



Mahoning County

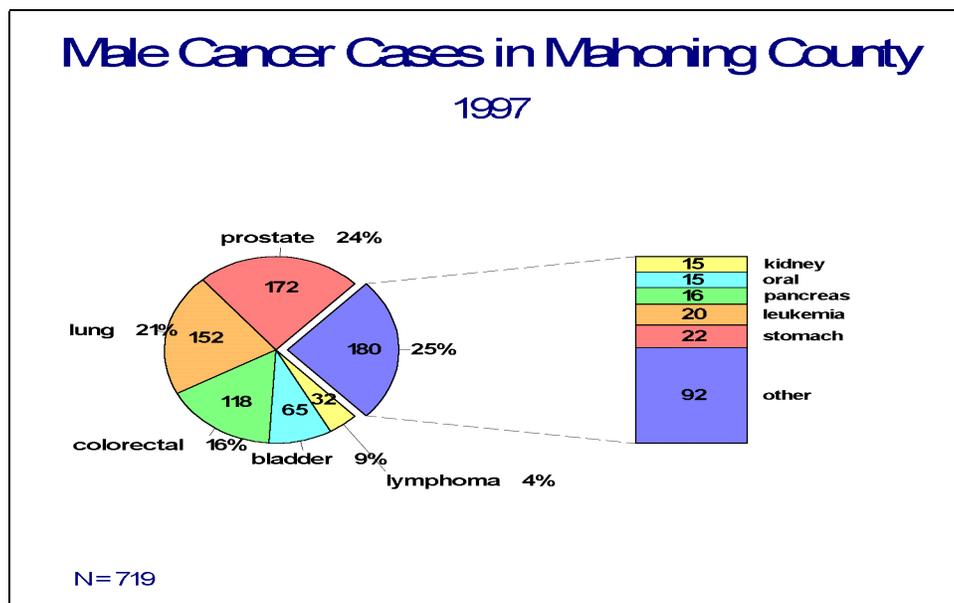
DISTRICT BOARD OF HEALTH

CANCER IN MAHONING COUNTY

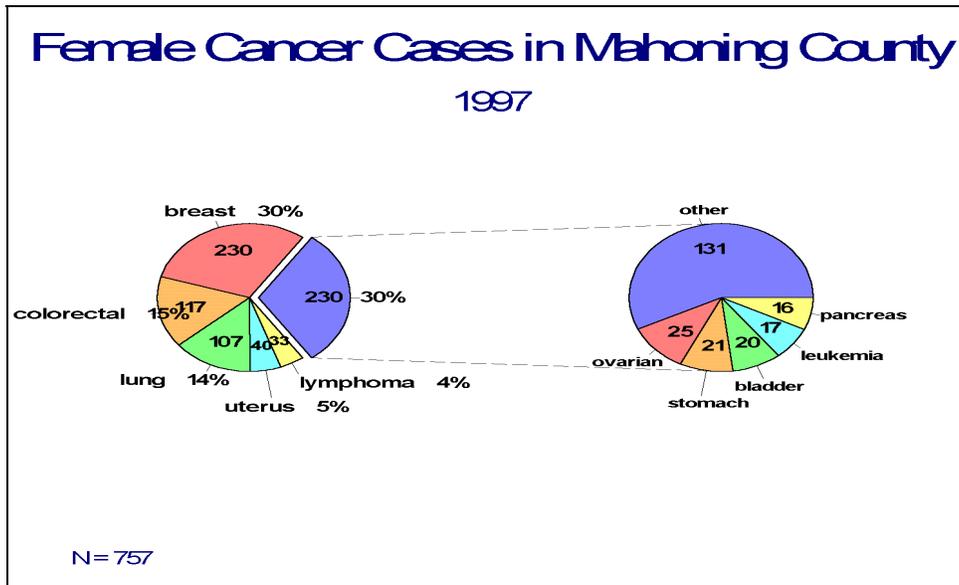
Tracking Cancer Rates

Cancer has been a reportable disease in Ohio since 1992, when the Ohio legislature created the Ohio Cancer Incidence Surveillance System (OCISS) at the Ohio Department of Health. All physicians and hospitals are required to report each new case of cancer diagnosed in an Ohio resident. More than 50,000 new cases in Ohio were reported to OCISS in 1997. Among its many benefits to Ohioans, OCISS enables communities to monitor trends in cancer incidence and target cancer screening programs to those persons at greatest risk for disease. For example, OCISS data can help a community tell which groups of women are more likely to be diagnosed with breast cancer in its later stages. Community outreach programs can then target women by age, ethnicity or geography to improve early detection and treatment of breast cancer.

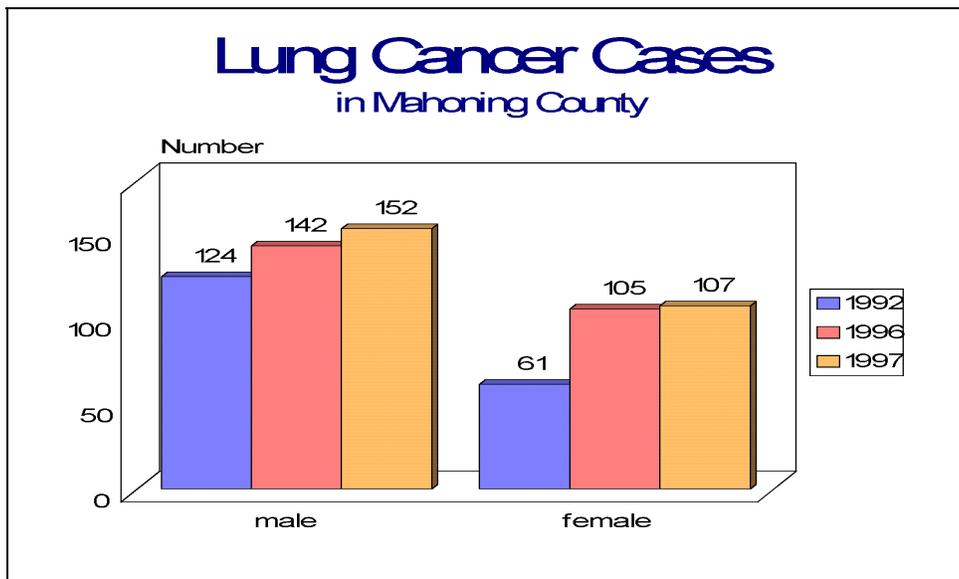
A total of 1,506 new cases of invasive cancer were reported to OCISS from Mahoning County in 1997.ⁱ The age-adjusted rate of cancer in Mahoning County (380.6 per 100,000 population) was slightly higher than the rate for Ohio (376.6 per 100,000). *Prostate* cancer was the most common cancer in men, accounting for 24 percent of all 719 new male cancer cases.



Breast cancer was the most common cancer for women in Mahoning County in 1997, accounting for 30 percent of the 757 female cancer cases. Almost 60 percent of all cancer cases in Mahoning County were breast, prostate, lung, or colorectal cancers, cancers that are preventable or curable if detected in their early stages.

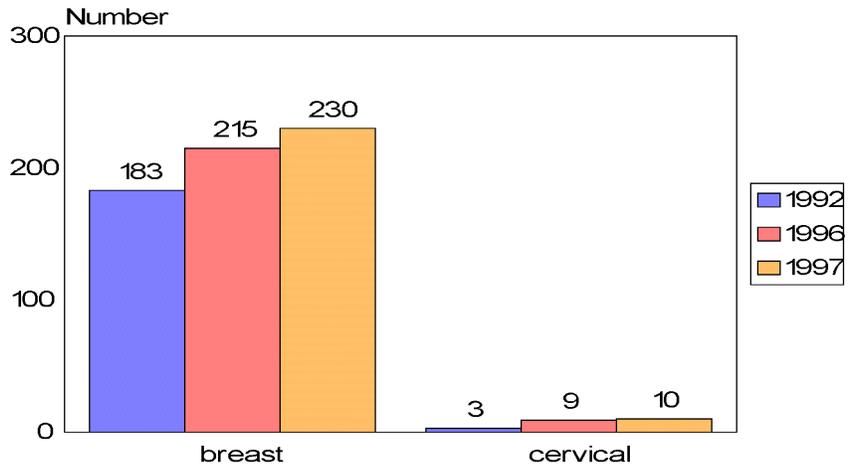


The number of cancer cases reported in 1997 from Mahoning County was 10 percent higher than in 1992 (the first reporting year). The number of lung, breast, and colorectal cancers all increased over this five-year period. Among the major cancers, only prostate cancer declined over this period.



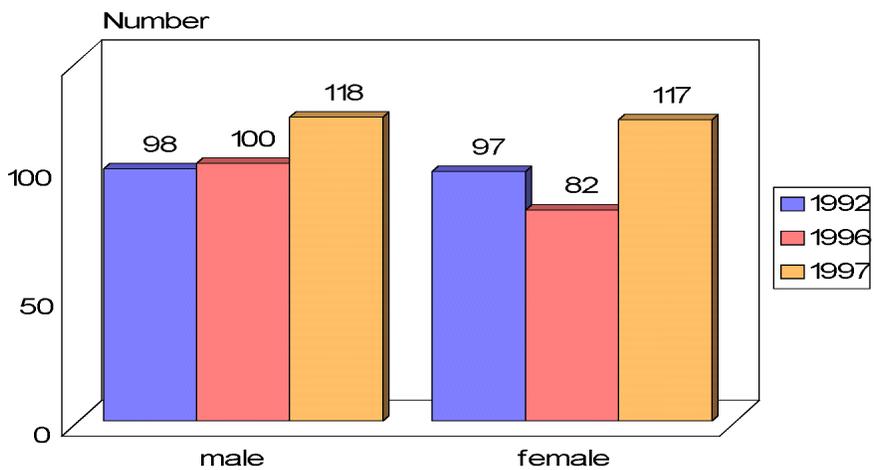
Lung cancer has increased faster among women than men in Mahoning County

Invasive Female Breast and Cervical Cancer Cases in Mahoning County

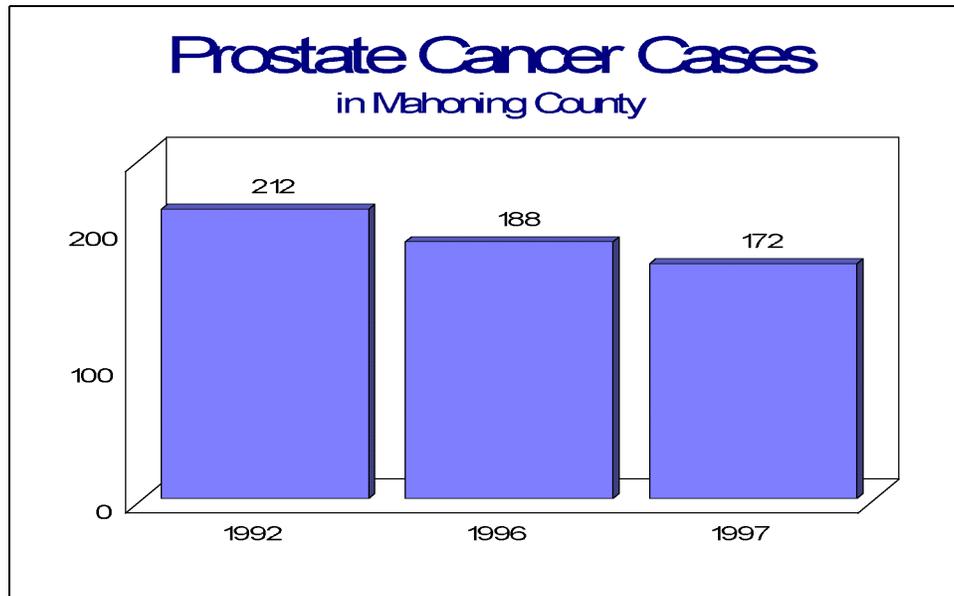


Breast and cervical cancer have both increased among women in Mahoning County

Invasive Colorectal Cancer Cases in Mahoning County



Colorectal cancer numbers are nearly equal among men and women in Mahoning County



Prostate cancer alone among the major types of cancer decreased in Mahoning County

These numbers do not necessarily mean that cancer incidence is increasing in Mahoning County. Not all cases of cancer are reported as required by law. The Ohio Department of Health estimates that only 89.8 percent of cancer cases in Ohio were reported to OCISS in 1997, an increase from the estimated 88.6 percent reported in 1996.ⁱⁱ Better compliance with cancer reporting requirements, identification of more cancer cases through screening and detection programs, as well as real changes in cancer incidence, are all factors involved in the number of cancers cases reported to OCISS each year. As improvements in information technology make cancer reporting easier in the years ahead, OCISS data will become accessible sooner to Ohio communities for monitoring cancer and the effectiveness of cancer control programs.

Cancer Deaths

Cancer is second only to heart disease as a leading cause of death for residents of Mahoning County. The most common forms of cancer reported to OCISS are also the leading causes of cancer death among Mahoning County residents, as the following information from 1997 death records shows. Lung cancer accounted for 28 percent of all 759 cancer deaths in Mahoning County, followed by colorectal cancer at 11 percent. Breast cancer accounted for 17 percent of all female cancer deaths and prostate cancer accounted for 11 percent of all male cancer deaths. The age-adjusted cancer death rate in Mahoning County (177.9 per 100,000 population) was slightly higher than the rate for Ohio in 1997 (173.9 per 100,000).

<i>Leading Types of Cancer Deaths in Mahoning County in 1997</i>				
<u>Women</u>	<u># deaths</u>	<u>Men</u>	<u># deaths</u>	<u>Total # deaths</u>
1. Lung Cancer	86	1. Lung Cancer	130	216
2. Breast	64	2. Colon	43	84
3. Colon	41	3. Prostate	43	43

Cancer Risk Factors and Cancer Screening

Tobacco use is the single most important preventable cause of death and disease in the United States. Cigarette smoking causes or contributes to 30 percent of all cancer deaths. More than 87 percent of lung cancer deaths are attributed to cigarette smoking or exposure to secondhand smoke.

Breast cancer is the most common form of cancer among women and the second leading cause of cancer deaths in women. The American Cancer Society has estimated that one woman in every eight will develop breast cancer in her lifetime. Deaths due to breast cancer can be reduced by 30 percent among women aged 50 and older through the use of mammography and clinical breast examination.

Colorectal cancer is one of the three leading causes of death due to cancer in both men and women. Fecal occult blood testing, digital rectal examination and proctosigmoidoscopy have the potential to increase early detection of colon and rectal cancer, improve survival rates, and decrease colorectal cancer deaths.

Healthy People 2000 sets out national health objectives for reducing risk factors for cancer and improving cancer screening and detection rates. The District Board of Health Behavioral Risk Factor Surveillance Survey (BRFSS) of Mahoning County residents conducted every 5 to 7 years provides information about local progress toward reducing personal risk factors for cancer and increasing adherence to cancer screening recommendations.

Healthy People 2000 Tobacco Control and Cancer Screening Objectives

16.6 Reduce cigarette smoking to a prevalence of no more than 15 percent among people aged 20 and older.

- *19 percent of Mahoning County adults were cigarette smokers in 1993*

3.8 Reduce to no more than 20 percent the proportion of children aged 6 and younger who are regularly exposed to tobacco smoke at home

- *23 percent of children in Mahoning County ages 6 and younger were exposed to tobacco smoke at home in 1996*
- *36.7 percent of adults in Mahoning County did not have restrictions on smoking in their workplaces in 1993*

16.10 Increase to at least 75 percent the proportion of primary care providers who routinely counsel patients about tobacco use cessation, diet modification, and cancer screening recommendations.

16.11 Increase to at least 80 percent the proportion of women aged 40 and older who have ever received a clinical breast examination and a mammogram, and to at least 60 percent those aged 50 and older who have received them within the preceding one to two years.

- *19.5 percent of women 40 or older in Mahoning County had never had a mammogram in 1993*
- *29.4 percent of women 40 or older in Mahoning County had not had a mammogram within the past two years in 1993*

16.12 Increase to at least 95 percent the proportion of women aged 18 and older with a uterine cervix who have ever had a Pap test, and to at least 85 percent those who received a Pap test within the preceding one to three years.

- *4.1 percent of women 18 or older in Mahoning County had never had a Pap test in 1993*
- *18.7 percent of women 18 or older in Mahoning County had not had a Pap test within the past three years in 1993*

16.13 Increase to at least 50 percent the proportion of people aged 50 and older who have received fecal occult blood testing within the preceding one to two years, and to at least 40 percent those who have ever received a proctosigmoidoscopy.

- *63.5 percent of Mahoning County adults 50 or older had never had a proctoscopic exam in 1993*
- *66.2 percent of Mahoning County adults 50 or older had not had a digital rectal exam within the last year in 1993*

16.14 Increase to at least 40 percent the proportion of people aged 50 and older visiting a primary care provider in the preceding year who have received oral, skin, and digital rectal examinations during one such visit.

- *39.7 percent of Mahoning County adults had not had a medical checkup in the past year in 1993*

Changing personal behavioral habits with regard to tobacco usage can have a tremendous impact on the number of deaths due to lung cancer in Mahoning County. Early detection of cancer through periodic screening by health care providers can increase the likelihood of surviving breast, prostate, colon, and other forms of cancer. The Ohio Cancer Incidence Surveillance System and Mahoning County Behavioral Risk Factor Surveillance Survey are important tools for measuring the impact of cancer prevention and control efforts in Mahoning County.

For more information:

Cancer Incidence Among Ohio Residents, 1992. Ohio Cancer Incidence Surveillance System, Ohio Department of Health.

Cancer Incidence in Ohio: 2000 Status Report. Ohio Cancer Incidence Surveillance System, Ohio Department of Health.

Behavioral Risk Factors for Disease and Injury in Mahoning County Adults: 1993 Survey Results. <http://www.mahoning-health.org/reports/1993survey.htm>.

Environmental Health Risks for Disease and Injury in Mahoning County Homes, 1996. <http://www.mahoning-health.org/reports/1996survey.htm>

ⁱ Non-invasive (*in situ*) bladder cancers are also included in this number in accordance with North American Association of Central Cancer Registries standards

ⁱⁱ Based on the estimated number of cases expected from the National Cancer Institute's Surveillance, Epidemiology, and End Results (SEER) Program

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