Society, n.d.-d).

Colorectal Cancer - Canada Statistics

In 2026, an estimated 25,300 people in Canada will be diagnosed with colorectal cancer, representing 10% of all new cancer cases. An estimated 9,200 people in Canada will die from colorectal cancer, representing 10% of all cancer deaths (Canadian Cancer Society, n.d.-e).

Screening for Colorectal Cancer

If you are 45 to 74 and not at high risk for colorectal cancer, the Canadian Cancer Society recommends having a stool test every 2 years. If you are 75 or older and not at high risk, talk to your healthcare provider about whether a stool test is right for you (Canadian Cancer Society, n.d.-f).

Stool tests are used to screen for colorectal cancer by checking for hidden blood in the stool, which can be a sign of polyps or colorectal cancer. There is strong evidence that stool tests with appropriate follow-up can reduce deaths from colorectal cancer (Canadian Cancer Society, n.d.-g).

A colonoscopy is not usually recommended as a routine screening test for people who are not at high risk for colorectal cancer. People at higher risk may need testing earlier or more often and should talk to their healthcare provider about their personal risk. Higher-risk factors can include a parent, sibling or child with colorectal cancer, a personal history of colorectal cancer or polyps, inflammatory bowel disease such as ulcerative colitis or Crohn's disease, inherited conditions such as familial adenomatous polyposis or Lynch syndrome, or signs or symptoms of colorectal cancer (Canadian Cancer Society, n.d.-f).

Cervical Cancer - Canada Statistics

Cervical cancer starts in the cells of the cervix. The cervix is the narrow lower part of the uterus and connects the uterus to the vagina (Canadian Cancer Society, n.d.-h).

Cells in the cervix can change and no longer grow or behave normally. Some changes are non-cancerous, while others are precancerous. Precancerous conditions of the cervix are not cancer, but if they are not treated, they may become cervical cancer over time (Canadian Cancer Society, n.d.-i).

Screening for Cervical Cancer

Anyone with a cervix can get cervical cancer. If you have a cervix and have ever had sexual contact with anyone, the Canadian Cancer Society recommends regular cervical cancer screening by age 25. Sexual contact includes sexual intercourse, genital skin-to-skin contact and oral sex (Canadian Cancer Society, n.d.-j).

Depending on where you live in Canada, cervical cancer screening may use a Pap test or an HPV test. If an HPV test is used in your province, screening is recommended every 5 years until age 70. If a Pap test is used in your province, screening is recommended every 3 years until age 70. If you are 70 and have not had 3 negative Pap test results in the last 10 years, you should continue screening every 3 years until that is achieved (Canadian Cancer Society, n.d.-j).

People at higher-than-average risk may need a personal screening plan, which may include more frequent testing. Risk factors for cervical cancer include HPV infection, smoking, HIV infection, a history of sexually transmitted infections, long-term use of oral contraceptives, and exposure to diethylstilbestrol, also called DES (Canadian Cancer Society, n.d.-k).

Ovarian Cancer - Canada Statistics

In 2026, an estimated 3,000 women in Canada will be diagnosed with ovarian cancer, and an estimated 1,950 women will die from it (Canadian Cancer Society, n.d.-l).

Epithelial ovarian cancer is the most common type of ovarian cancer. The risks for other types of ovarian cancer are not as well known and may not be the same as those for epithelial ovarian cancer. Fallopian tube and primary peritoneal cancers share many of the same risks as epithelial ovarian cancer because they start in the same type of tissue (Canadian Cancer Society, n.d.-m).

Finding Ovarian Cancer Early

There is no routine population screening recommendation for ovarian cancer in the same way there is for breast, cervical or colorectal cancer. The Canadian Cancer Society advises regular

health checkups and seeing a doctor if you have symptoms or concerns. If you have a higher-than-average risk, you may need to see your doctor more often. Your doctor may discuss tests that can help find ovarian cancer early, including a pelvic exam, transvaginal ultrasound and a cancer antigen 125, or CA125, test (Canadian Cancer Society, n.d.-n).

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