



# CHRONIC DISEASE BURDEN UPDATE

■ This update focuses on the burden of, and screening for, the most common types of cancers among Illinois residents.

The U.S. Centers for Disease Control and Prevention (CDC) defines comprehensive cancer control as an integrated and coordinated approach to reducing cancer incidence, morbidity, and mortality through prevention, early detection, treatment, rehabilitation, and palliation. The concept is built on the recognition that effective cancer prevention and control planning and programming should address a continuum of services that range from primary prevention and early detection through effective treatment, quality care, and end-of-life issues. In 2011, an estimated 65,610 Illinois residents learned they have cancer. Cancer is the second most common cause of death in Illinois, but for persons between the ages of 45 and 64, cancer is the leading cause of death.

## ILLINOIS CANCER INCIDENCE RATES

The most common cancer diagnoses in Illinois are for prostate cancer, breast cancer (female only), and lung and bronchus cancer. Three of the four most common cancers among Illinois residents have effective early detection screening options.

**Table 1.** Age-adjusted Incidence Rates and Counts for Invasive Cancer by Site, All Races, Both Genders, Illinois 2009

Rank	Site	Rate	Count
	All Sites	479.30	64,135
1	Prostate	149.40	9,168
2	Breast (female only)	126.20	9,129
3	Lung and Bronchus	70.70	9,337
4	Colon and Rectum	46.20	6,178
5	Corpus and Uterus	28.40	2,092
6	Urinary Bladder	22.40	2,966
7	Non-Hodgkin Lymphoma	19.10	2,529
8	Kidney and Renal Pelvis	17.10	2,293
9	Melanoma of the Skin	15.90	2,104
10	Leukemia	11.40	1,506

*Note:* Figures include invasive cancer and bladder cancer in situ. Rates are per 100,000 and are age-adjusted to the 2000 U.S. standard million population.

*Source:* Illinois Department of Public Health, Illinois State Cancer Registry, data as of November 2011

## ILLINOIS CANCER MORTALITY

In men, prostate and colorectal cancers are the second and third leading causes of cancer death, accounting for nearly 20 percent of all cancer deaths in men. In women, breast cancer was the second leading cancer cause of death, contributing to nearly 15 percent of all cancer deaths. Colorectal cancer was the third leading cancer cause of death, contributing to nearly 10 percent of all cancer deaths in women.

**Table 2.** Male Cancer Mortality: Top 3 Cancer Causes of Death All Races, Illinois, 2009

Cancer Sites	Count	Rate	Percent
Lung and Bronchus	3563	63.42	29.80%
Prostate	1189	23.87	9.94%
Colon and Rectum	1173	21.21	9.81%

**Table 3.** Female Cancer Mortality: Top 3 Cancer Causes of Death All Races, Illinois, 2009

Cancer Sites	Count	Rate	Percent
Lung and Bronchus	3083	41.32	26.54%
Breast	1719	22.68	14.80%
Colon and Rectum	1110	14.11	9.55%

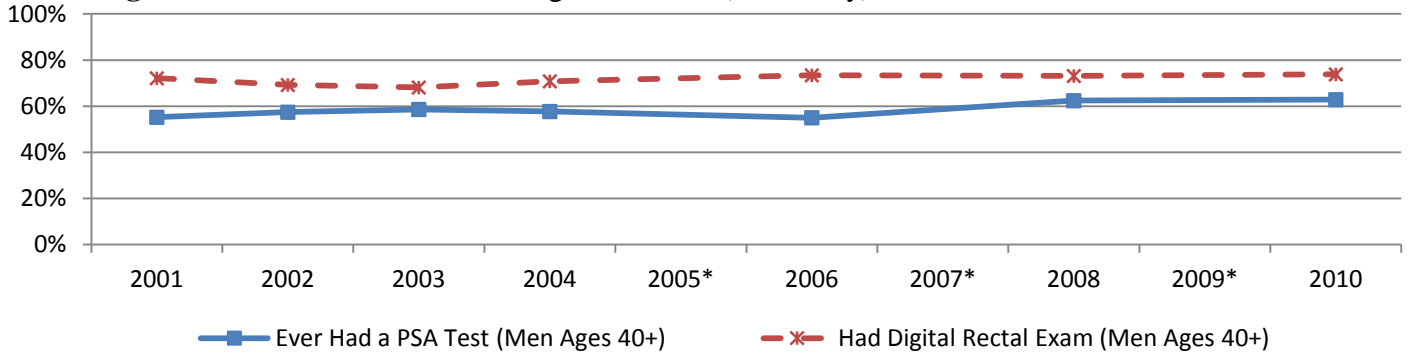
*Note for Tables 2 and 3:* Cancer mortality counts and age-adjusted rates per 100,000 (U.S. 2000 Std) with 95 percent confidence interval.

*Source for Tables 2 and 3:* Surveillance, Epidemiology, and End Results (SEER) Program ([www.seer.cancer.gov](http://www.seer.cancer.gov)) SEER\*Stat Database: Mortality - All COD, Aggregated With State, Total U.S. (1969-2009), National Cancer Institute, DCCPS, Surveillance Research Program, Cancer Statistics Branch, released April 2012.

## PROSTATE CANCER SCREEING

For men ages 40 and above, the use of the prostate cancer screening method of a digital rectal exam (although high) has remained steady with no major increases or decreases in prevalence from 2001 to 2010 (72.1% to 73.8%). For men ages 40 and above, the use of the prostate screening method of a prostate-specific antigen (PSA) test has risen in prevalence from 2001 to 2010 (55.2% to 62.8%).

**Figure 1.** Prostate Cancer Screening Prevalence (Male only), Illinois, 2001-2010



## BREAST CANCER SCREEING

Breast cancer screening prevalence has remained steady between 2000 to 2010. Around 90 percent of women have had a mammogram or clinical breast exam.

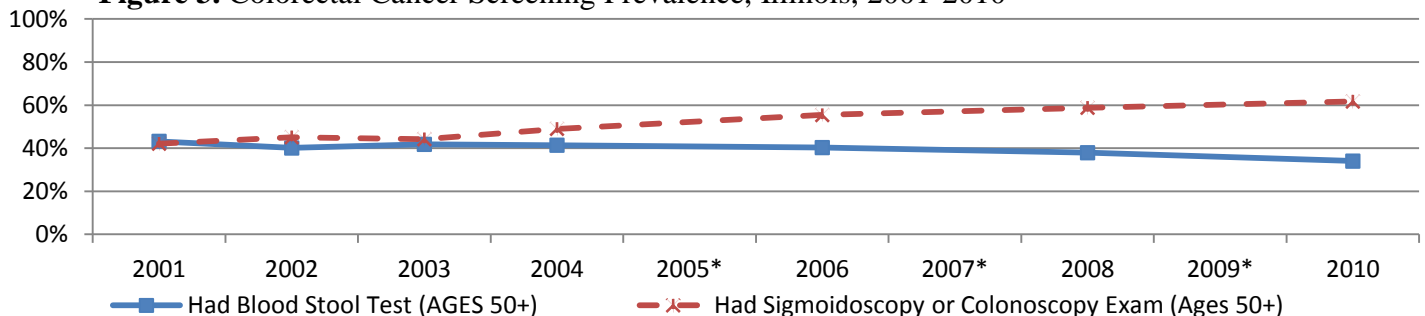
**Figure 2.** Breast Cancer Screening Prevalence (Female only), Illinois, 2000-2010



## COLORECTAL CANCER SCREEING

For residents ages 50 and above, the use of the colorectal cancer screening method of a blood stool test has gradually decreased in prevalence from 2001 to 2010 (43.2% to 34%). However, the use of colorectal cancer screening exams, sigmoidoscopy or colonoscopy, have gradually increased in prevalence from 2001 to 2010 (42.1% to 61.7%).

**Figure 3.** Colorectal Cancer Screening Prevalence, Illinois, 2001-2010



Source for Figures 1-3: Illinois Behavioral Risk Factor Surveillance System (BRFSS), 2000-2010. Illinois Department of Public Health

\*Note for Figures 1-3: Years with an asterisk represents a year when the specific question was omitted in the BRFSS survey for that year.