



Cancer mortality surveillance--United States, 1990-2000.

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Source: MMWR Surveill Summ. 2004 Jun 4;53(3):1-108

Date: Jun-4-2004

Language: English

Publication Type: Article

Keywords: Adult
Breast Neoplasms - mortality
Colorectal Neoplasms - mortality
Female
Humans
Lung Neoplasms - mortality
Male
Neoplasms - mortality
Population Surveillance
Prostatic Neoplasms - mortality
SEER Program
United States - epidemiology

Abstract:

PROBLEM/CONDITION: Cancer is the second leading cause of death in the United States and is expected to become the leading cause of death within the next decade. Considerable variation exists in cancer mortality between the sexes and among different racial/ethnic populations and geographic locations. The description of mortality data by state, sex, and race/ethnicity is essential for cancer-control researchers to target areas of need and develop programs that reduce the burden of cancer. **REPORTING PERIOD COVERED:** 1990-2000. **DESCRIPTION OF SYSTEM:** Mortality data from CDC were used to calculate death rates and trends, categorized by state, sex, and race/ethnicity. Trend analyses for 1990-2000 are presented for all cancer sites combined and for the four leading cancers causing death (lung/bronchus, colorectal, prostate, and breast) categorized by state, sex, and race/ethnicity. Death rates per 100,000 population for the 10 primary cancer sites with the highest age-adjusted rates are also presented for each state and the District of Columbia by sex. For males, the 10 primary sites include lung/bronchus, prostate, colon/rectum, pancreas, leukemia, non-Hodgkin lymphoma, liver/intrahepatic bile duct, esophagus, stomach, and urinary bladder. For females, the 10 primary sites include lung/bronchus, breast, colon/rectum, pancreas, ovary, non-Hodgkin lymphoma, leukemia, brain/other nervous system, uterine corpus, and myeloma. **RESULTS:** For 1990-2000, cancer mortality decreased among the majority of racial/ethnic populations and geographic locations in the United States. Statistically significant decreases in mortality among all races combined occurred with lung and bronchus cancer among men (--1.7%/year); colorectal cancer among men and women (--2.0%/year and --1.7%/year, respectively); prostate cancer (--2.6%/year); and female breast cancer (--2.3%/year). For 1990-2000, cancer mortality remained stable among American Indian/Alaska Native populations. Statistically significant increases in lung and bronchus cancer mortality occurred among women of all racial/ethnic backgrounds, except among Asian/Pacific Islanders. **INTERPRETATION:** Although cancer remains the second leading cause of death in the United States, the overall declining trend in cancer mortality demonstrates considerable progress in cancer prevention, early detection, and treatment. **PUBLIC HEALTH ACTION:** More effective tobacco-cessation programs are necessary to reduce lung and bronchus cancer mortality among women and sustain the decrease in lung and bronchus cancer mortality among men. Additional programs that deter smoking initiation among adolescents are essential to ensure future decreases in lung and bronchus cancer mortality. Continued research in primary prevention, screening methods, and therapeutics is needed to further reduce disparities and improve quality of life and survival among all populations.

PubMed ID:

15179359 [View in PubMed](#) 