U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

# Annual Report to the Nation on the Status of Cancer, 1975-2009

#### National Cancer Institute Surveillance Research Program

#### NCAB Feb 8, 2013

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Report to the Nation 1975-2009 Focus: Burden & Trends in HPV-Associated Cancers and HPV Vaccination Coverage Levels



- Journal of the National Cancer Institute
  - ePub: Jan 7, 2013 4 pm embargo; Print Issue 3, Feb 2013
- Special Feature (Dr. Lowy)
  - Trends of HPV associated cancers
  - Prevalence of HPV vaccination coverage & Pap testing
- Coordinated & shared responsibility since 1998
  - National Cancer Institute (NCI)
  - Centers for Disease Control & Prevention (CDC)
  - American Cancer Society (ACS)
  - North American Association of Central Cancer Registries (NAACCR)
- ACS (lead)
  - Also: Cancer Statistics, 2013 published in January

#### ACS Cancer Facts & Figures 2013

1,660.290 estimated new cases in 2013

CA Cancer J Clin 2013;63:11-30. © 2013 American Cancer Society.

Cancer Statistics, 2013

Rebecca Siegel, MPH<sup>1</sup>; Deepa Naishadham, MA, MS<sup>2</sup>; Ahmedin Jemal, DVM, PhD<sup>3</sup>

CA CANCER J CLIN 2013;63:11-30

> 580,350 estimated deaths in 2013

 Long-term cancer mortality trends (1930-2009)

Regional variation in cancer rates

#### Based on NCI SEER website:

Probably of developing invasive cancers

Stage at diagnosis

> 5-year relative survival rates

Cancer occurrence by race/ethnicity Each year, the American Cancer Society estimates the numbers of new cancer cases and deaths expected in the United States in the current year and compiles the most recent data on cancer incidence, mortality, and survival based on incidence data from the National Cancer Institute, the Centers for Disease Control and Prevention, and the North American Association of Central Cancer Registries and mortality data from the National Center for Health Statistics. A total of 1,660,290 new cancer cases and 580,350 cancer deaths are projected to occur in the United States in 2013. During the most recent 5 years for which there are data (2005-2009), delay-adjusted cancer incidence rates declined slightly in men (by 0.6% per year) and were stable in women, while cancer death rates decreased by 1.8% per year in men and by 1.5% per year in women. Overall, cancer death rates have declined 20% from their peak in 1991 (215.1 per 100,000 population) to 2009 (173.1 per 100,000 population). Death rates continue to decline for all 4 major cancer sites (lung, colorectum, breast, and prostate). Over the past 10 years of data (2000-2009), the largest annual declines in death rates were for chronic myeloid leukemia (8.4%), cancers of the stomach (3.1%) and colorectum (3.0%), and non-Hodgkin lymphoma (3.0%). The reduction in overall cancer death rates since 1990 in men and 1991 in women translates to the avoidance of approximately 1.18 million deaths from cancer, with 152,900 of these deaths averted in 2009 alone. Further progress can be accelerated by applying existing cancer control knowledge across all segments of the population, with an emphasis on those groups in the lowest socioeconomic bracket and other underserved populations. **CA Cancer J Clin 2013;63:11-30.** <sup>©</sup>2013 **American Cancer Society.** 

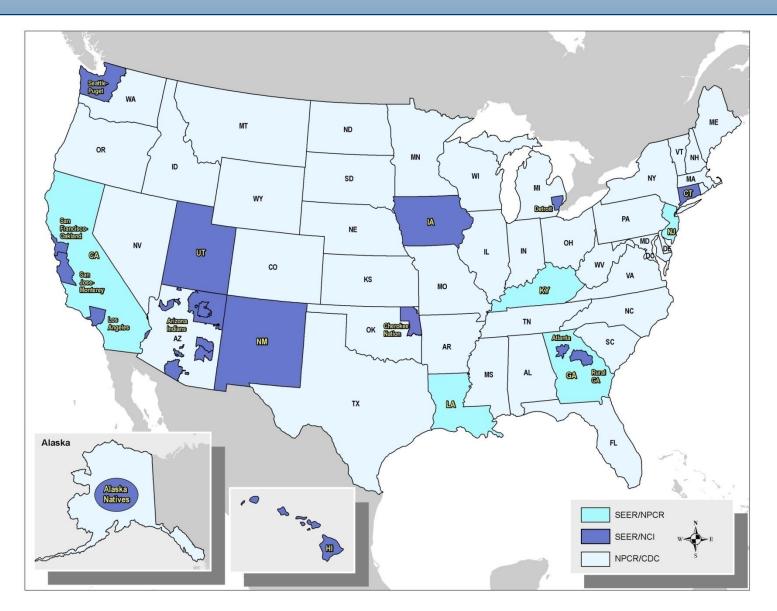


# **Selected Key Findings**



- Decline in cancer mortality continues
- Decline in cancer incidence for men
- Cancer incidence stable for women
- Childhood cancer (age 0-14)
  - Incidence increased
  - Mortality decreased
- Dr. Lowy to present:
- > 32% of girls aged 13-17 received three doses of HPV vaccine in 2010
  - 35% in 2011
  - Coverage lower among uninsured and some Southern states
- > 87% of women aged 21-65 had a Pap test in last 3 years
- Incidence of HPV-related oropharyngeal cancer increased among white men and women
- Incidence of anal cancer increased among white and black men and women
- Incidence of cervical cancer generally declined among almost all women

# Surveillance, Epidemiology and End Results (SEER) Program



# **Cancer Incidence & Mortality Statistics**

#### Cancer incidence

- Long-term trends, 1992-2009
  - With and without delay adjustment
  - SEER areas, 14% coverage
- Short-term trends (2000-2009)
  - By race and ethnicity
  - SEER + NPCR, 87% coverage
- Short-term rates (2005-2009)
  - By race and ethnicity
  - SEER + NPCR, 93% coverage

#### Cancer mortality

- Long-term trends, 1975-2009
- Entire US (source: CDC's National Center for Health Statistics)

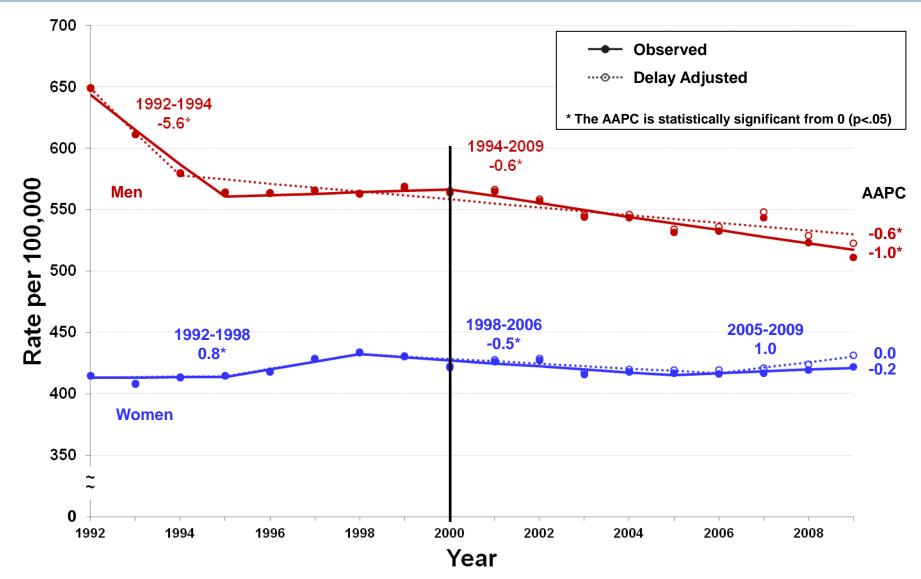








#### 10 Year Average Annual Percent Change (AAPC) For Observed and Delay-Adjusted Incidence Rates All Cancer Sites by Sex



Incidence data from SEER 13, 1992-2009

#### Recent Delay-adjusted SEER Incidence Trends with AAPC, 2000-2009 By Cancer Site\*

Men



Women

Thyroid Thyroid 7.0\* 3.7\* Liver & IBD Kidney & Renal Pelvis 3.1\* 2.9\* Liver & IBD 3.0\* Kidney & Renal Pelvis 2.5\* Melanoma of the Skin 1.7\* Melanoma of the Skin 1.3\* 1.4\* Pancreas Pancreas 0.5\* Corpus & Uterus 1.0\* Myeloma 0.5 Leukemia 0.5\* Non-Hodgkin Lymphoma Non-Hodgkin Lymphoma 0.4 Leukemia 0.2 Myeloma 0.3 Esophagus 0 Brain & ONS 0 Oral Cavity & Pharynx 0 All Sites 0 -0.2 Brain & Other Nervous System Lung & Bronchus -0.3\* -0.5 Urinary Bladder Breast -0.6 -0.6\* All Sites Urinary Bladder -0.8\* -1.7\* Stomach Stomach -0.8\* -1.9\* Lung & Bronchus -0.9\* Oral Cavity & Pharynx -1.9\* Prostate -0.9\* O∨ary -2.6\* Colon & Rectum -2.1\* Colon & Rectum -2.8\* -2.5\* Larynx Cervix Uteri -2 -1 -2 -1 7 -3 1 2 3 4 5 6 7 -3 2 3 5 0 0 6

Average Annual Percent Change 2000-2009

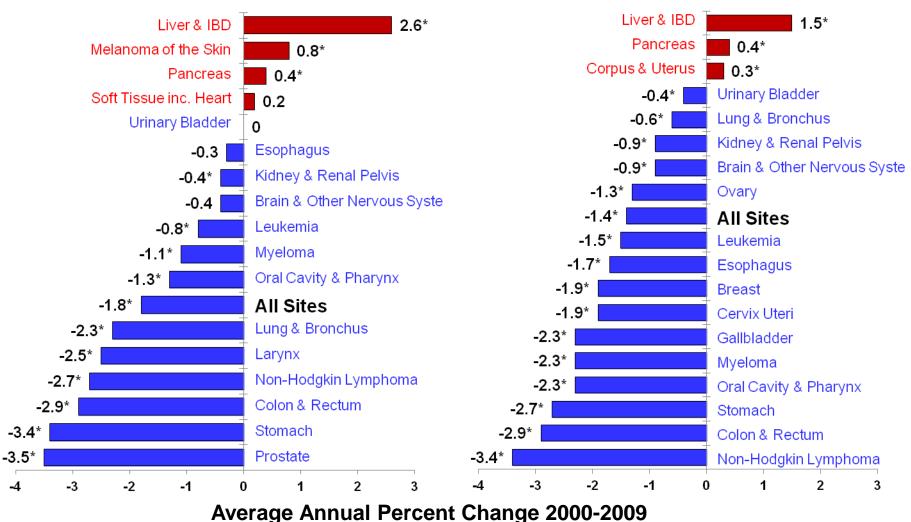
\* 10 year AAPC is statistically significant from 0 (p<.05) based on joinpoint model fit to SEER 13 delay adjusted rates from 1992-2009

#### Long-Term US Mortality Trends with AAPC, 2000-2009 By Cancer Site\*



**Females** 

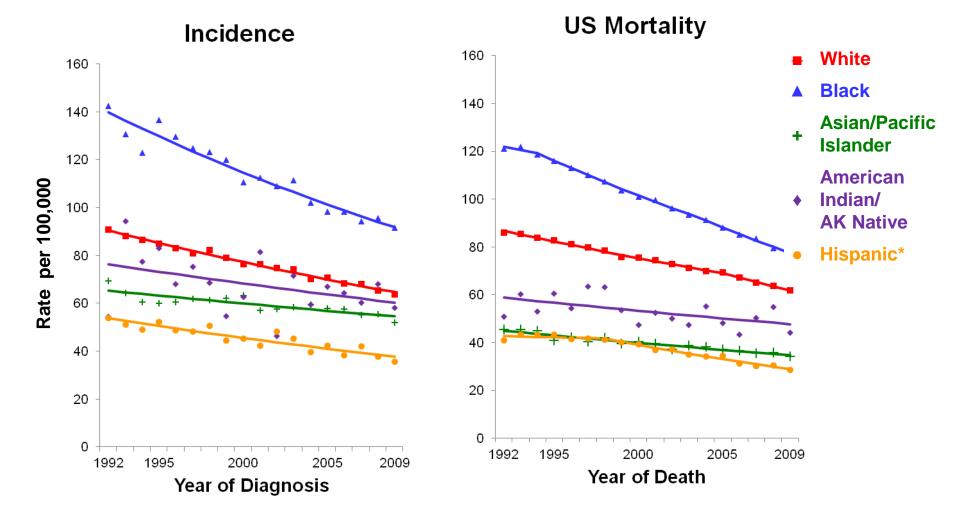
Males



\* 10 year AAPC is statistically significant from 0 (p<.05) based on joinpoint model. Incidence data from SEER 13, mortality data from NCHS.

# Lung & Bronchus: Men Incidence and Mortality Age-Adjusted Trends





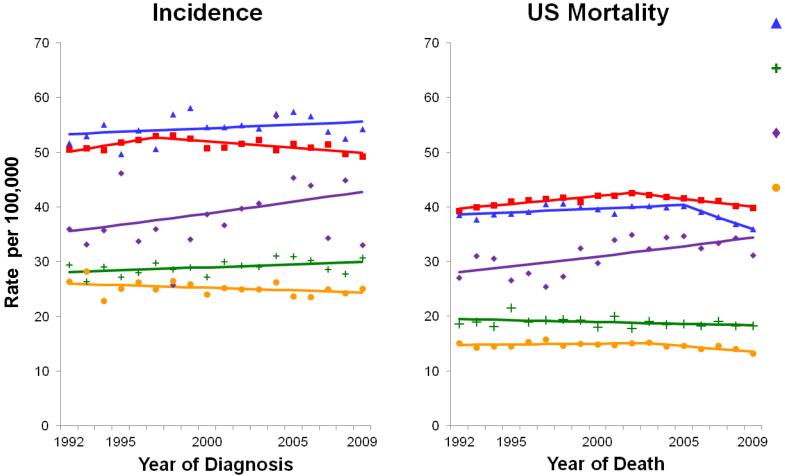
# Lung & Bronchus: Women Incidence and Mortality Age-Adjusted Trends



Black
Asian/Pacific
+ Islander
American

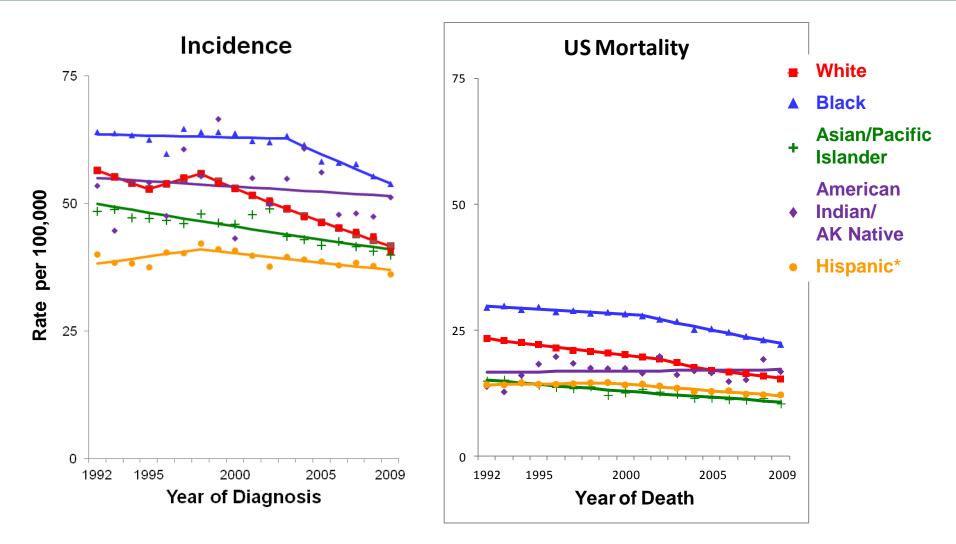
White

- Indian/ AK Native
- Hispanic\*



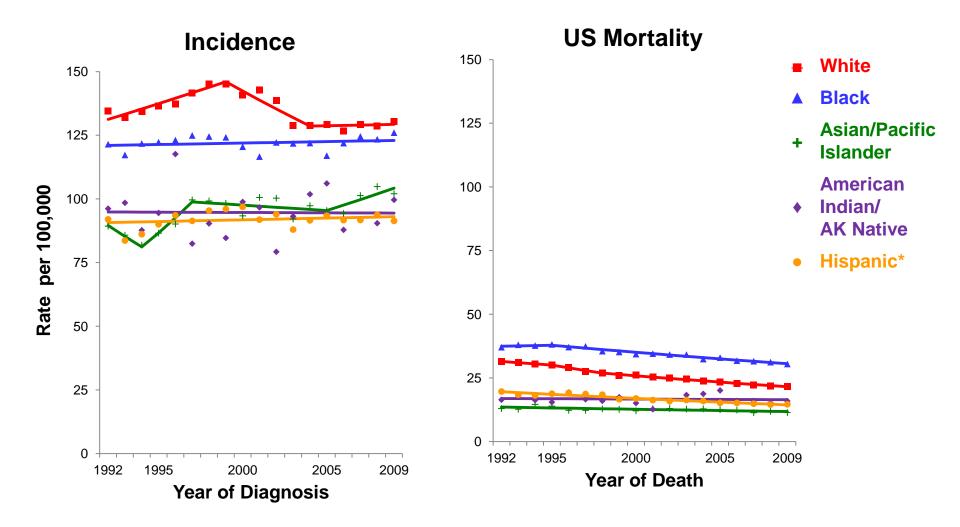
# Colon & Rectum Incidence and Mortality Age-Adjusted Trends





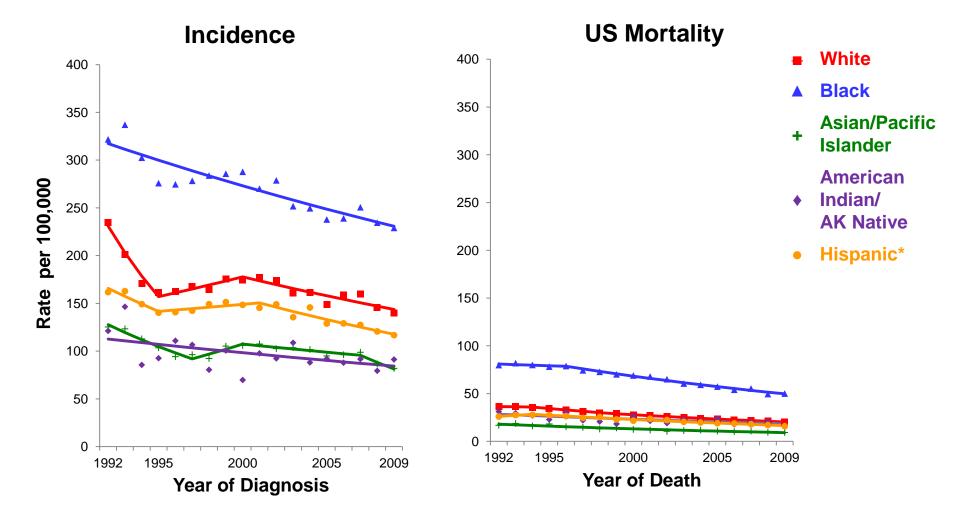
#### Breast (Women) Incidence and Mortality Age-Adjusted Trends





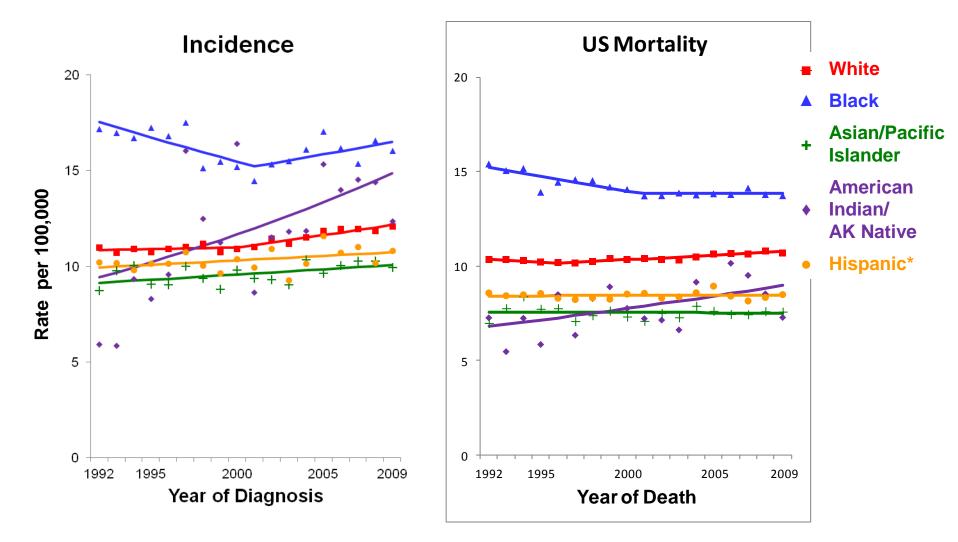
#### Prostate (Men) Incidence and Mortality Age-Adjusted Trends





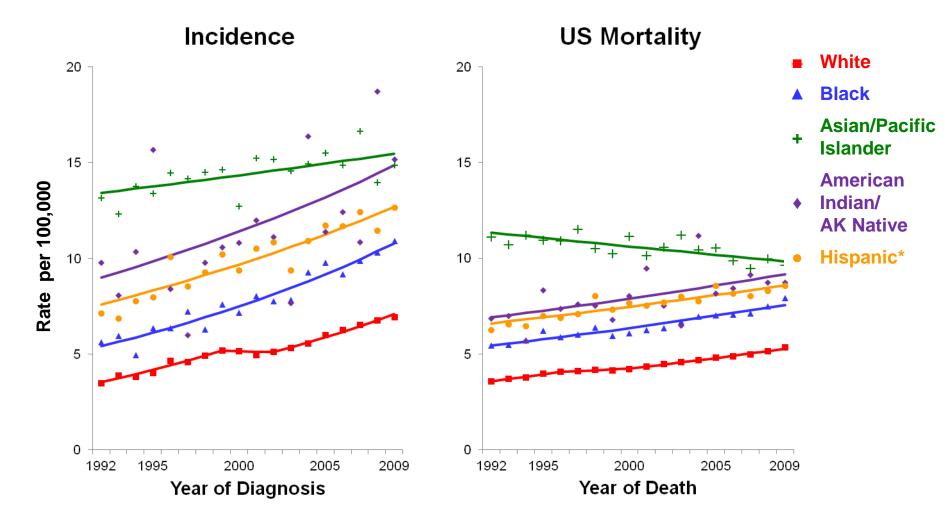
#### Pancreas Incidence and Mortality Age-Adjusted Trends





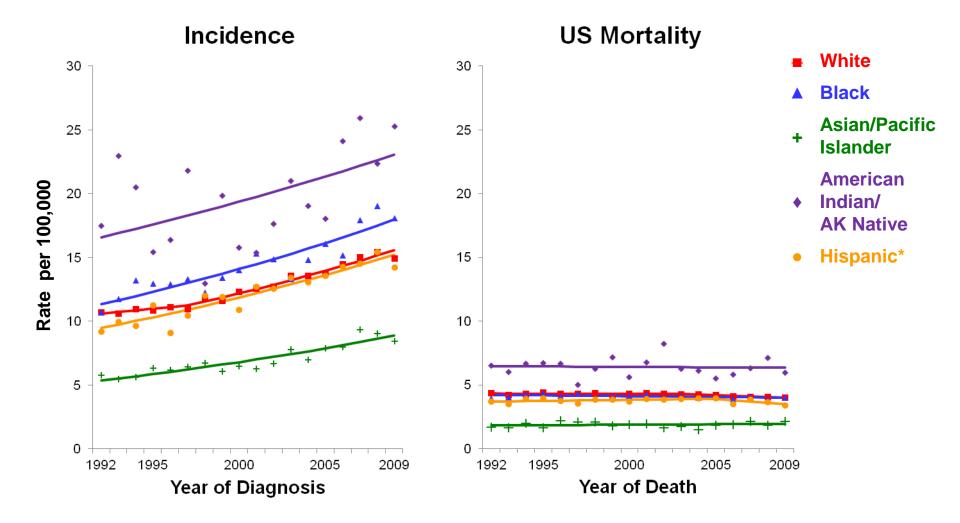
## Liver & Intrahepatic Bile Duct Incidence and Mortality Age-Adjusted Trends





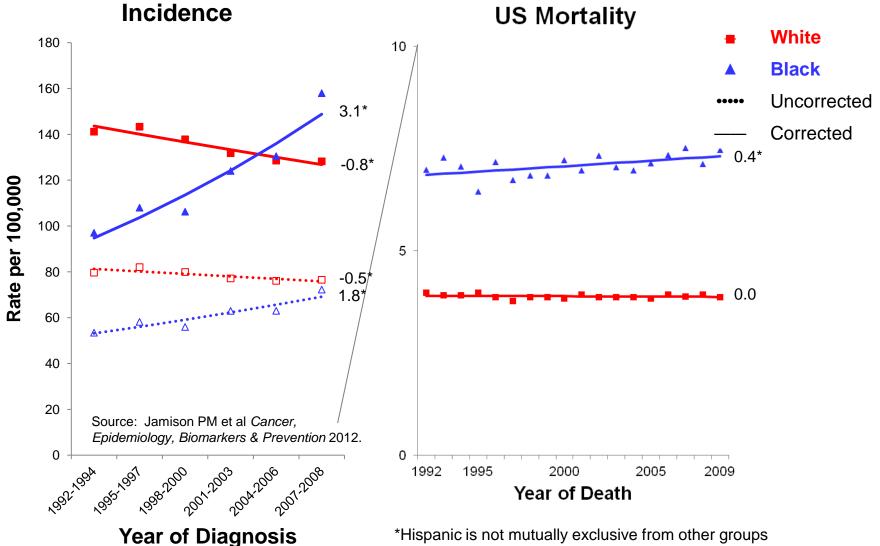
#### Kidney & Renal Pelvis Incidence and Mortality Age-Adjusted Trends





#### Corpus & Uterus, NOS Incidence and Mortality Age-Adjusted Trends

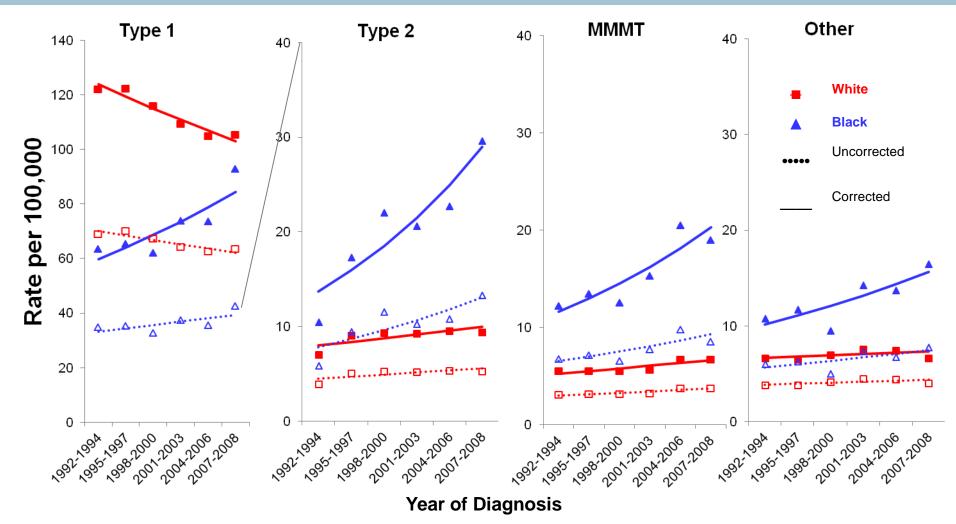




Incidence data from SEER 13 1992-2009, Mortality data from NCHS

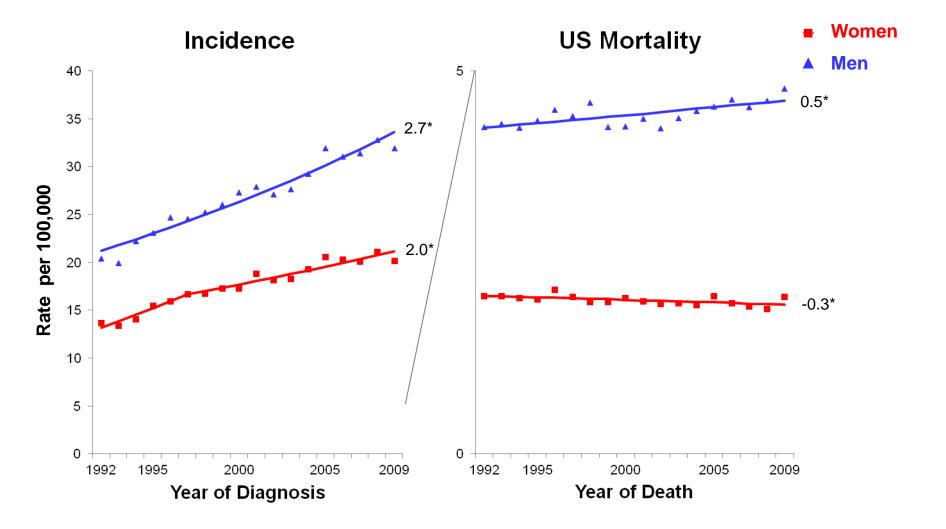
## Corpus & Uterus, NOS by Type Incidence Trends with Correction for Hysterectomy





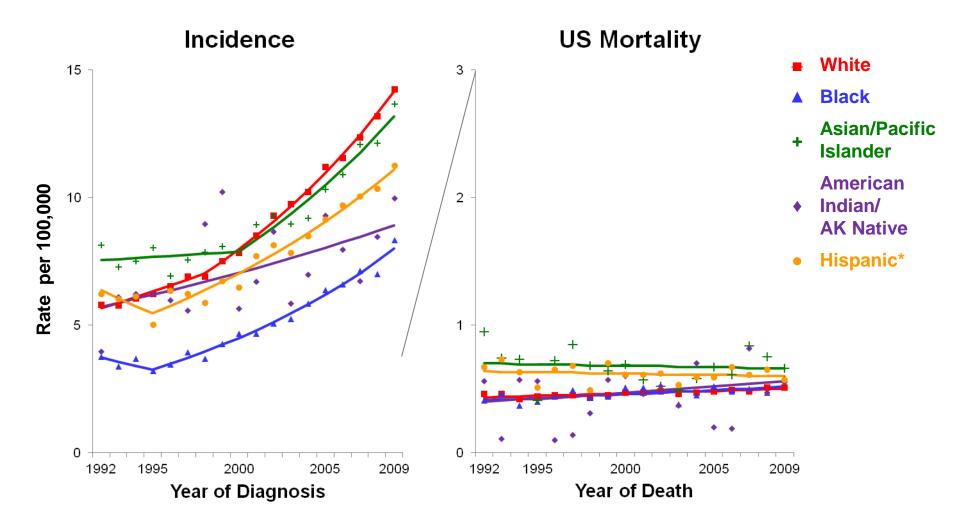
Source: Jamison PM et al. Trends in Endometrial Cancer Incidence by Rate and Histology with a Correction for the Prevalence of Hysterectomy, SEER 1992-2008. *Cancer, Epidemiology, Biomarkers & Prevention* 2012.

#### Melanoma of the Skin among White Men & Women Incidence and Mortality Age-Adjusted Trends



## Thyroid Incidence and Mortality Age-Adjusted Trends





# **2012 ARN Collaborators**



- ACS: Ahmedin Jemal, Edgar Simard, Priti Bandi, Debbie Saslow
- CDC: Christina Dorell, Lauri Markowitz, Meg Watson, S. Jane Henley, Robert Anderson, David Yankey
- > NAACCR: Betsy Kohler, Maria Schymura
- NCI: Anne-Michelle Noone, Kathy Cronin, Mark Schiffman, Brenda K. Edwards