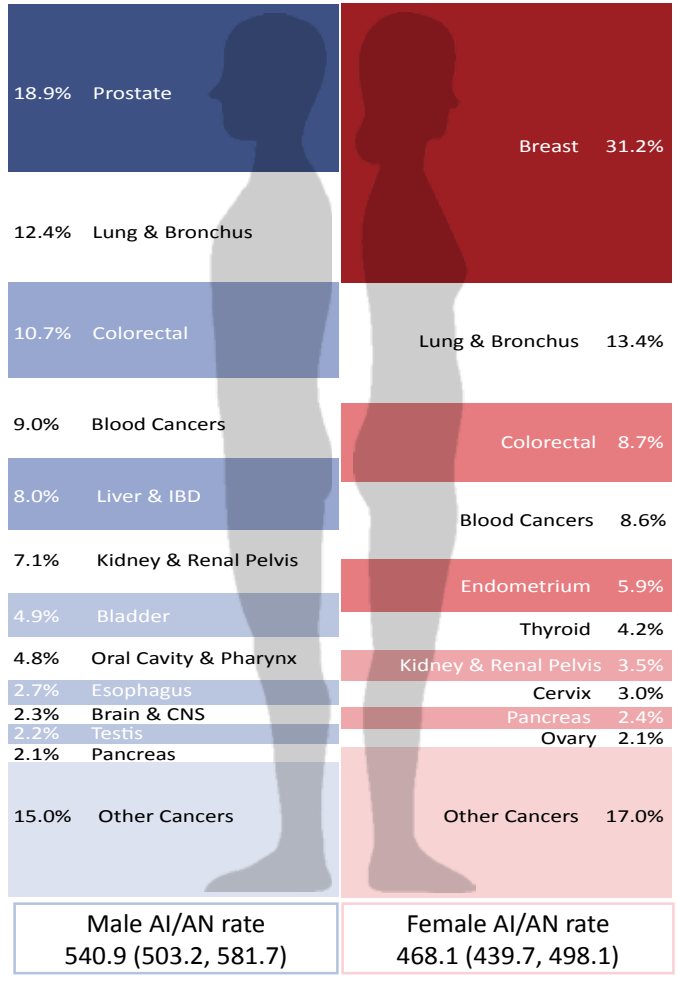


Cancer Among American Indians and Alaska Natives in Washington, 2008-2012



Northwest Portland Area Indian Health Board
Indian Leadership for Indian Health

Leading cancer sites by sex



Male AI/AN rate: 540.9 (503.2, 581.7)
Female AI/AN rate: 468.1 (439.7, 498.1)

CNS = Central Nervous System IBD = Intrahepatic Bile Duct

Incidence, selected cancer sites per 100,000 population, calculated using invasive cases only

Cancer	N	AI/AN Rate (95% CI)	NHW Rate (95% CI)
All Sites	2,318	494.4 (471.8, 517.9)	489.7 (486.7, 492.7)
Breast (female)	379	139.4 (124.6, 155.9)	140.0 (137.6, 142.3)
Lung & Bronchus	300	72.2 (63.4, 82.2)	63.5 (62.4, 64.6)
Colorectal*	224	51.0 (43.7, 59.4)	38.8 (38.0, 39.7)
Prostate (male)†	209	101.3 (86.2, 119.7)	134.4 (132.1, 136.6)
Blood Cancers	204	44.0 (37.4, 51.8)	45.5 (44.6, 46.4)
Kidney & Renal Pelvis*	120	24.2 (19.7, 29.9)	16.1 (15.5, 16.6)

*AI/AN rate significantly higher than NHW rate (p<0.05)
†AI/AN rate significantly lower than NHW rate (p<0.05)
AI/AN = American Indian/Alaska Native NHW = non-Hispanic White
N = Number of Cases CI = Confidence Interval

Racial Misclassification

AI/AN are often incorrectly classified as another race (usually White) in public data sources, which results in inaccurate cancer statistics for AI/AN populations. Each year, the Improving Data and Enhancing Access - Northwest (IDEA-NW) project partners with the cancer registries in Idaho, Oregon, and Washington to correct AI/AN racial misclassification through record linkages. Please contact us if you are interested in joining our efforts to improve cancer data for Northwest tribal communities.

Leading cancer sites by age group and sex (percent of cases)

Rank	0-19		20-39		40-64		65+	
	Male	Female	Male	Female	Male	Female	Male	Female
1	Brain & CNS (33.3%)	Blood Cancers (36.8%)	Testis (23.9%)	Breast (28.2%)	Prostate (17.2%)	Breast (35.5%)	Prostate (24.0%)	Breast (26.9%)
2	--	--	Blood Cancers (21.1%)	Thyroid (16.5%)	Liver & IBD (12.1%)	Lung & bronchus (10.9%)	Lung & bronchus (16.9%)	Lung & bronchus (19.8%)
3	--	--	Kidney & Renal Pelvis (12.7%)	Blood Cancers/Cervix (11.8% each)	Colorectal (11.3%)	Colorectal (8.0%)	Colorectal (11.0%)	Colorectal (16.7%)
4	--	--	Brain & CNS (11.3%)	Melanoma (7.1%)	Lung & Bronchus (10.1%)	Endometrium (7.1%)	Blood Cancers (9.4%)	Blood Cancers (9.6%)
5	--	--	Colorectal (7.0%)	Colorectal (5.9%)	Kidney & Renal Pelvis (7.5%)	Blood cancers (6.8%)	Bladder (8.6%)	Endometrium (4.9%)
Total Cases	18	19	71	85	506	660	509	450

-- = Not enough cases to report

Cancer screening measures: Washington Clinics (2014 reporting year)

46.8% of women ages 24-64 had a pap smear in the past 3 years, or (for women ages 30-64) a pap smear and HPV DNA test in the past 5 years	<i>All IHS: 54.6%</i> <i>2020 Goal¹: 93%</i>
41.4% of women ages 52-64 had a mammogram in the past 2 years	<i>All IHS: 54.2%</i> <i>2020 Goal²: 81.1%</i>
35.7% of patients ages 50-75 had a colorectal cancer screening in the past year	<i>All IHS: 37.5%</i> <i>2020 Goal: 70.5%</i>
40.3% of tobacco users received tobacco cessation counseling or quit in the past year	<i>All IHS: 48.2%</i> <i>2020 Goal³: 80%</i>

¹ Females ages 21-65, within past 3 years

² Females ages 50-74, once every 2 years

³ Adult smokers who attempted to stop smoking in past 12 months

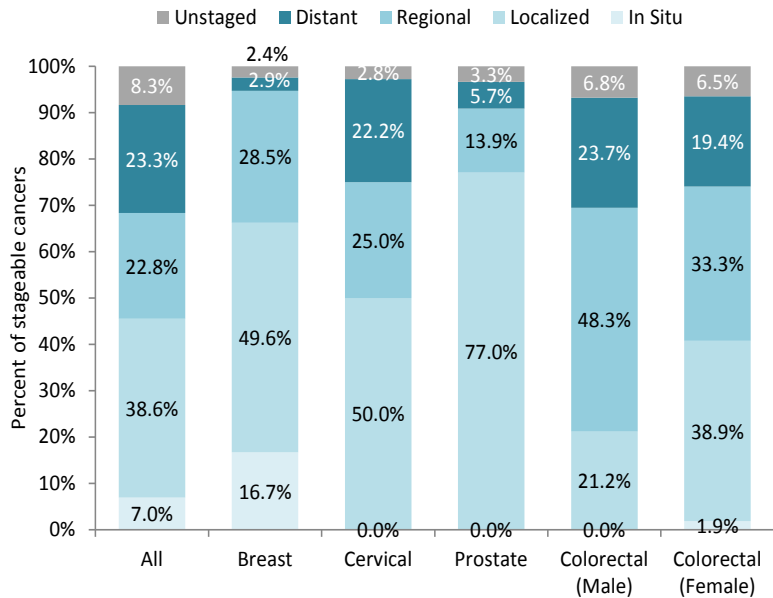
Cancer is the second leading cause of death for AI/AN in the Northwest and nationwide. One of the best strategies to reduce cancer mortality is early detection through routine cancer screening tests. Avoiding tobacco products greatly reduces risks for lung and other cancers.

Data Notes

- Cancer incidence data are from the Washington State Cancer Registry, cancer mortality data are from the Washington State Center for Health Statistics, and screening data are from the Indian Health Service.
- Data for this fact sheet compiled by NPAIHB's IDEA-NW and Northwest Tribal Comprehensive Cancer Projects.
- Unless specified as non-Hispanic White (NHW), all data are for American Indian or Alaska Native (AI/AN alone or in combination with another race) residents of Washington.
- Cancer incidence counts, proportions, and rates are based on all invasive cancers (plus in situ urinary bladder cancers); mortality rates are based on all deaths from invasive cancers.
- Rates are age-adjusted to the 2000 US Standard population and represent the number of new cases (or deaths) that occurred in a population during the specified time period, per 100,000 population.
- Blood cancers include leukemia, Hodgkin lymphoma, non-Hodgkin lymphoma, and multiple myeloma.
- The data on this fact sheet are not comparable to those published by state and federal agencies due to differences in how we identify AI/AN individuals.

**For more information, please contact the
IDEA-NW Project:**
503-416-3261; ideanw@npaihb.org
www.npaihb.org

Stage at diagnosis, selected cancer sites



Note: *In situ* and localized are often considered “early stage” while regional and distant are considered “late stage”. The “All” category includes all stageable cancers.

Mortality rates for selected cancer sites, 2008-2012 per 100,000 population, calculated using invasive cancers only

Cancer	N	AI/AN Rate (95% CI)	NHW Rate (95% CI)
All Sites*	940	236.5 (219.7, 254.5)	172.8 (171.0, 174.5)
Lung & Bronchus*	257	74.2 (64.5, 85.2)	45.9 (45.0, 46.7)
Colorectal*	95	28.2 (22.2, 35.6)	13.8 (13.3, 14.2)
Liver & IBD*	76	18.9 (14.4, 24.7)	5.2 (4.9, 5.5)
Blood	64	18.0 (13.4, 23.9)	17.0 (16.5, 17.5)
Breast (female)	56	25.0 (18.4, 33.6)	20.3 (19.5, 21.1)
Pancreas	46	13.7 (9.7, 19.1)	11.1 (10.7, 11.6)
Prostate (male)*	37	34.0 (22.8, 49.6)	21.6 (20.9, 22.3)
Kidney & Renal Pelvis*	33	9.6 (6.4, 14.2)	3.9 (3.6, 4.1)
Stomach*	17	6.0 (3.3, 10.3)	2.4 (2.2, 2.6)

*AI/AN rate significantly higher than NHW rate (p<0.05)

Note: These mortality counts and rates are not comparable to data on the 2003-2007 cancer fact sheets, which used a different (incidence-based) method for estimating cancer mortality.

Resources

For general information on cancer, visit cancer.gov
For more information about statistical terms and interpretation, see www.cancer.gov/statistics/glossary
For more information on stage at diagnosis definitions, see www.cancer.gov/cancertopics/factsheet/detection/staging
Washington State Cancer Registry:
<https://fortress.wa.gov/doh/wscr/>
Washington Breast, Cervical, and Colon Health Program:
<http://www.doh.wa.gov/cfh/bcchp/default.htm>