# 2007 Georgia Program and Data Summary: **CANCER**



# Cancer is the second leading cause of death in Georgia.

# Comprehensive Cancer Control Program (CCCP)

The Georgia Comprehensive Cancer Control Program (CCCP) is part of a national effort launched by the Centers for Disease Control and Prevention (CDC) aimed at reducing cancer related morbidity and mortality. The CCCP supports a collaborative process through which a community and its partners pool resources to promote cancer prevention, improve cancer detection, increase access to health and social services, and reduce the burden of cancer. These efforts will contribute to reducing cancer risk, detecting cancers earlier, improving treatments, and enhancing survivorship and quality of life for cancer patients.

# Breast and Cervical Cancer Screening Program (BCCP)

The Georgia Breast and Cervical Cancer Screening Program (BCCP) was established in 1992 with funding from the Centers for Disease Control and Prevention (CDC) and the State of Georgia. It was an expansion of the Cervical Cancer Screening Program, which was established in 1965. The BCCP provides mammograms to low-income, uninsured women between the ages of 40-64 and Pap tests to women 18-64 years of age. Women with abormal results also receive diagnostic follow-up, case management services and referral to the Women's Health Medicaid Program if cancer is diagnosed.

The BCCP services are available in all 159 counties in Georgia and from selected non-public health providers in metro Atlanta. BCCP serves over 15,000 women each year.

# **Cancer State Aid (CSA)**

The Cancer State Aid Program funds cancer treatment services for eligible low-income uninsured cancer patients in Georgia. Established in 1937 by the Georgia legislature at the request of Georgia physicians, the program is available through participating treatment facilities statewide. Participating facilities agree to treat approved patients at cost. Physicians that agree to participate donate their services.

# Georgia Comprehensive Cancer Registry (GCCR)

The Georgia Comprehensive Cancer Registry (GCCR) is a statewide population-based cancer registry collecting data on all cancer cases diagnosed among Georgia residents since January 1, 1995. This information furthers our understanding of cancer and is used to develop strategies and policies for prevention, control, and treatment. The availability of this data at the state level allows health researchers to analyze geographic, racial, and other differences that point to cancer risk factors. It also helps to determine where early detection, educational, or other programs should be directed.

GCCR is a participant in the National Program for Cancer Registries (NPCR) that was established by the Centers for Disease Control and Prevention (CDC) in 1992 through the Federal Cancer Registry Amendment Act (Public Law 102-515).

The goals of the GCCR are:

- To collect information on all newly diagnosed cancer cases.
- To calculate cancer incidence rates for the state of Georgia.
- To make data available to the public and health care professionals.
- To identify and evaluate cancer incidence and mortality trends on an ongoing basis.
- To provide cancer incidence and mortality data to cancer control programs to assist in developing prevention strategies and evaluating their effectiveness.
- To stimulate cancer control research.

# Women's Health Medicaid Program (WHMP)

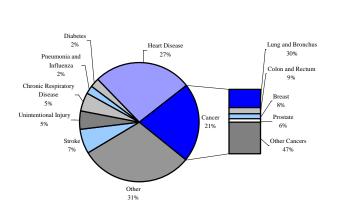
The Women's Health Medicaid Program (WHMP) is a partnership between the Georgia Department of Human Resources and the Georgia Department of Community Health to provide treatment for breast and cervical cancer and cervical pre-cancer to eligible women. WHMP was established in July 2001 by the National Breast and Cervical Cancer Prevention and Treatment Act of 2000 with matching funds appropriated through the Georgia Cancer Coalition.

# **ALL TYPES OF CANCER**

# **CANCER MORTALITY**

• Cancer is the **second** leading cause of death in Georgia.

Leading Causes of Death in Georgia, 2000-2004



- Nearly two-thirds of cancer deaths can be linked to modifiable risk factors such as tobacco use, diet, obesity, and lack of physical activity.
- The burden of cancer can be significantly reduced by appropriate use of mammography, colorectal screening, and by other early detection examinations and by preventing or stopping tobacco use, improving diet, and increasing physical activity.

### **CANCER INCIDENCE**

- During 2000-2004, an annual average of **34,500** cancer cases were diagnosed in Georgia.
- Breast, lung and bronchus, and colon and rectum cancers account for **55%** of all new cancer cases among females in Georgia.
- Breast cancer is the **leading** cause of cancer incidence among **females** in Georgia.
- Prostate, lung and bronchus, and colon and rectum cancers account for **57%** of all new cancer cases among males in Georgia.
- Prostate cancer is the **leading** cause of cancer incidence among **males** in Georgia.

#### Age-adjusted Cancer Incidence Rates by County, Georgia, 2000-2004



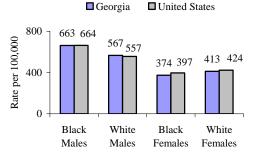
Rate significantly higher than the state rate\*

No significant difference in rate from the state rate\*

Rate significantly lower than the state rate\*

\*Age-adjusted cancer incidence rate for Georgia is 469 per 100,000 population.

#### Age-adjusted Cancer Incidence Rates by Race and Sex, Georgia vs. United States, 2000-2004



- Black males in Georgia are 17% more likely to be diagnosed with cancer than white males.
- White females are 10% more likely to be diagnosed with cancer than black females.

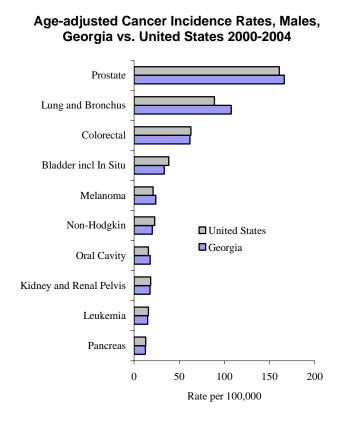
# WHO IS AT RISK FOR DEVELOPING CANCER?

Everyone. Since the occurrence of cancer increases as individuals age, most cancers affect adults who are middle-aged or older.

#### **2007 ESTIMATES**

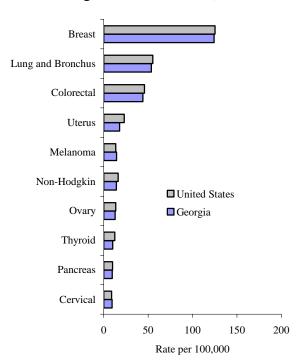
In 2007, at least **35,440 new** cancer **cases** will be diagnosed among Georgians: about **97** cases per day. More than **14,950** Georgians will **die** of cancer in 2007.

# LEADING CAUSES OF CANCER INCIDENCE IN GEORGIA



- The annual age-adjusted cancer incidence rate for males in Georgia is **576** per 100,000.
- Prostate cancer is the **leading** cause of cancer among Georgia males and accounts for **29%** of all new cancer cases among **males** each year.
- Prostate and lung and bronchus cancer incidence rates are **higher** among **Georgia males** than among U.S. males.
- Colorectal and bladder cancer incidence rates are **lower** among **Georgia males** than the U.S. males.

In Georgia, males are 44% more likely to be diagnosed with cancer than females.



- The annual age-adjusted cancer incidence rate for females in Georgia is **399** per 100,000.
- Breast cancer is the leading cause of cancer among Georgia females and accounts for 31% of all new cancer cases among females each year.
- Breast, lung and bronchus, colorectal, and uterine cancer incidence rates are **lower** among **Georgia females** than U.S. females.

#### **ESTIMATED COSTS**

 In Georgia, cancer costs in 2004 were approximately \$4.6 billion: \$1.7 billion for direct medical costs, \$406 million for indirect morbidity costs, and \$2.5 billion for indirect mortality costs.

In the U.S., males have a 1 in 2 lifetime risk of developing cancer. Females have a 1 in 3 lifetime risk.

#### Age-adjusted Cancer Incidence Rates, Females, Georgia vs. United States, 2000-2004

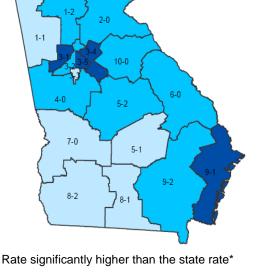
# **BREAST CANCER**

# Breast cancer is the most commonly diagnosed cancer among Georgia females.

# **BREAST CANCER**

- Breast cancer accounts for **31%** of all new cancer cases among females.
- Over **4,520** new cases of breast cancer will be diagnosed in Georgia in 2007.
- **One in eight** American females will develop breast cancer in her lifetime.
- White women are more likely to be diagnosed with breast cancer than black women; however, black women are more likely to die from the disease.

### Breast Cancer Incidence Rates, Females, by Health District, Georgia, 2000-2004

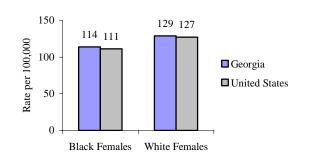


- No significant difference in rate from the state rate\*
- Rate significantly lower than the state rate\*

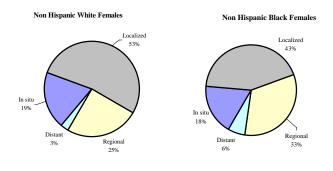
 $^{\ast}\mbox{Age-adjusted}$  breast cancer incidence rate among Georgia females is 124 per 100,000.

- The Northwest (1-1), Clayton (3-3), South Central (5-1), West Central (7-0), South (8-1), and Southwest (8-2) Health Districts have significantly **lower** breast cancer rates than the state average.
- The Cobb/Douglas (3-1), East Metro (3-4), DeKalb (3-5), and Coastal (9-1) Health Districts have significantly **higher** breast cancer rates than the state average.

#### Age-adjusted Breast Cancer Incidence Rates, Females, by Race, Georgia vs. United States, 2000-2004



#### Breast Cancer Incidence by Stage at Diagnosis, Non-Hispanic White and Black Females, Georgia, 2000-2004



# **RISK FACTORS**

- Personal or family history
- Age
- Race (White)
- Previous breast radiation
- Menstrual history (onset of menstrual cycle before age 12 or menopause after 55 years of age)
- Obesity
- Smoking
- Physical inactivity
- Alcohol consumption
- Never having children or having first child after age 30
- Recent use of oral contraceptives or postmenopausal estrogens

# PREVENTION

The best strategy is to avoid the modifiable risk factors: obesity, smoking, physical inactivity, and alcohol consumption.

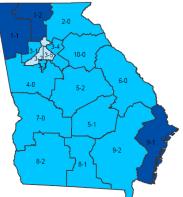
# LUNG CANCER

# Quitting smoking and avoiding secondhand smoke are the best strategies for preventing lung cancer.

# LUNG AND BRONCHUS CANCER

- Lung cancer is the most common cancer diagnosed in Georgia.
- Over **5,780** new cases of lung cancer will be diagnosed in Georgia in 2007.
- Lung cancer accounts for **16%** of all cancers.

#### Age-adjusted Lung Cancer Incidence Rates, Females, by Health District, Georgia, 2000-2004



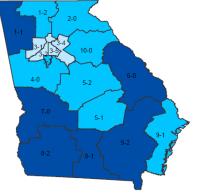
Rate significantly higher than the state rate\*

No significant difference in rate from the state rate\*

Rate significantly lower than the state rate\*

\*Age-adjusted lung cancer incidence rate among Georgia females is 54 per 100,000.

#### Age-adjusted Lung Cancer Incidence Rates, Males, by Health District, Georgia, 2000-2004



Rate significantly higher than the state rate\*

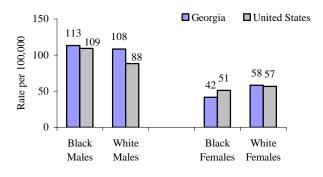
No significant difference in rate from the state rate\*

Rate significantly lower than the state rate\*

\*Age-adjusted lung cancer incidence rate among Georgia males is 107 per 100,000.

- The Northwest (1-1), North Georgia (1-2), and Coastal (9-1) Health Districts have significantly **higher** lung cancer incidence rates than the state average for **females**.
- The Fulton (3-2) and DeKalb (3-5) Health Districts have significantly **lower** lung cancer incidence rates than the state average for **females**.
- The Northwest (1-1), East Central (6), West Central (7), South (8-1), Southwest (8-2), and Southeast (9-2) Health Districts have significantly **higher** lung cancer incidence rates than the state average for **males**.
- The Cobb/Douglas (3-1), Fulton (3-2), East Metro (3-4) and DeKalb (3-5) Health Districts have significantly **lower** lung cancer incidence rates than the state average for **males**.

#### Age-adjusted Lung Cancer Incidence, by Race and Sex, Georgia vs. United States, 2000-2004



# **RISK FACTORS**

- Tobacco use (accounts for about 87% of lung cancers)
- Exposure to secondhand smoke
- Exposure to certain industrial substances such as arsenic, organic chemicals, radon, and asbestos
- Radiation exposure from occupational, medical, and environmental sources
- Air pollution

### PREVENTION

• Quitting smoking and avoiding secondhand smoke are the best strategies for preventing lung cancer.

### RESOURCE

• To get help to quit all forms of tobacco use call the Georgia Tobacco Quit Line at 1-877-270-STOP.

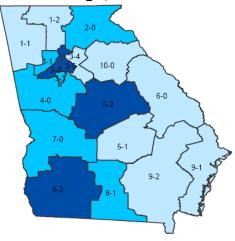
# **PROSTATE CANCER**

# Prostate cancer is the most commonly diagnosed cancer among Georgia men.

### **PROSTATE CANCER**

- Over **5,850** new cases of prostate cancer will be diagnosed in Georgia in 2007.
- Prostate cancer accounts for **29%** of all new cancer cases among males.
- The prostate cancer incidence rate among black males is **78%** higher than among white males in Georgia.
- **One in six** American males will develop prostate cancer in his lifetime.

#### Prostate Cancer Incidence Rates, by Health District, Georgia, 2000-2004



Rate significantly higher than the state rate\*

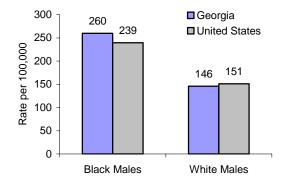
No significant difference in rate from the state rate\*

Rate significantly lower than the state rate\*

\*Age-adjusted prostate cancer incidence rate among Georgia males is 166 per 100,000.

- The Northwest (1-1), North Georgia (1-2), East Metro (3-4), South Central (5-1), East Central (6), Coastal (9-1), Southeast (9-2), and Northeast (10) Health Districts have significantly **lower** prostate cancer incidence rates than the state average.
- The Fulton (3-2), DeKalb (3-5) North Central (5-2), and Southwest (8-2) Health Districts have significantly **higher** prostate cancer incidence rates than the state average.

#### Age-adjusted Prostate Cancer Incidence Rate, Georgia vs. United States, 2000-2004



# **RISK FACTORS**

- Increasing age (about 90% of cases are diagnosed in males over age 55)
- Race (Black)
- Family history
- Obesity

### PREVENTION

There is no known way to prevent prostate cancer. Studies are underway to determine if early detection of prostate cancer will lower the prostate cancer death rate. Until that information is available, whether a man should undergo prostate screening is a decision that should be made after discussing the risks and the benefits with his physician.

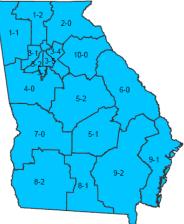
# **COLORECTAL CANCER**

# In Georgia, colorectal cancer is the third most common cancer diagnosed among males and females.

# COLORECTAL CANCER

• Over **3,690** new cases of colorectal cancer will be diagnosed in Georgia in 2007.

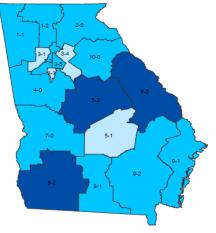




No significant difference in rate from the state rate\*

\*Age-adjusted colorectal cancer incidence rate among Georgia females is 44 per 100,000.

#### Age-adjusted Colorectal Cancer Incidence Rates, Males, by Health District, Georgia, 2000-2004



Rate significantly higher than the state rate\*

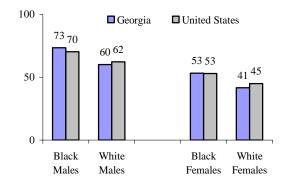
No significant difference in rate from the state rate\*

Significantly lower than the state rate\*

\*Age-adjusted colorectal cancer incidence rate among Georgia males is 62 per 100,000.

- None of the Health Districts have a significantly different colorectal cancer incidence rate than the state average for females.
- The Cobb/Douglas (3-1), Clayton (3-3), East Metro (3-4), and South Central (5-1) Health districts have significantly **lower** colorectal cancer incidence rates than the state average for **males**.
- The North Central (5-2), East Central (6) and Southwest (8-2) Health Districts have significantly **higher** colorectal cancer incidence rates than the state average for **males**.

#### Age-adjusted Colorectal Cancer Incidence Rate, by Race and Sex, Georgia vs. United States, 2000-2004



#### **RISK FACTORS**

- Age
- Personal/family history of colorectal cancer or polyps
- Smoking and alcohol consumption
- Physical inactivity
- High-fat and/or low-fiber diet
- Inadequate intake of fruits and vegetables
- Obesity

### PREVENTION

Colorectal cancer can be prevented by managing modifiable risk factors such as diet and physical activity, and by screening to enable detection and removal of precancerous polyps.

Data source: Georgia Comprehensive Cancer Registry (2000-2004) Date updated: August 2007 Publication number: DPH07.109HW Visit: <u>http://www.health.state.ga.us/programs/gccr/index.asp</u> for more information about cancer in Georgia.

# Cancer is the second leading cause of death in Georgia.

However, **30%** to **35%** of cancer deaths can be prevented by eating a healthy diet and being physically active. In 2005, the Georgia Department of Human Resources, in partnership with the Office of the Governor, launched the **Live Healthy Georgia** campaign. The purpose of this comprehensive statewide communications campaign is to raise awareness about the risk factors for most chronic diseases, including cancer, poor nutrition, lack of regular physical activity, and use of tobacco products. Using five key messages, the campaign focuses on how to reduce those risk factors: eat healthy, be active, be smoke free, get checked, and be positive.



#### Eat healthy.

A healthy eating plan is one that emphasizes fruits, vegetables, whole grains, fat-free or lowfat milk and milk products; and includes lean meats, poultry, fish, beans, eggs, and nuts; and is low in saturated fats, trans fats, cholesterol, salt (sodium), and added sugars.

#### Be active.

Participating in regular physical activity can help to reduce many risk factors for chronic diseases, including obesity and high blood pressure.

### Be smoke free.

Tobacco use is a leading, preventable risk factor for many chronic diseases. Approximately 11,000 Georgians die each year from tobacco-related illnesses.

### Get checked.

Undergoing routine physical check-ups and screenings can prevent some chronic diseases and detect other chronic diseases earlier when treatment may be more effective.

#### Be positive.

A positive attitude contributes to your overall well-being.

If Georgians follow these guidelines, they can greatly reduce their chances of developing a chronic disease, leading to an improved quality of life and reduced healthcare costs. Everyone benefits!

# For more information about the Live Healthy Georgia campaign:

Phone: 404-657-6602 Website: http://www.livehealthygeorgia.com E-mail: <u>livehealthygeorgia@dhr.state.ga.us</u>

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