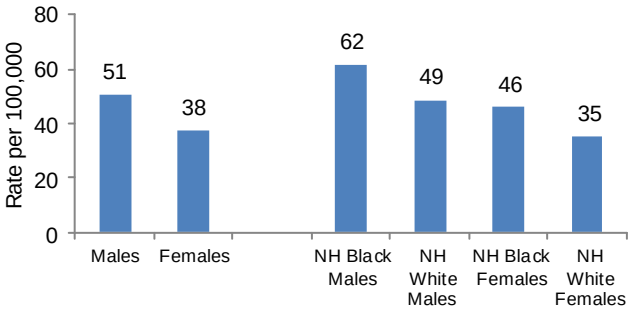
COLORECTAL CANCER

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

COLORECTAL CANCER INCIDENCE IN GEORGIA

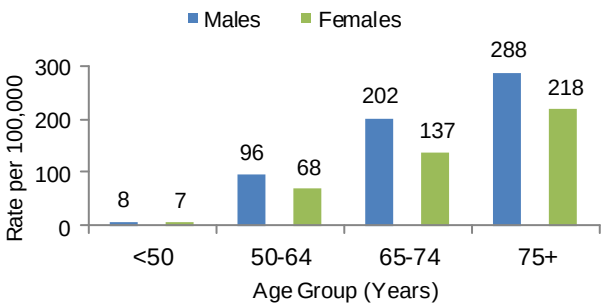
- Colorectal cancer is the third-most commonly diagnosed cancer among Georgia males and females.
- Nearly 4,000 new colorectal cancer cases are diagnosed each year.

Age-adjusted Colorectal Cancer Incidence Rate, by Sex and Race/Ethnicity, Georgia, 2007-2011



- From 2007-2011, 19,440 colorectal cancers were newly diagnosed in Georgia with an age-adjusted rate of 43/100,000 population.
- Males (51/100,000) had a higher age-adjusted incidence rate than females (38/100,000).
- Non-Hispanic (NH) Black males had a higher age-adjusted colorectal cancer incidence rate (62/100,000) than NH White males (49/100,000).
- NH Black females had a higher age-adjusted colorectal cancer incidence rate (46/100,000) than NH White females (35/100,000).

Age-specific Colorectal Cancer Incidence Rate, by Sex, Georgia, 2007-2011

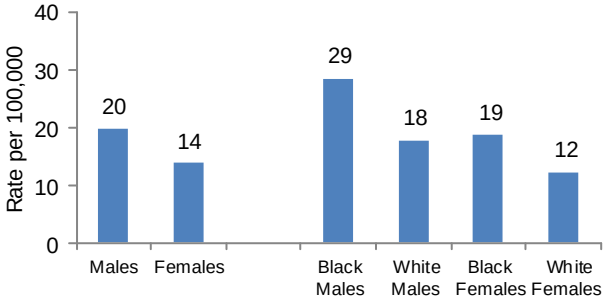


- Males have higher incidence rates of colorectal cancer among all age groups.
- The incidence rates of colorectal cancer increase with age for both males and females.
- The risk of being diagnosed with colorectal cancer increases sharply after age 64 years for both males and females.

COLORECTAL CANCER MORTALITY IN GEORGIA

- Colorectal cancer is the third most common cause of cancer death among Georgia males and females.
- Nearly 1,400 deaths due to colorectal cancer occur each year.

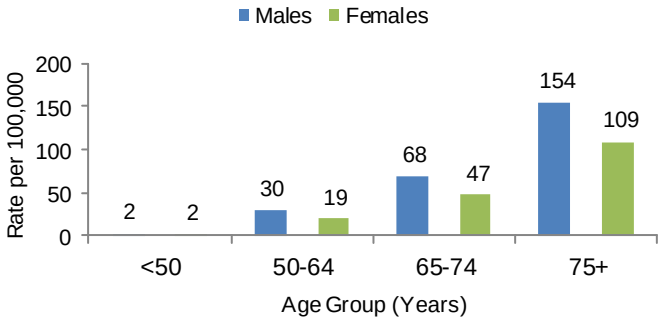
Age-adjusted Colorectal Cancer Mortality Rate, by Sex and Race, Georgia, 2006-2011*



*Note: 2009 death data were excluded from the analysis due to data reliability

- From 2006-2011, 6,885 Georgians died due to colorectal cancer.
- An average of 1,377 deaths occurred each year; of these, 711 deaths were among males and 666 deaths were among females.
- Males (20/100,000) had a higher age-adjusted death rate than females (14/100,000).
- Black males had the highest age-adjusted colorectal cancer death rate (29/100,000).

Age-specific Colorectal Cancer Mortality Rate, by Sex, Georgia, 2006-2011*

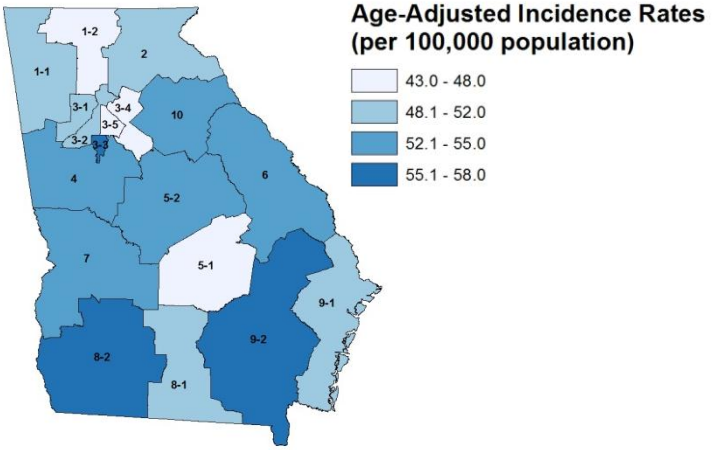


*Note: 2009 death data were excluded from the analysis due to data reliability

- Males have higher mortality rates of colorectal cancer among all age groups.
- The mortality rates of colorectal cancer increase with age for both males and females.
- The risk of dying from colorectal cancer increases sharply after age 64 years for both males and females.

COLORECTAL CANCER INCIDENCE

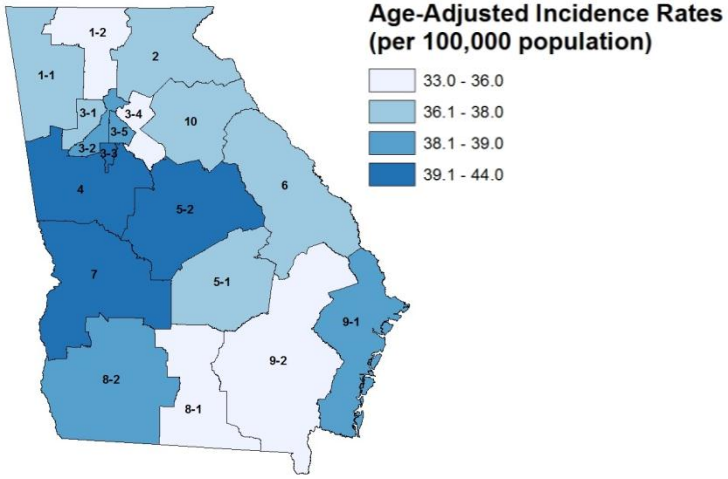
Age-adjusted Colorectal Cancer Incidence Rates Among Males, by Health District, Georgia, 2007-2011



According to data from the Georgia Comprehensive Cancer Registry, during 2007-2011:

- The Southwest (8-2), Southeast (9-2), and Clayton (3-3) Public Health Districts had the highest age-adjusted colorectal cancer incidence rates among males.
- The North Georgia (1-2), East Metro (3-4), DeKalb (3-5), and South Central (5-1) Public Health Districts had the lowest age-adjusted colorectal cancer incidence rates among males.

Age-adjusted Colorectal Cancer Incidence Rates Among Females, by Health District, Georgia, 2007-2011

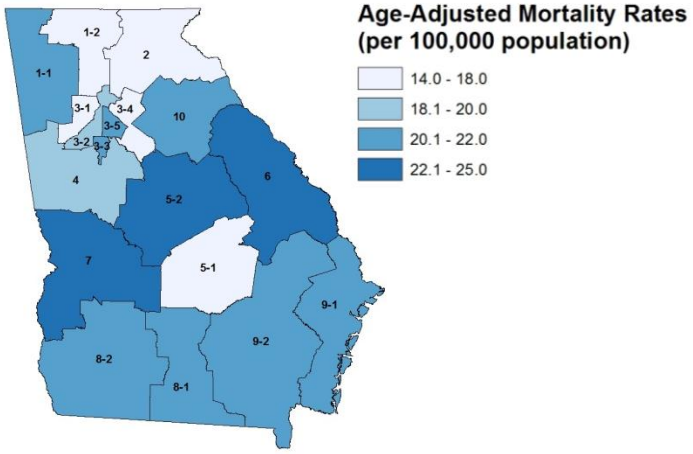


According to data from the Georgia Comprehensive Cancer Registry, during 2007-2011:

- The West Central (7), Clayton (3-3), and North Central (5-2) Public Health Districts had the highest age-adjusted colorectal cancer incidence rates among females.
- The North Georgia (1-2), Southeast (9-2), East Metro (3-4), and South (8-1) Public Health Districts had the lowest age-adjusted colorectal cancer incidence rates among females.

COLORECTAL CANCER MORTALITY

Age-adjusted Colorectal Cancer Mortality Rates Among Males, by Health District, Georgia, 2006-2011*

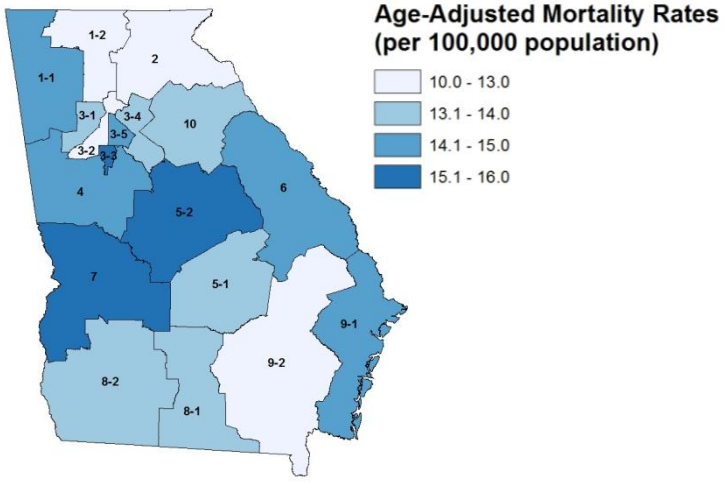


*Note: 2009 death data were excluded from the analysis due to data reliability

According to data from the Georgia Comprehensive Cancer Registry, during 2006-2011:

- The East Central (6), West Central (7), and North Central (5-2) Public Health Districts had the highest age-adjusted colorectal cancer death rates among males.
- The North Georgia (1-2), South Central (5-1), Cobb-Douglas (3-1), and North (2) Public Health Districts had the lowest age-adjusted colorectal cancer death rates among males.

Age-adjusted Colorectal Cancer Mortality Rates Among Females, by Health District, Georgia, 2006-2011*

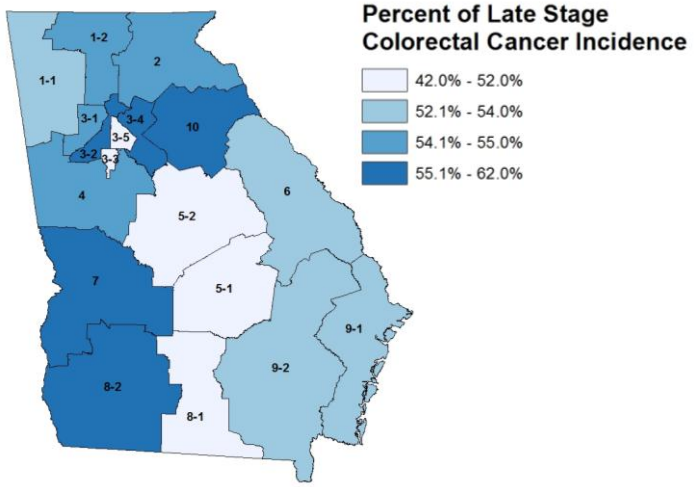


*Note: 2009 death data were excluded from the analysis due to data reliability

According to data from the Georgia Comprehensive Cancer Registry, during 2006-2011:

- The West Central (7), North Central (5-2), and Clayton (3-3) Public Health Districts had the highest age-adjusted colorectal cancer death rates among females.
- The North Georgia (1-2), North (2), Fulton (3-2), and Southeast (9-2) Public Health Districts had the lowest age-adjusted colorectal cancer death rates among females.

Late Stage Colorectal Cancer Incidence Among Males, By Health District, Georgia, 2007-2011

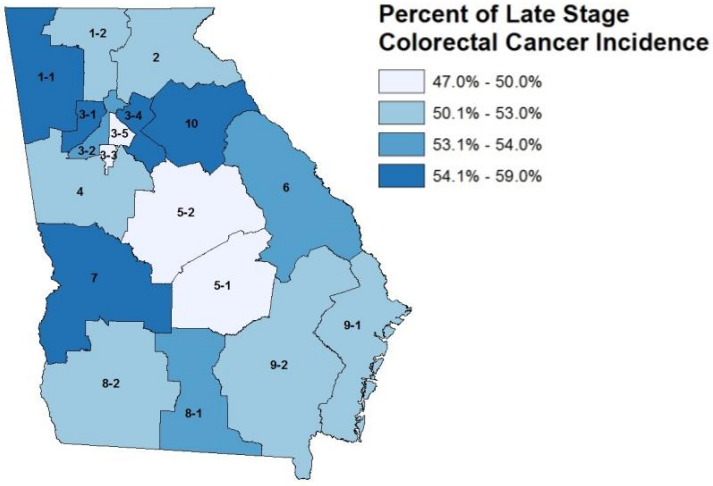


Late Stage is defined as regional or distant at time of diagnosis

According to data from the Georgia Comprehensive Cancer Registry, during 2007-2011:

- The Northeast (10), West Central (7), and East Metro (3-4) Public Health Districts had the highest percentage of adult males who were diagnosed with late stage (regional or distant) colorectal cancer.
- The North Central (5-2), South Central (5-1), DeKalb (3-5), and South (8-1) Public Health Districts had the lowest percentage of adult males who were diagnosed at late stage.

Late Stage Colorectal Cancer Incidence Among Females, By Health District, Georgia, 2007-2011



Late Stage is defined as regional or distant at time of diagnosis

According to data from the Georgia Comprehensive Cancer Registry, during 2007-2011:

- The Northeast (10), West Central (7), and East Metro (3-4) Public Health Districts had the highest percentage of adult females who were diagnosed at late stage.
- The South Central (5-1), Clayton (3-3), North Central (5-2), and DeKalb (3-5) Public Health Districts had the lowest percentage of adult females who were diagnosed at late stage.

RISK FACTORS FOR COLORECTAL CANCER

- Older age
- Diet
- Obesity
- Personal/family history of colorectal cancer or polyps
- Smoking and alcohol consumption
- Physical inactivity

PREVENTION

The National Cancer Institute says that 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.

SCREENING GUIDELINES

Screening is the process of looking for cancer in people who have no symptoms of colorectal cancer. Beginning at age 50 and continuing until age 75, both men and women at average risk for developing colorectal cancer should be screened for colorectal cancer using one of the examination schedules below.

Tests that are used to screen for colorectal cancer can be divided into two groups with different schedules:

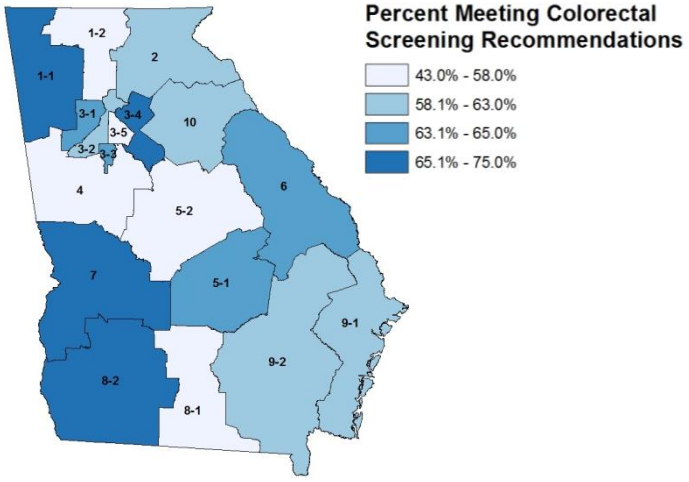
Tests that find both colorectal polyps and cancer:

- Sigmoidoscopy — every 5 years
- Standard Colonoscopy — every 10 years

Tests that find cancer:

- High-sensitivity fecal occult blood test (FOBT) — every year
- Fecal immunochemical test (FIT) — every year

Prevalence (%) of Colorectal Cancer Screening Among Adults 50-75 Years of Age, By Health District, Georgia, 2011



The Colorectal Cancer Screening Recommendation is defined as the percent of adults who had a FOBT in the last year, and/or sigmoidoscopy in the last 5 years, and/or colonoscopy in the last 10 years.

NOTE: Public Health Districts with small sample sizes of <50 include Clayton (3-3) and Southeast (9-2).

According to the Georgia 2011 Behavioral Risk Factor Surveillance System Data:

- The Southwest (8-2), East Metro (3-4), and Northwest (1-1) Public Health Districts had the highest percentage of adults who met the recommendation for colorectal cancer screening.
- The North Georgia (1-2), North Central (5-2), LaGrange (4), and South (8-1) Public Health Districts had the lowest percentage of adults who met the recommendation for colorectal cancer screening.

Data Sources: Georgia Comprehensive Cancer Registry (2007-2011); Behavioral Risk Factor Surveillance System (2011); Georgia Vital Records Program (2006-2011)*
Date updated: December 2014
Visit http://dph.georgia.gov/georgia-comprehensive-cancer-registry for more information about cancer in Georgia.