

# Wisconsin Cancer Reporting System

## Cancer by the Numbers— Epi Updates

May 2017 Edition



### 2014 data now in WISH cancer modules

**Access WISH cancer modules:** <https://www.dhs.wisconsin.gov/wish/cancer/index.htm>

Updated cancer modules have been released in Wisconsin Interactive Statistics on Health (WISH), the interactive data query system from the Office of Health Informatics, Department of Health Services. The modules allow customized queries to retrieve data about cancer incidence, stage at diagnosis, and mortality among Wisconsin residents. With this update, cancer incidence data for 1995-2014 are now available.

The WISH cancer modules provide interactive, tailored access to data currently published in standard reports and data bulletins. The modules also provide county-level data, stage at diagnosis data, and race and ethnicity data, subject to confidentiality restrictions.

Here are some key findings about cancer in Wisconsin, found in the WISH cancer incidence module:

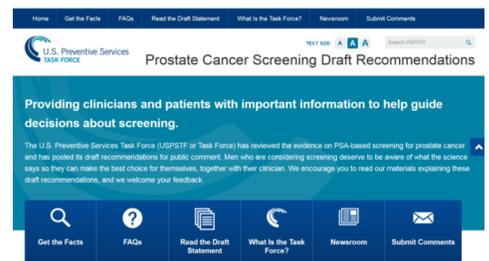
- There were 31,777 newly diagnosed invasive cancer cases reported in 2014. The age-adjusted rate was 453.9 per 100,000, with 500.5 among males and 431.2 among females.
- Prostate cancer was the most frequently diagnosed cancer among Wisconsin males, accounting for 22% of all male cancers diagnosed in 2014.
- Breast cancer was the most frequently diagnosed cancer in Wisconsin females, accounting for 29% of all female cancers diagnosed in 2014.
- From 1995 to 2014, there were major declines in age-adjusted cancer incidence rates in Wisconsin for:
  - Colorectal cancer, which declined by 39%.
  - Prostate cancer, which declined by 40%.
- Lung cancer is the number one killer of all types of cancer. From 1995 to 2014:
  - Lung cancer age-adjusted incidence rate dropped among males, from 86.9 to 64.8 per 100,000.
  - Lung cancer incidence rate increased slightly among females, from 46.4 to 52.9 per 100,000.
- Of the major cancers, melanoma increased most dramatically from 1995 to 2014 among both males and females:
  - The age-adjusted melanoma incidence rate for females more than doubled, from 8.5 to 19.0 per 100,000.
  - Males had higher incidence rates of melanoma, but less of an increase, from 14.7 to 30.2 per 100,000.

### Updated Recommendations for Individualized Prostate Cancer Screening

**Learn more here:** <https://screeningforprostatecancer.org>

In 2012, the U.S. Preventive Services Task Force recommended against the prostate specific antigen (PSA)-based screening for prostate cancer, stating that the potential harms outweighed the benefits.

New draft recommendations for prostate cancer screening were issued on April 11, 2017, and were open for public comments through May 8, 2017. The draft recommendations emphasize that the decision of whether or not to be tested must be individualized for men ages 55 to 69 years, while maintaining the 2012 recommendation against PSA-based screening for men age 70 years and older (the age cutoff has been lowered from 75 years and older).



## No Safe Level of Smoking: Even low-intensity smokers are at increased risk of earlier death

**Learn more here:** <http://jamanetwork.com/journals/jamainternalmedicine/article-abstract/2588812>

According to a new study from researchers at the National Cancer Institute (NCI), people who consistently smoked an average of less than one cigarette per day over their lifetime had a 64% higher risk of earlier death than those who never smoked. Those who smoked between one and 10 cigarettes per day had an 87% higher risk of earlier death than those who never smoked. Risks were lower among former low-intensity smokers compared to those who were still smokers, and fell with earlier age at quitting. The results of the study were reported in December 2016 in JAMA Internal Medicine.

When researchers looked at specific causes of death among study participants, a particularly strong association was observed—between smoking and lung cancer mortality. Those who consistently averaged less than one cigarette per day over their lifetime had nine times the risk of dying from lung cancer than those who never smoked. Among people who smoked between one and 10 cigarettes per day, the risk of dying from lung cancer was nearly 12 times higher than that of those who never smoked.

## Dramatic Rise in Colorectal Cancer in Younger Adults

**Learn more here:** [Colorectal Cancer Incidence Patterns in the United States, 1974-2003 \(Journal of the National Cancer Institute\)](#)

Although the national colorectal cancer incidence is decreasing overall, an American Cancer Society study has found that rates of colorectal cancer have risen dramatically in younger adults (younger than 55 years). Three in 10 diagnoses now occur among people younger than 55 years, and rates among young and middle-aged adults have returned to what they were for people born around 1890. People born in 1990 now have double the risk of colon cancer and quadruple the risk of rectal cancer compared to people born around 1950. The increase in colorectal cancer is generally attributed to the obesity epidemic in children and younger adults. The findings were [published online](#) February 28 in the Journal of the National Cancer Institute.

The authors emphasized that screening should start at age 50 years for average-risk individuals and at age 40 for those with a family history of colorectal cancer in a first-degree relative. Because screening is not recommended for average-risk individuals younger than 50 years, colorectal cancer in younger adults is often "not on anyone's radar."

In Wisconsin, the number of younger adults under age 55 diagnosed with colorectal cancer increased from 322 in 1995 to 500 in 2014. The corresponding age-adjusted rate for younger adults increased from 8.7 to 11.3 per 100,000, while the rate for older adults decreased from 249.7 to 129.9 per 100,000.

## New National Cancer Publications

### —▶ **New Annual Report to the Nation on the Status of Cancer, 1975-2014, with Special Section on Survival**

**Please share with your coworkers, health care providers, and cancer control partners!**

**Read the full report:** [https://seer.cancer.gov/report\\_to\\_nation/](https://seer.cancer.gov/report_to_nation/)

The Annual Report to the Nation (ARN) on the Status of Cancer, 1975-2014, provides a regular update on national cancer incidence and mortality rates. The ARN finds that for almost all cancer types, with the exception of ovarian and uterine cancers, five-year survival rates have increased significantly and deaths have decreased significantly.

The largest increase in survival rates was noted for leukemia, non-Hodgkin lymphoma, myeloma (or cancer of the bone marrow), and prostate and kidney cancers. The number of patients who survived these forms of cancer increased by 25% or more. Other cancers with the greatest survival rate were thyroid cancer, melanoma, and breast cancer in women. By contrast, the cancers that had the lowest survival rates were cancer of the pancreas, liver, stomach, esophagus, and brain.

*The Annual Report to the Nation is jointly issued by the Centers for Disease Control and Prevention (CDC), the National Cancer Institute (NCI), the American Cancer Society, and the North American Association of Central Cancer Registries (NAACCR).*

## —> SEER Releases New Cancer Statistics Review (CSR) and Latest SEER Data

Please share with your coworkers, health care providers, and cancer control partners!

The SEER Cancer Statistics Review (CSR), 1975-2014, published by NCI's Surveillance Research Program, was released on April 14, 2017. The updated Cancer Statistics Review presents the most recent cancer incidence, mortality, survival, and prevalence statistics.

New materials posted include:

- [SEER CSR, 1975-2014](#)
- [SEER Data, 1973-2014](#)
- Updated [Cancer Stat Facts](#) (fact sheets by cancer type)
- [The Cancer Query Systems](#)
- [Cancer Statistics Animator](#)
- Updated [Fast Stats](#) and [SEER\\*Explorer](#), which now includes survival

The Surveillance, Epidemiology, and End Results ([SEER](#)) Program has been a standard resource for statistics on cancer in the United States, tracking and reporting trends in incidence, mortality, survival, and prevalence.

## Cancer Awareness Months and Ribbon Colors

### —> May

Brain Cancer Awareness Month (gray)  
Melanoma and Skin Cancer Awareness Month (black)  
Bladder Cancer Awareness Month (marigold/blue/purple)

### —> June

National Cancer Survivors Day—June 4

### —> July

Sarcoma Awareness Month (yellow)

### —> August

World Lung Cancer Day—August 1

### —> September

Childhood Cancer Awareness Month (gold)  
Gynecologic Cancer Awareness Month (peach)  
Hodgkin's Lymphoma Awareness Month (violet)  
Leukemia Awareness Month (orange)  
Lymphoma Awareness Month (lime green)  
Ovarian Cancer Awareness Month (teal)  
Thyroid Cancer Awareness Month (teal/pink/blue)  
Prostate Cancer Awareness Month (light blue)

### —> October

Breast Cancer Awareness Month (pink)  
Liver Cancer Awareness Month (emerald)

### —> November

Lung Cancer Awareness Month (white)  
Carcinoid Cancer Awareness Month (zebra stripe)  
National Family Caregivers Month (plum)  
Pancreatic Cancer Awareness Month (purple)  
Stomach Cancer Awareness Month (periwinkle)

