

NCI Press Release

Annual Report to the Nation: Cancer death rates continue to decline

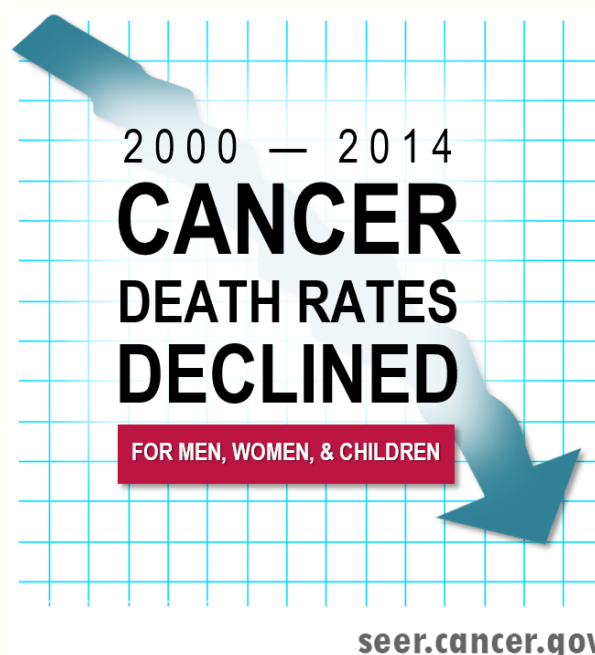


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Overall cancer death rates continue to decrease in men, women, and children for all major racial and ethnic groups, according to the latest Annual Report to the Nation on the Status of Cancer, 1975-2014. The report finds that death rates during the period 2010-2014 decreased for 11 of the 16 most common types of cancer in men and for 13 of the 18 most common types of cancer in women, including lung, colorectal, female breast, and prostate cancers. Meanwhile, death rates increased for cancers of the liver, pancreas, and brain in men and for liver and uterine cancer in women. The report finds overall cancer incidence rates, or rates of new cancers, decreased in men but stabilized in women during the period 1999-2013.



The Report to the Nation is released each year in a collaborative effort by the American Cancer Society; the Centers for Disease Control and Prevention (CDC) and the National Cancer Institute (NCI), both parts of the Department of Health and Human Services; and the North American Association of Central Cancer Registries (NAACCR).

The report appears early online in the *Journal of the National Cancer Institute (JNCI)* and includes a special section, which this year focuses on survival expressed as percentage. It finds that several but not all cancer types showed a significant improvement over time for both early- and late-stage disease, and varied significantly by race/ethnicity and state.

“While trends in death rates are the most commonly used measure to assess progress against cancer, survival trends are also an important measure to evaluate progress in improvement of cancer outcomes,” said Ahmedin Jemal, D.V.M., Ph.D., of the American Cancer Society and lead author of the study. “We last included a special section on cancer survival in 2004, and as we found then, survival improved over time for almost all cancers at every stage of diagnosis. But survival remains very low for some types of cancer and for most types of cancers diagnosed at an advanced stage.”

Compared to cases diagnosed in 1975-1977, five-year survival for cancers diagnosed in 2006-2012 increased significantly for all but two types of cancer: cervix and uterus. The greatest absolute increases in survival (25 percent or greater) were seen in prostate and kidney cancers as well as non-Hodgkin lymphoma, myeloma, and leukemia.

Cancers with the lowest five-year relative survival for cases diagnosed in 2006-2012 were pancreas (8.5

percent), liver (18.1 percent), lung (18.7 percent), esophagus (20.5 percent), stomach (31.1 percent) and brain (35 percent); those with the highest were prostate (99.3 percent), thyroid (98.3 percent), melanoma (93.2 percent) and female breast (90.8 percent).

“While this report found that five-year survival for most types of cancer improved among both blacks and whites over the past several decades, racial disparities for many common cancers have persisted, and they may have increased for prostate cancer and female breast cancer,” said Lynne T. Penberthy, M.D., M.P.H., associate director of NCI’s Surveillance Research Program. “We still have a lot of work to do to understand the causes of these differences, but certainly differences in the kinds and timing of recommended treatments are likely to play a role.”

“This report found that tobacco-related cancers have low survival rates, which underscores the importance of continuing to do what we know works to significantly reduce tobacco use,” said Lisa C. Richardson, M.D., M.P.H., director of CDC’s Division of Cancer Prevention and Control. “In addition, every state in the nation has an adult obesity prevalence of 20 percent or more. With obesity as a risk factor for cancer, we need to continue to support communities and families in prevention approaches that can help reverse the nation’s obesity epidemic. We need to come together to create interventions aimed at increasing the uptake of recommended, effective cancer screening tests, and access to timely cancer care.”

The authors also stated that more attention and resources are needed to identify major risk factors for common cancers, such as colorectal, breast, and prostate, as are concerted efforts to understand the increasing incidence trends in uterine, female breast, and pancreatic cancer.

“The continued drops in overall cancer death rates in the United States are welcome news, reflecting improvements in prevention, early detection, and treatment,” said Betsy A. Kohler, M.P.H., C.T.R., executive director of NAACCR. “But this report also shows us that progress has been limited for several cancers, which should compel us to renew our commitment to efforts to discover new strategies for prevention, early detection, and treatment, and to apply proven interventions broadly and equitably.”

Article: Annual Report to the Nation on the Status of Cancer, 1975–2014, Featuring Survival JNCI J Natl Cancer Inst (2017) 109(9): djx030 doi: 10.1093/jnci/djx030

To view the full report, see: <https://academic.oup.com/jnci/article-lookup/doi/10.1093/jnci/djx030>

For a Q&A on this report, go to: https://www.cdc.gov/cancer/dcpc/research/articles/arn_7514.htm

For more about the report, see: https://seer.cancer.gov/report_to_nation

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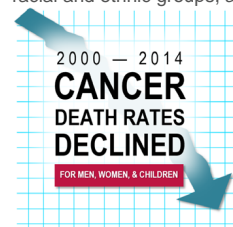
IUSCC news

March 2017

News briefs

Cancer death rates continue to decline: Annual Report to the Nation on the Status of Cancer, 1975-2014

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Breast cancer researchers gather for annual Amelia Project

Nikhil Wagle, MD, of the Dana-Farber Cancer Institute, chats with **Anna Maria Storniolo**, MD, during the Amelia Project's annual meeting March 4 at IU Kokomo. Dr. Wagle delivered the



keynote address, "Partnering with Patients to Accelerate our Understanding of Metastatic Breast Cancer." More than 70 people attended the meeting, while more than 30 students and fellows submitted abstracts for poster and oral presentations. The Amelia Project is designed to bring together scientists and clinicians working on breast cancer. The meeting has a long history of bringing together institutions, fostering collaboration across institutional boundaries, enhancing research through collegial sharing and encouraging and educating pre- and post-doctoral candidates.

ICC annual meeting registration is open

Registration is open for the 2017 Indiana Cancer Consortium Annual Meeting. Through this year's theme, Cancer Health Disparities: A Vision for the Future, the consortium hopes to shed light on health disparities across the continuum of cancer care as it relates to the medically underserved in Indiana. The sessions will focus on how the Indiana cancer

community can address the pressing challenges we currently face or anticipate and will provide a vision for the future where collective action can make a difference. This is a free, all-day conference on Wednesday, April 26 in downtown Indianapolis. Lunch will be provided. For more information and details to register, visit this [link](#).

2016 IUSCC scientific report is online

The 2016 IU Simon Cancer Center scientific report is now [online](#). The report features **Murray Korc**, MD, and the Pancreatic Cancer Signature Center and the work **Susan Rawl**, PhD, will be doing to compare interventions to increase colorectal cancer screening as well as stories about the next generation of personalized medicine and moving science from bench to bedside. Cancer center members will soon receive a hard copy via campus mail. If you or someone you know would like a hard copy, e-mail Michael Schug at maschug@iupui.edu.

Cancer center members in the news

• **Lois Travis**, MD, ScD, **Lawrence Einhorn**, MD, **Patrick Monahan**, PhD, and colleagues wrote "Multi-Institutional



Assessment of Adverse Health Outcomes Among North American Testicular Cancer Survivors After Modern Cisplatin-based Chemotherapy," which was published in the [Journal of Clinical Oncology](#).

- **Melissa Kacena**, PhD, recently returned to NASA's Kennedy Space Center to guide astronauts aboard the International Space Station through reconstructive surgery as part of the #RodentResearchIV mission. Dr. Kacena and her team sent dozens of mice into space on the SpaceX rocket, which launched Feb. 19, to test a form of bone-healing therapy with the potential to help people with traumatic bone injuries. For the past several years, Dr. Kacena has worked with the U.S. Department of Defense and the U.S. Army to study the therapy, which could prove effective in treating soldiers injured in IED explosions. As previously reported, the mission has a connection to cancer. Dr. Kacena explained the current FDA approved bone healing agent has been shown to increase one's risk of developing cancer. "We think our agent is effective and safer than the current FDA approved agent," she said.
- **Douglas Rex**, MD, the PI of a clinical trial that is studying shakes and food bars as preparation for colonoscopy, was interviewed by [The Washington Post](#) about the new products and their potential impact on colonoscopy screening rates. The story also appeared in The Toronto Sun, Pittsburgh Post-Gazette, Orlando Sentinel, South Florida Sun Sentinel, and Chicago Tribune.

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