

# 2003 FLORIDA ANNUAL

## CANCER REPORT: Incidence and Mortality for 2000



2003 Epidemiological Series





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## **2003 FLORIDA ANNUAL CANCER REPORT: INCIDENCE AND MORTALITY FOR 2000**

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## EXECUTIVE SUMMARY

During 2000, healthcare practitioners diagnosed 94,630 cancers among Floridians, an average of 259 new cancers per day. The total number of new cancer cases decreased by 920 from 1999. A total of 38,191 Floridians died of cancer in 2000, an average of 104 deaths per day, 877 more than in 1999.

Cancer of the lung and bronchus was the most frequently reported cancer, with 15,553 cases diagnosed in 2000. Prostate cancer ranked second with 13,600 cases, followed by female breast cancer with 12,390 cases. The fourth and fifth most common cancers were colorectal cancer and bladder cancer, with 11,464 and 4,952 cases, respectively.

Sixty-four percent of newly diagnosed cancers and 74 percent of cancer deaths occurred in persons aged 65 and older. This age group accounts for 17.5 percent of Florida's 2000 population.

Data from the North American Association of Central Cancer Registries (NAACCR) *Cancer in North America 1996-2000, Volume 3*, which represents 68 percent of the total United States (U.S.) population from 29 states and 5 metropolitan areas, yields a crude incidence rate of 472 cases per 100,000 per year for the five-year period. The 2000 crude rate in Florida for all cancers combined was 589 cases per 100,000, about 25 percent higher than the rate in the NAACCR registries.

The age-adjusted incidence rate for all cancers combined in Florida females for 2000 was 414 per 100,000, slightly higher than the 2000 U.S. average rate for females of 409 per 100,000 given in *United States Cancer Statistics: 2000 Incidence Report* (USCS). Male Floridians had an age-adjusted rate of 556.9 per 100,000 per year that was also higher than the U.S. average rate of 547 cases per 100,000 found in the USCS. The USCS contains cancer statistics for approximately 84 percent of the U.S. population in 41 states, six metropolitan areas, and the District of Columbia.

Both females and males in Florida had age-adjusted incidence rates for all cancers combined similar to the Surveillance Epidemiology End Results (SEER) 9 registry rates in 2000, which reported 414 per 100,000 per year for females and 560 per 100,000 per year for males.

Compared with 1999, Florida's age-adjusted incidence rates in 2000 decreased for both sexes for all cancers combined and for the most common cancers. For males, the incidence rate for all cancers combined dropped by 6.5 per 100,000, from 563 per 100,000 in 1999 to 557 per 100,000 in 2000. However, the decrease for Florida females was negligible at 0.2 cases per 100,000, from 413.7 per 100,000 in 1999 to 413.5 per 100,000 in 2000.

White males had a higher age-adjusted incidence rate for all cancers combined (564 cases per 100,000 per year in 2000) than non-White males (466 per 100,000 per year). White females also had a higher rate for all cancers combined (431 cases per 100,000 per year) than non-White females (285 per 100,000 per year).

Cancer was the second leading cause of death in Florida in 2000, with 38,191 deaths, following heart disease with 51,124 deaths. Stroke was the third leading cause with 10,512 deaths. However, cancer ranked first in terms of potential years of life lost. With 259,801 potential years of life lost, cancer surpassed heart disease at 184,779 years lost, and accident at 162,667 years lost.

In 2000, cancer of the lung and bronchus was the leading cause of death due to cancer with 11,530 deaths. Colorectal cancer was the second, with 3,835 deaths, followed by female breast cancer with 2,640 deaths, and prostate cancer with 2,214 deaths.

The age-adjusted mortality rate for males in Florida for all cancers was 229 per 100,000 per year, 8 percent lower than the 2000 SEER mortality rate for males of 250 cases per 100,000. Female residents of Florida had an age-adjusted mortality rate of 154 per 100,000 per year, also 8 percent lower than the SEER mortality rate of 167 per 100,000.

Mortality rates for males increased slightly, from 226 deaths per 100,000 in 1999 to 229 per 100,000 in 2000. Female mortality rates increased 5 percent, from 146 per 100,000 in 1999 to 154 deaths per 100,000 in 2000.

Non-White males had a higher age-adjusted cancer mortality rate than either non-White females or Whites of either sex. The difference in prostate mortality rates was most remarkable: non-White males had a rate of 73 deaths per 100,000 from prostate cancer, three times higher than the rate for White males at 23 deaths per 100,000.



## INTRODUCTION

### BACKGROUND AND HISTORY

The *2003 Florida Annual Cancer Report: Incidence and Mortality for 2000* is the latest in a series of publications initiated in 1995 to provide updates on cancer incidence and mortality in Florida. The Bureau of Epidemiology of the Florida Department of Health in collaboration with the Florida Cancer Data System (FCDS) developed this epidemiological series.

Cancer incidence data are collected, verified and maintained by FCDS, Florida's statewide cancer registry. The FCDS is administered by the Florida Department of Health and operated by the Sylvester Comprehensive Cancer Center at the University of Miami School of Medicine.

The FCDS began operation with a pilot project for cancer registration in 1979, and commenced statewide collection of cancer incidence data from all Florida hospitals in 1981. The FCDS now collects incidence data from hospitals, freestanding ambulatory surgical centers, radiation therapy facilities, pathology laboratories, and dermatopathologists' offices.

More detailed data on cancer incidence and mortality in the state of Florida can be obtained by visiting the FCDS web site at: [www.fcds.med.miami.edu](http://www.fcds.med.miami.edu) and from the following publications: *The 2000-2001 Florida Cancer Plan* (Florida Cancer Control and Research Advisory Council, 2001); the *Florida Vital Statistics Annual Report* series (Florida Department of Health, Office of Vital Statistics); and *Florida Cancer Facts and Figures, 2001-2002* (American Cancer Society at: [www.cancer.org](http://www.cancer.org)). This report and other reports published by the Bureau of Epidemiology are available online at the Florida Department of Health web site at: [www.doh.state.fl.us/disease\\_ctrl/epi/cancer/CancerIndex.htm](http://www.doh.state.fl.us/disease_ctrl/epi/cancer/CancerIndex.htm).

### PURPOSE

The purpose of this report is to present an overview of cancer in Florida for researchers, policymakers, health professionals, and the public. This report includes the latest complete incidence and mortality data, analyzed by sex, race, age group, and county. Detailed tables show new case and death counts, and incidence and mortality rates for all cancers combined and for nine of the most prevalent cancers. Trends in cancer incidence and mortality are included to provide a perspective from which to assess the effectiveness of cancer prevention and education initiatives, new screening procedures, and treatment modalities. Population-based prevalence of cancer screening is also included to assist in planning and assessing cancer prevention programs.

This publication is intended as a tool for healthcare planning and for the design of cancer prevention programs. The information it contains should stimulate cancer research and advance the state's cancer control and surveillance activities, resulting in better prevention for the population at risk for developing cancer and improved treatment for cancer patients. The Department of Health and the FCDS welcome suggestions for enhancing the utility of this report to its readers.

### INTRODUCTION TO CONTENTS

The format of the 2003 Annual Report has been modified from previous years. This year, all cancer incidence and mortality data are presented in separate sections. Counts and rates of both cancer incidence and mortality are given by county rather than region, as well as by sex, race, and age group. Both the incidence and mortality sections include assessments of the estimated annual percent change (EAPC) in age-adjusted rates for the 10-year period, 1991 to 2000. The EAPC provides a means of quantifying changes in cancer incidence and mortality over time.

The incidence section has been expanded to include data about the stage of cancer at diagnosis since 1981 in an effort to demonstrate the effects of new or improved screening procedures and treatment methods. For individual cancers, the figures and tables showing the percentage of advanced stage cases by sex, race, and age group will identify areas where further educational efforts may be beneficial.

A new section on cancer screening from the Florida Behavioral Risk Factor Surveillance System (BRFSS) contains data with which to assess efforts in cancer screening and early detection.

In addition to counts and rates, the mortality section includes data on years of potential life lost (YPLL) to cancer and other causes of premature death, and deaths-to-cases ratios. YPLL is one measure of the comparative cost of lives lost to cancer and illustrates the need to reduce those costs. Deaths-to-cases ratios are indicators of the prognosis for various cancers.

A final section on tobacco-related cancers contains figures which show incidence and mortality for cancers known to be related to tobacco smoking. This section is presented to track the progress in eradicating a well-known destructive behavior.

### **ADJUSTMENTS SINCE THE 2002 REPORT**

In March 2003, the FCDS incorporated International Classification of Diseases for Oncology, Third Edition (ICD-O-3) coding for cancer incidence, as specified by the International Agency for Research on Cancer, and applied these changes to all cases in the incidence database – a total of about 1.5 million unduplicated cancer records. ICD-O-3 added categories for Kaposi sarcoma, previously coded as skin cancer at any of several sites, and mesothelioma, previously coded as pleura. Leukemia codes were reorganized. Certain morphologies of several sites, including lung and bronchus, and breast, are categorized as non-Hodgkin's lymphoma in ICD-O-3.

An un-duplication algorithm is used by the FCDS to determine whether multiple abstracts have been submitted for the same patient or tumor. Because of the increased specificity of ICD-O-3 codes in classifying morphologies, this algorithm has been updated. The resulting refinements have improved matching of tumor records and decreased incident cases by an average of 2 percent for each year of the 1990s, and about 1.8 percent for each year during the 1980s, compared to incidence counts before the implementation of ICD-O-3. Accordingly, age-adjusted incidence rates have decreased for those years.

Inter-censal population estimates for 1991 to 1999, which were projected based on 1990 census figures, were adjusted using the 2000 U.S. Census Bureau population data. In 2003, the FCDS recalculated rates using these adjusted population estimates. Adjusted population figures for White Floridians were lower than the original estimates for the years 1991 to 1999. The relative change, which is the difference between the original and adjusted estimates divided by the original estimated population, was small and had little impact on White rates. For non-Whites, the adjusted population is higher than the original estimate for all years since 1991. The relative change in 1999 was about 12 percent. Implementation of the ICD-O-3 un-duplication algorithm resulted in fewer incident cancer cases. The combination of fewer cases in the numerator, due to ICD-O-3 un-duplication, and increased population in the denominator of the rate calculation, from adjustment to the 2000 census, caused a considerable decrease in incidence rates for non-Whites. The incidence rate for all cancers combined for non-Whites decreased approximately 25 percent, with declines greater for males than females.

In this report, all rate calculations, including time trend analyses, used adjusted populations and ICD-O-3 un-duplicated cases. Therefore, rates in the 2003 report may be different from those in previous reports.

Another change in this report is the definition of race groups. In the *2002 Florida Annual Cancer Report: 1999 Incidence and Mortality*, races were distinguished as Black and White. This year, available population

data are divided into non-White and White. Blacks account for approximately 90 percent of the non-White population in Florida; therefore, the rates for non-Whites in this report are not comparable to the rates for Blacks in the 2002 annual report. The category “non-White” includes persons of “Other” races, who have lower incidence and mortality rates than Blacks. Adding data for “Other” races to the category of “Non-Whites” makes the rates for the combined category lower than the rates for “Blacks.”

This report includes a section on cancer screening data from the Florida BRFSS. Data on screenings for breast, cervical, and colorectal cancers within the past two years are presented at the county level. This data may assist state and county officials as they plan and evaluate cancer prevention programs.

A section about the stage of cancer at diagnosis has been added to this report. The percentage of cancers diagnosed at advanced stage, which includes all regional and distant stages, is presented for the nine major cancer sites. This information may help to quantify disparities in early cancer detection and diagnosis, and provide information for future studies.

The current report uses the category of “head and neck cancer” as a major site. This category is composed of the 10 sites grouped in previous reports as “oral cancer”, and cancers of the larynx, and middle ear and sinuses. This site grouping conforms to the University of Miami Sylvester Cancer Center Annual Report.

## METHODS

### SOURCES OF DATA

#### Incidence

The FCDS provided data on cancer incidence and stage at diagnosis. Hospitals, pathology laboratories, ambulatory surgical centers, radiation therapy facilities, and physicians' offices report new cancer cases to the FCDS. The FCDS has implemented various case-finding strategies to ensure the completeness of the database. New procedures have been introduced to adapt to changes in the healthcare industry, specifically the diagnosis and treatment of cancer in outpatient settings. As case-finding has improved over the registry's 20-year history, the completeness of the database has also improved.

A procedure referred to as "mortality follow-back" has been implemented to identify possible unreported cancer cases from death data. Death certificates are checked annually to identify cancer-related deaths and possible missed reportable cases. If no incidence record is found in the FCDS database, a cancer death is investigated to obtain a cancer incidence abstract. An incidence record is created based on the information in the death certificate only if information is not available elsewhere. Death-certificate-only cases are included in the FCDS database for all years since 1991.

A similar process implemented by FCDS in 1995 uses hospital discharge data from the Agency for Health Care Administration to identify missed cases. All hospital discharge records for patients with a diagnosis of cancer are matched to the FCDS database to identify missed cancer cases. Unmatched records are "followed-back" to the hospital to obtain complete reports. Beginning in 1997, the follow-back procedure has been employed to ascertain new cases from cancer-related patient encounters in ambulatory centers.

The incidence rates in this report are based on cancers diagnosed among those who are Florida residents at the time of diagnosis and do not include cancers diagnosed before a person moved to Florida. Most cancers diagnosed among Florida residents living in other states are included in the FCDS database through sharing of cancer incidence data among states, according to the NAACCR Procedure Guidelines, Series I, Data Exchange, page two. Cases are tallied according to the year of initial diagnosis. Persons with multiple primary cancers contribute multiple records to the database.

The NAACCR has established guidelines to evaluate data from its member registries. Six criteria measure data quality, timeliness, and completeness. The FCDS achieved the highest standard defined by NAACCR and received gold certification for quality, completeness and timeliness for its 2000 data in May 2003.

#### Mortality

Information on cancer mortality and the demographics of the deceased is obtained from death certificates supplied by the Office of Vital Statistics of the Florida Department of Health. Cancer deaths are defined as those for which the underlying cause of death on the death certificate is cancer. In this report, underlying cause of death is coded with the International Classification of Diseases, Tenth Edition (ICD-10).

#### Population

The Florida Consensus Estimating Conference provided population estimates for 2000, as well as adjusted population estimates for 1991 to 1999. Population figures for 2000 are presented in Appendix A.1 for the state as a whole and for each sex, race, and age group, and in Appendix A.2 for all Florida counties. Appendix B shows population for all years since 1981 by sex and age group.

The 2000 U.S. standard population was first used in 2001 for the *1998 Florida Annual Cancer Report* to calculate age-adjusted incidence and mortality rates, which follows national reporting guidelines. Incidence and mortality rates standardized to the 2000 population cannot be compared to those standardized to another population, for example, the 1970 U.S. standard population. Therefore, the age-adjusted rates reported here cannot be meaningfully compared to those displayed in Florida Annual Cancer Reports prior to 1998. For trend analyses, all rates in this report have been age-adjusted to the 2000 standard. For more information about the differences in rates due to age-adjustment with these standard populations, see “Age-adjusting to the Year 2000 Standard” under the heading “Education and Training, Training Modules Online” at the NAACCR web site at: [www.naacr.org](http://www.naacr.org).

## **Screening**

The Florida BRFSS survey conducted in 2002 provided data on the prevalence of cancer screening among Floridians. The Florida BRFSS is part of a larger, ongoing initiative sponsored by the Centers for Disease Control and Prevention (CDC) to survey and monitor major behavioral risks for premature morbidity and mortality among adults. The Florida BRFSS is an anonymous telephone survey of adults aged 18 and older in households with telephones. Respondents are randomly selected to ensure that survey data are representative of all adults. More information about the Florida BRFSS can be found on the CDC web site at: [www.cdc.gov/brfss](http://www.cdc.gov/brfss).

## **DEFINITIONS**

### **Race**

The FCDS collects information on the racial and ethnic background of each person diagnosed with cancer in Florida. For this analysis, comparisons are made between two race groups, “White” and “non-White.” These two groups include all of Florida’s population. Both categories include persons from a variety of ethnic groups.

### **Incidence**

Incidence is defined as the number of new occurrences of cancer diagnosed in the population at risk. The population considered at risk for cancer in this report is the entire resident population of Florida in 2000. Specifying other population characteristics, such as sex, race, or ethnicity, further defines the population at risk of developing cancer. Cases that have been reported by separate facilities are un-duplicated to ensure that incidence figures are not inflated by two or more separate reports for the same cancer in one individual.

### **Mortality**

Mortality is defined as the number of deaths in the population at risk. The population considered at risk in this report is the entire resident population of Florida in 2000. Mortality is further examined based on characteristics such as sex, race, and age. Improvements in cancer treatment, as well as changes in cancer incidence, affect cancer mortality rates.

### **Prevalence of Cancer Screening**

The prevalence of cancer screening from the Florida BRFSS survey data is adjusted, or “weighted,” so that the resulting estimates can be generalized to a county’s entire population, not just those who responded to the survey. Data weighting is a statistical process, which includes the consideration of factors such as: (1) the number of residential telephones per household; (2) the number of adults in a household; (3) geographic or density stratification; and (4) sex, race, and age distribution of the population.

Prevalence in the Florida BRFSS survey is an estimate of true population prevalence; consequently, when prevalence is derived from a sample rather than a census of a population, sampling errors occur. Because sampling errors are inherent in this type of survey, we calculate 95 percent confidence intervals (CI) for each prevalence estimate to determine the accuracy of that estimate. A 95 percent confidence interval is the range in which the true population prevalence is likely to be found 95 percent of the time. A smaller confidence interval indicates greater accuracy in the estimated prevalence.

### Crude Rates

The crude rate of cancer is the total number of new cancer cases diagnosed, or cancer deaths, in Florida residents in a given period divided by the total population at risk in that period. Crude rates are expressed per 100,000 persons per year. The calculation of crude rate (**m**) can be written as:

$$m=N/P \times 100,000$$

where **N** is the total number of new cases or deaths, and **P** is the population at risk.

### Age-Specific Rates

The age-specific rate is the number of new cancer cases or deaths occurring in persons in any given age group divided by the population in that age group in a given period expressed per 100,000 persons. The age specific rate ( $\lambda_i$ ) is calculated as:

$$\lambda_i=n_i/p_i \times 100,000$$

where **i** is the age group, **n<sub>i</sub>** is the number of new cancer cases (or deaths) in the age group, and **p<sub>i</sub>** is the population at risk in the age group. For the rate calculations in this report, age groups are defined for each five-year interval of age: 0 to 4, 5 to 9, 10 to 14, etc.

### Age-Adjusted Rates

Age distribution may differ for the populations of different geographical areas and may change over time for any one area. Because cancer is more common in the elderly, areas or populations with a higher proportion of older people will generally have higher crude cancer incidence rates. Age-adjusted rates are used to make comparisons between rates in different years, areas, or populations. The cancer incidence and mortality rates presented in this report are age-adjusted to a standard age distribution representative of the U.S. population by the direct method. The standard population used in this report is the 2000 U.S. standard population, in accordance with a 1998 U.S. Department of Health and Human Services recommendation. The age-adjusted rate ( $\Lambda$ ) is defined as:

$$\Lambda=\sum(\lambda_i w_i)$$

where **i** is the age group,  $\lambda_i$  is the age-specific rate for an age group, and **w<sub>i</sub>** is the proportion of individuals in the standard population in that age group.

Rates adjusted to the 2000 U.S. standard population are not comparable to age-adjusted rates calculated with a different standard population, such as those shown in pre-1998 Florida Annual Cancer Reports.

### Deaths-to-Cases Ratios

The deaths-to-cases ratios shown in the mortality section of this report are calculated by dividing the number of deaths in a given year by the number of new cancers diagnosed in the same year. The deaths-to-cases ratio provides a simplified indication of the prognosis for patients with different types of cancer. A ratio approaching 1.0, when the number of deaths nearly equals the number of new cases for a particular type of

cancer, indicates a poor prognosis. A lower ratio indicates fewer deaths relative to the number of cases and suggests a better prognosis. Ratios greater than 1.0 are possible when deaths occur from cancers diagnosed in previous years, causing the number of deaths to exceed the number of new cancers diagnosed for a particular year.

### **Estimated Annual Percent Change (EAPC)**

The EAPC is an average change in incidence or mortality rates over a period. The assumption for EAPC is that the change in rates over time is linear, increasing or decreasing with only small variations. The EAPC values are calculated for each site using regression procedures to fit a linear weighted least squares model to the log of age-adjusted rates for the period. The EAPC is calculated as:

$$100*(\exp b-1)$$

where **b** is the slope of the model  $\ln(\text{rate})= a+b*(\text{year})+e$ , **a** is a constant, and **e** is the error term.

The most recent 10-year period, 1991 to 2000, is analyzed to give a reliable and current estimate for the EAPC. The statistical significance of the EAPC is tested at a 95 percent confidence interval.

### **Years of Potential Life Lost (YPLL)**

The burden of cancer is not entirely explained by counts or rates of incidence and mortality. There are indirect costs to society due to cancer, such as diminished quality of life and years of potential life lost (YPLL). The YPLL is an estimate of the impact of deaths from cancer on life expectancy. For each death of a Florida resident recorded in 2000, the age at death is subtracted from 75 for those who died at age 74 or younger. Deaths at age 75 and older do not contribute to YPLL. These numbers are then summed to give the total YPLL. Due to an increase in life expectancy, Department of Health publications such as *Vital Statistics and Data Analysis* have changed the standard for YPLL calculations from 65 to 75 in recent years. For consistency, the same standard is used in this publication.

### **Childhood Cancers**

Childhood cancers are defined as those that occur in children from birth to age 14. Some childhood cancers, such as Wilms tumors, can be identified for incidence, but not for mortality. This report includes only the broader categories of childhood cancers permitted by the ICD-10 classification. Incidence and mortality rates for childhood cancer are computed per 1,000,000 children, age 14 and younger.

### **Advanced Stage**

In this report, advanced stage cancer is defined as regional stage cancer and distant stage cancer. Regional stage cancer is cancer that has grown beyond the primary (original) tumor to nearby lymph nodes, organs or tissues. Distant stage cancer refers to cancer that has spread from the original tumor to distant organs or distant lymph nodes.

### **CLASSIFICATION**

*In situ* cancers are tumors that fulfill all the microscopic criteria for malignancy except invasion through the basement membrane. *In situ* cancers are considered early cancers that have not spread to neighboring tissue. Classification of these tumors is not uniform across pathologists (Schottenfeld and Fraumeni, 1996, page 159), yielding less reliable reporting of *in situ* cancers than of later-stage cancers. Therefore, the cancer incidence figures reported here exclude *in situ* cancers except for bladder cancer. For all other cancer sites, local, regional, distant, and cancers of unknown stage are included in the counts and the incidence rates.

The cancer sites for which incidence data are presented are classified according to the *International Classification of Diseases for Oncology, Third Edition* (ICD-O-3), World Health Organization, 2000. The *Tenth Revision of the International Classification of Diseases* (ICD-10), World Health Organization, 1998, is used for classification of cancer deaths. At the level of analysis used in this report, these two classification systems are consistent and yield comparable data for incidence and mortality for the individual and grouped cancer sites presented here.

Rules for coding multiple tumors in one individual as a single cancer or as multiple primary cancers are specified in the *Surveillance, Epidemiology and End Results (SEER) Program Code Manual*, National Institutes of Health, 1998. The site of origin, diagnosis dates, histology, and laterality are the major factors employed to determine whether a group of tumors should be coded as single or multiple. Special rules are used to define multiple primaries of the lymphatic and hematopoietic systems.

Data on most non-melanoma skin cancers, ICD-O-3 codes C44.\_\_, and ICD-9 code 173 or ICD-10 code C44.\_\_, are not included in this report since the majority of these cancers are not reportable to FCDS and are not included in the FCDS incidence database.

## REPORTED CANCER SITES

### Major Sites

In this report, we display and analyze data about the eight cancer sites and groups with the highest number of incident cases, plus cervical cancer. The top eight sites – lung and bronchus, prostate, female breast, colorectal, bladder, head and neck, non-Hodgkin's lymphoma, and melanoma – account for 72 percent of the incident cancers in Florida in the year 2000. Cervical cancer is included as the ninth site because of the availability of a screening test and the potential to reduce late stage occurrences of this cancer.

Cancer of the pancreas is one of the top eight cancers in terms of mortality. To maintain consistency, pancreatic cancer has been omitted from the report, except in Figures 1 and 11, where a comprehensive set of 22 cancers is displayed by percentage of new cases and deaths.

Thirty reported cases and seven deaths from melanoma in non-Whites are omitted from the report, since these numbers are too low to perform any significant analysis. Non-White melanoma is included as a percentage of total new cases and deaths in Figures 1 and 11. The 143 new cases of male breast cancer in 2000 have also been omitted from all tables and figures, except as part of total counts and rates.

### Other Sites

The "All Other" cancer site category used in Figures 1 and 11 includes the following types of cancer: small intestine, anus, intrahepatic bile duct, gallbladder, other biliary, retroperitoneum, peritoneum, omentum, mesentery, other digestive organs, bones and joints, soft tissue and heart, nasal cavity, accessory sinuses, pleura, trachea, mediastinum and other respiratory organs, uterus NOS, vagina, vulva, other female genital organs, testis, penis, and other male genital organs, ureter and other urinary organs, eye and orbit, thymus and other endocrine glands, Hodgkin's lymphoma, mesothelioma, Kaposi sarcoma, and ill-defined and unspecified sites. The ICD-O-3 codes and ICD-10 codes for these and other sites used in the report are tabulated in Appendix D.

### Tobacco-Related Cancers

Cancers found to be related to tobacco use include cancers of the lung and bronchus, esophagus, pancreas, cervix, bladder, kidney, and head and neck cancers. According to the *Smoking-Attributable Mortality Report*, Florida Department of Health, 2000, about 70 percent of these cancers are attributable to tobacco use.



## CANCER INCIDENCE

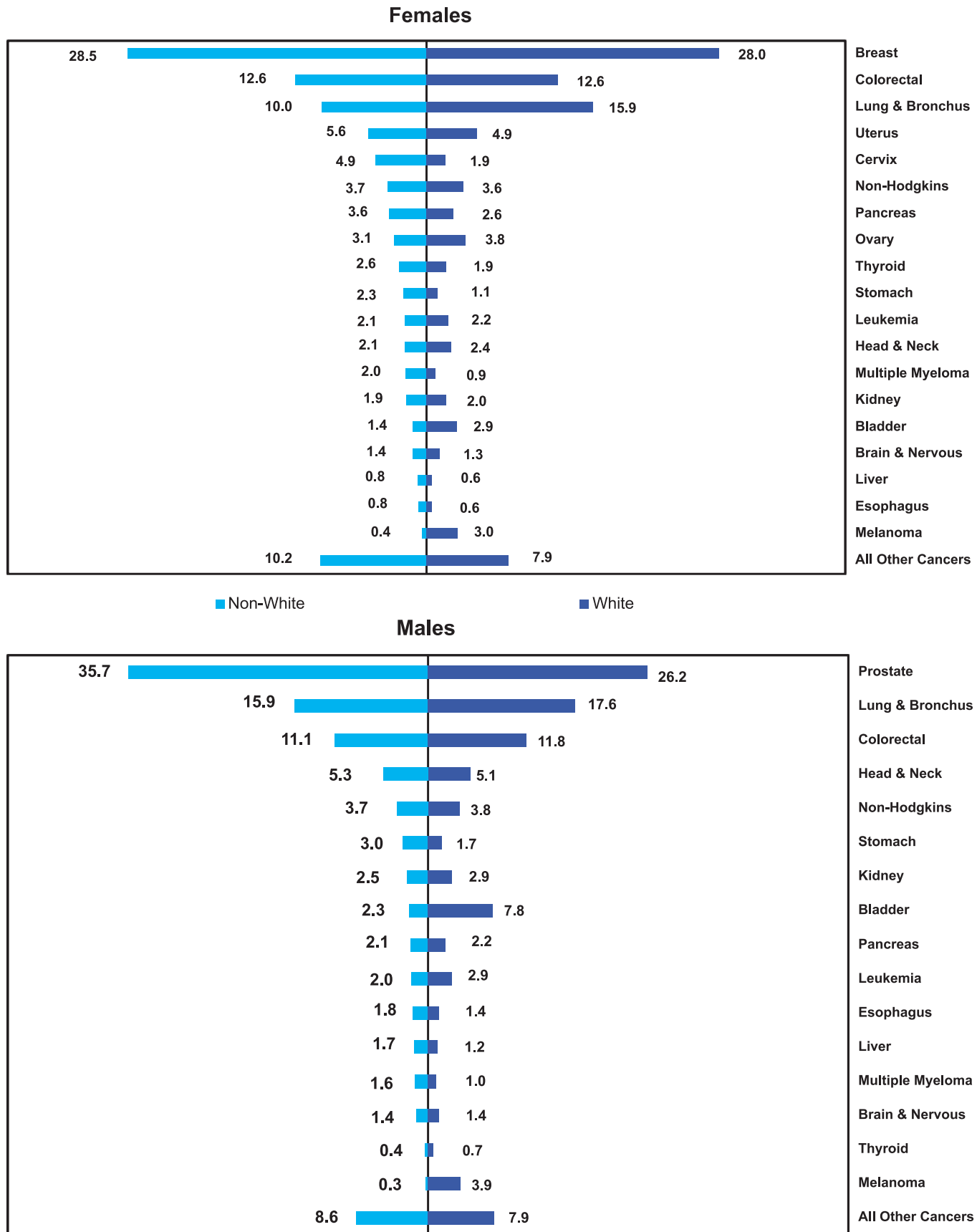
### NEW CASES AND AGE-ADJUSTED INCIDENCE RATES

In 2000, 94,630 new primary cancers were diagnosed in Florida residents, including 782 cases submitted with unknown race and 43 cases with unknown sex. This is a decrease of 890 cases, or 0.9 percent, from the 95,520 new cancer cases reported in 1999. Part of this decrease may be due to fewer new cancers diagnosed in Florida in 2000. However, the decrease is less than the observed 2 percent average decrease in each of the past nine years that resulted from the improved un-duplication algorithm based on ICD-O-3 cancer coding, which eliminates multiple reports of the same cancer. Please refer to “Adjustments since the 2002 Report” in the Introduction for a discussion of the effects of ICD-O-3 un-duplication.

### Percentage of New Cases

- For females, the top five cancers in non-Whites were breast, colorectal, lung and bronchus, uterus, and cervix. Among White females, the top five were breast, lung and bronchus, colorectal, uterus, and ovary.
- Non-White females had higher percentages of colorectal, cervical, thyroid, and stomach cancers, and multiple myeloma. However, they had lower percentages of smoking-related cancers than White females, which include cancers of the lung and bronchus, head and neck, and bladder.
- For males, the top five cancers in non-Whites were prostate, lung and bronchus, colorectal, bladder, and head and neck. In White males, the top three cancers were the same, followed by head and neck cancer, and non-Hodgkin’s lymphoma.
- Prostate cancer accounted for 36 percent of all cancer in non-White males, 26 percent in White males. In non-White males, the percentage of stomach cancer was nearly double that in White males (3.0 percent versus 1.7 percent), but bladder cancer was less than one-third the percentage in White males (2.3 percent versus 7.8 percent).

Figure 1. Percentage of New Cancers by Sex, Race, and Site, Florida, 2000



## Sex and Race

### ***New Cases***

- Of the 94,630 new cancer cases in 2000, 8.7 percent were diagnosed in non-Whites and 90.5 percent in Whites. The remaining 782 cases, 0.8 percent, were those submitted without race information on the abstracts. Fifty-three percent of all new cancers were diagnosed in males.
- The age-adjusted incidence rate for all cancers combined in males (556.9 per 100,000) was 2.5 times higher than for females (413.5 per 100,000); males had higher rates than females for all major cancers.
- The three most common cancers for females in 2000 were breast, lung and bronchus, and colorectal cancers. Uterine and ovarian cancers ranked fourth and fifth with 2,169 and 1,653 cases, respectively. These five top sites comprised 65 percent of new female cancers in 2000.
- In males, prostate cancer was the most frequently diagnosed cancer, followed by cancer of the lung and bronchus, colorectal cancer, and bladder cancer. Head and neck cancer replaces non-Hodgkin's lymphoma as fifth in the top cancer sites for 2000. These sites accounted for 68.5 percent of all new cancers in males.
- Prostate cancer cases accounted for more than one-third of the total new cancers in males and were about 50 percent more frequent than cancers of the lung and bronchus, the second leading cancer site.
- The number of bladder cancers in males was three times greater than the number in females. Compared to females, males had more than twice as many cases of head and neck cancers.
- Non-Whites had lower age-adjusted rates for all cancers combined and for the most common cancers, except prostate and cervical cancers.
- The six most common cancers among non-Whites were prostate, breast, lung and bronchus, colorectal, head and neck, and non-Hodgkin's lymphoma, accounting for 65.2 percent of all new primary cancers.
- Among Whites, the eight most commonly diagnosed cancers were the same as the top sites included in this report, since about 90 percent of new cancers were diagnosed in this race group. These sites are lung and bronchus, prostate, breast, colorectal, bladder, head and neck, non-Hodgkin's lymphoma, and melanoma. Together, these eight cancers comprised 73 percent of all cancers diagnosed in 2000 among Whites.

### ***Age-Adjusted Rates***

Populations in Florida differ substantially in size and age structure between females and males as well as between non-Whites and Whites (see Appendix A.1). Age-adjusted rates are the only means by which to make meaningful comparisons of rates and to assess the disparate burden of cancer by gender and racial group.

- For all cancers combined, the age-adjusted cancer incidence rate was 475.1 per 100,000 in 2000. Prostate, breast, and colorectal cancers had the highest incidence rates in Florida.
- The incidence rate for all cancers combined was higher in Whites at 488.2 per 100,000 than in non-Whites at 359.1 per 100,000.

- Whites had higher incidence rates than non-Whites for all major cancer sites except prostate and cervix. The difference in age-adjusted incidence rates of prostate cancer was striking; non-Whites had a rate 24 percent higher than Whites. Non-White females had a 16 percent higher incidence rate for cervical cancer than White females.
- Age-adjusted rates in Whites were more than 233 percent higher than in non-Whites for bladder cancer, 64 percent higher for breast cancer, and 58 percent higher for cancer of the lung and bronchus.
- Age-adjusted incidence rate for all cancers combined was higher among White males (564.1 cases per 100,000 per year) than among non-White males (465.9 per 100,000). The rates for all major cancer sites were higher among White males than among non-White males, except prostate cancer.
- Among females, the age-adjusted incidence rate for all cancers combined was higher for Whites (431.2 per 100,000) than for non-Whites (359.1 per 100,000). Cancers of the lung and bronchus and breast were largely responsible for this difference.
- Except cervical cancer, White females had higher age-adjusted incidence rates for all major cancer sites than non-White females. The rates among White females were three times as much for bladder cancer (11.2 per 100,000) as non-White females (4.5 per 100,000); more than twice the rate of lung cancer (63.5 per 100,000) as non-White females (30.2 per 100,000); almost double the rate of head and neck cancer at 10.5 per 100,000 versus 5.7 per 100,000; and a 40 percent higher rate of breast cancer at 77.7 per 100,000 versus 127.7 per 100,000 than non-White females.

**Table 1.  
Number of New Cases and Age-Adjusted Incidence Rates (1) by Sex and Race, Florida, 2000**

	All Cancers	Lung & Bronchus	Prostate	Breast	Colorectal	Bladder	Head & Neck	Non-Hodgkins (2)	Melanoma	Cervix
<b>Florida (3)</b>	<b>94,630</b>	<b>15,533</b>	<b>13,600</b>	<b>12,390</b>	<b>11,464</b>	<b>4,952</b>	<b>3,619</b>	<b>3,532</b>	<b>3,183</b>	<b>939</b>
Female	44,199	6,782		12,390	5,546	1,243	1,054	1,601	1,288	939
Male	50,388	8,739	13,600		5,911	3,708	2,562	1,928	1,891	
Non-White	8,214	1,082	1,587	1,076	969	154	313	305	30	184
White	85,634	14,392	11,908	11,225	10,404	4,754	3,269	3,195	3,015	744
Non-White Female	3,769	378		1,076	474	52	78	141	16	184
White Female	40,072	6,381		11,225	5,032	1,181	962	1,447	1,216	744
Non-White Male	4,440	704	1,587		494	101	234	164	14	
White Male	45,532	8,003	11,908		5,367	3,573	2,305	1,746	1,795	
<b>Florida Rates (3)</b>	<b>475.1</b>	<b>75.5</b>	<b>145.5</b>	<b>121.3</b>	<b>55.7</b>	<b>23.6</b>	<b>18.9</b>	<b>18.1</b>	<b>18.6</b>	<b>10.8</b>
Female	413.5	59.9		121.3	47.9	10.5	10.0	14.7	14.8	10.8
Male	556.9	95.2	145.5		65.3	40.7	29.2	22.2	23.5	
Non-White	359.1	49.5	173.9	77.7	45.3	7.6	13.0	11.5	1.4	12.4
White	488.2	78.3	140.9	127.5	56.4	25.3	19.6	18.6	18.6	10.7
Non-White Female	285.0	30.2		77.7	38.6	4.5	5.7	10.0	1.3	12.4
White Female	431.2	63.5		127.5	48.6	11.2	10.5	15.0	14.8	10.7
Non-White Male	465.9	76.9	173.9		54.6	11.8	22.2	13.2	1.5	
White Male	564.1	96.9	140.9		65.8	43.3	30.1	22.9	23.5	

(1) Rates are expressed as number of cases per 100,000 population per year, adjusted to the 2000 U.S. standard population.

(2) Non-Hodgkins refers to Non-Hodgkin's lymphoma throughout this report.

(3) Florida total counts and rates include 782 new cases with unknown race and 43 cases with unknown sex.

## Age Group

Cancer occurs predominantly among older people. Sixty-four percent of new cancer cases in 2000 were diagnosed in people age 65 and older. This age group makes up 17.5 percent of Florida's population.

## New Cases

- For all cancers combined in 2000, the largest number of cancers occurred in Florida residents age 75 and older. This age group also has the greatest number of cancers of the lung and bronchus, colorectal, bladder, and non-Hodgkin's lymphoma.
- Melanoma occurred with equal frequency in the 45 to 64 age group and in the 75 and older age group. Prostate cancer occurred most frequently in the 65 to 75 age group, and breast and head and neck cancers in the 45 to 64 age group. Cervical cancer occurred most frequently at the youngest age, among females age 20 to 44, of all the top cancers.
- For all cancers combined, males had the most new cases in the 65 to 74 age group, mainly due to the large number of prostate cancers diagnosed in this age group. In females, cancers were diagnosed most frequently at age 75 and older.
- About 98 percent of cancer of the lung and bronchus and 99.7 percent of prostate cancer occurred in males age 45 and older.
- Fifty-one percent of new breast cancer cases were diagnosed in females aged 65 and older.
- Among non-Whites, all cancers combined and most major cancers occurred most often in the 45 to 64 age group. The exceptions were bladder cancer, which occurred most frequently in the 75 and older age group, and non-Hodgkin's lymphoma with nearly equal numbers of cases reported for 20 to 44 age group and 45 to 64 age group.
- Among White females, more than half of the colorectal cancer cases were diagnosed at age 75 and older. For non-White females, about one-third of colorectal cancer cases were diagnosed in the 45 to 64 age group.

**Table 2.1**  
**Number of New Cases by Sex, Race, and Age Group, Florida, 2000**

		All Cancers	Lung & Bronchus	Prostate	Breast	Colorectal	Bladder	Head & Neck	Non-Hodgkins	Melanoma	Cervix
<b>Florida (1)</b>		<b>94,630</b>	<b>15,533</b>	<b>13,600</b>	<b>12,390</b>	<b>11,464</b>	<b>4,952</b>	<b>3,619</b>	<b>3,532</b>	<b>3,183</b>	<b>939</b>
All	0- 19	679	^	^	^	^	^	^	57	17	^
	20-44	6,183	335	45	1,268	400	101	248	413	497	396
	45-64	26,882	4,190	3,658	4,768	2,666	965	1,528	898	935	334
	65-74	28,513	5,436	5,853	3,055	3,263	1,538	976	880	794	110
	75+	32,373	5,570	4,044	3,299	5,134	2,345	858	1,284	940	99
Female	0-19	294	^	^	^	^	^	^	11	10	^
	20-44	3,788	155	^	1,268	185	22	79	159	255	396
	45-64	13,074	1,780	^	4,768	1,205	224	381	366	398	334
	65-74	11,518	2,277	^	3,055	1,391	360	275	434	285	110
	75+	15,525	2,570	^	3,299	2,765	636	315	631	340	99
Male	0-19	385	^	^	^	^	^	^	46	^	^
	20-44	2,394	179	45	^	215	79	169	254	242	^
	45-64	13,799	2,408	3,658	^	1,458	741	1,146	532	537	^
	65-74	16,981	3,153	5,853	^	1,872	1,177	699	445	508	^
	75+	16,829	2,997	4,044	^	2,365	1,709	543	651	597	^
Non-White	0-19	125	^	^	^	^	^	^	10	^	^
	20-44	972	59	12	220	79	^	28	107	^	66
	45-64	3,315	449	655	524	357	45	176	103	^	74
	65-74	2,162	336	623	187	260	48	72	48	^	32
	75+	1,640	238	297	145	273	55	36	37	^	12
White	0- 19	547	^	^	^	^	^	^	47	17	^
	20-44	5,124	273	32	1,039	318	95	215	297	472	321
	45-64	23,323	3,723	2,968	4,204	2,285	910	1,335	787	892	259
	65-74	26,144	5,085	5,189	2,847	2,975	1,476	896	825	752	78
	75+	30,496	5,309	3,719	3,135	4,825	2,271	815	1,239	882	86
NW Female	0-19	51	^	^	^	^	^	^	^	^	^
	20-44	618	26	^	220	38	^	10	43	^	66
	45-64	1,464	147	^	524	161	13	41	47	^	74
	65-74	841	118	^	187	116	15	15	27	^	32
	75+	795	87	^	145	159	23	12	22	^	12
W Female	0-19	237	^	^	^	^	^	^	^	10	^
	20-44	3,126	129	^	1,039	146	21	67	114	244	321
	45-64	11,504	1,627	^	4,204	1,033	209	335	317	382	259
	65-74	10,588	2,154	^	2,847	1,265	342	256	405	265	78
	75+	14,617	2,471	^	3,135	2,588	608	300	602	315	86
NW Male	0-19	74	^	^	^	^	^	^	^	^	^
	20-44	354	33	12	^	41	^	18	64	^	^
	45-64	1,849	302	655	^	195	32	135	56	^	^
	65-74	1,319	218	623	^	144	32	56	21	^	^
	75+	844	151	297	^	114	32	24	15	^	^
W Male	0-19	310	^	^	^	^	^	^	38	^	^
	20-44	1,998	144	32	^	172	74	148	183	228	^
	45-64	11,815	2,095	2,968	^	1,250	701	999	470	510	^
	65-74	15,546	2,926	5,189	^	1,710	1,134	639	420	486	^
	75+	15,863	2,836	3,719	^	2,234	1,663	515	635	564	^

(1) Florida total includes 782 new cases with unknown race and 43 cases with unknown sex.

^ Statistics are not displayed for fewer than 10 cases.

NW = Non-White / W = White

### ***Age-Specific Rates***

- The 75 and older age group had the highest age-specific cancer rates for all cancers combined and for most of the major cancer sites. The exceptions were prostate, head and neck, and cervical cancers, which had the highest age-specific rates in the 65 to 74 age group.
- Whites had higher crude and age-specific rates than non-Whites for all cancers combined and for all major cancer sites, except prostate and cervical cancer.
- For bladder cancer, the crude rate for Whites (37.9 per 100,000) was nearly nine times greater than the rate for non-Whites (4.3 per 100,000). White males had a crude rate of 58.4 per 100,000, ten times the rate of 5.8 per 100,000 in non-White males.
- Males had higher age-specific rates than females in most age groups and for most cancer sites. However, females in the 20 to 44 age group had a higher age-specific rate than males for all cancers combined and a slightly higher rate of melanoma.
- In males, prostate and head and neck cancers had the highest age-specific rates in the 65 to 74 age group. Rates were highest for all other top cancer sites in the 75 and older age group.
- The age-specific incidence rate for cervical cancer was the highest in the 45 to 64 age group for all females, and was the highest in the 65 to 74 age group among non-White females.



**Table 2.2**  
**Age-Specific Incidence Rates (1) by Sex and Race, Florida, 2000**

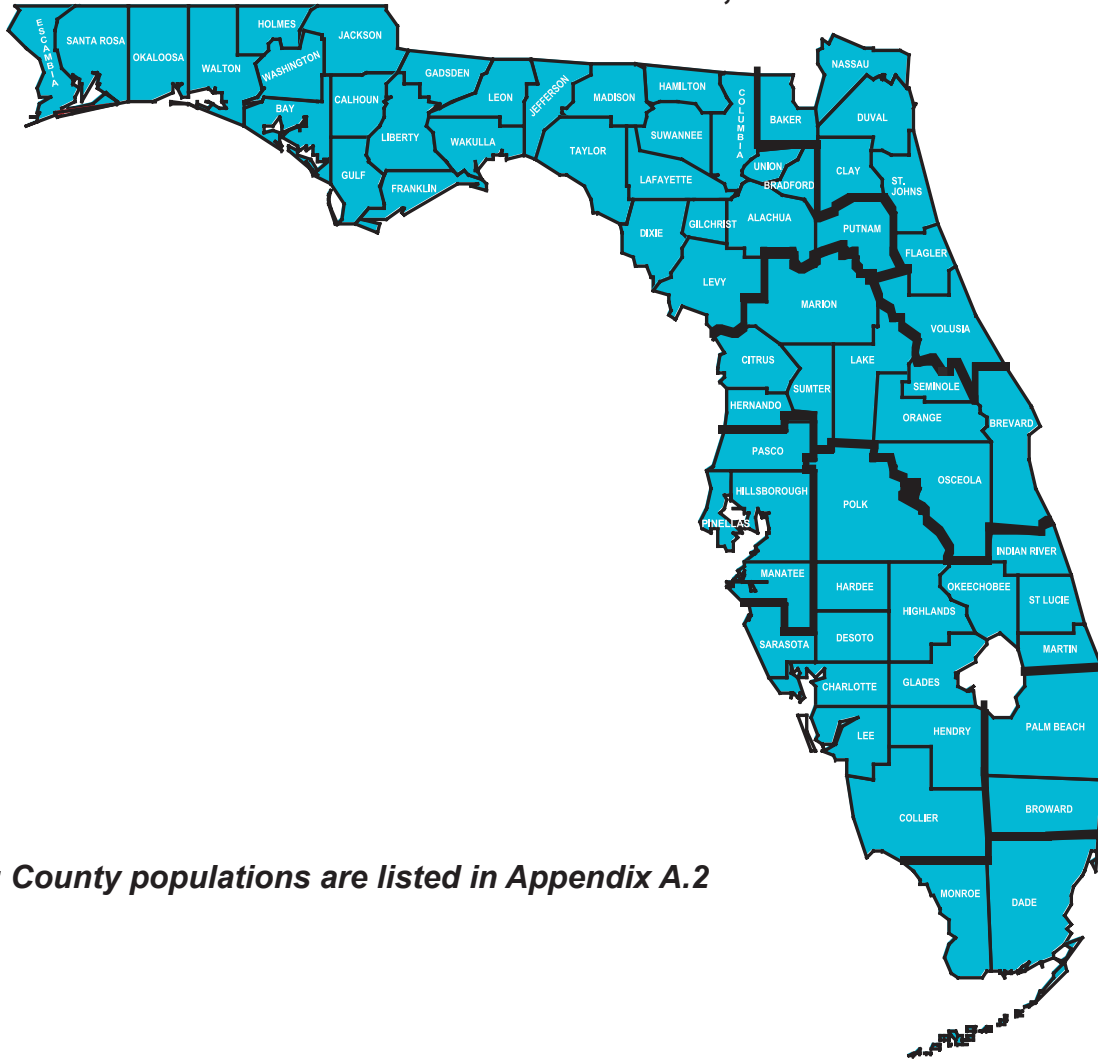
	All Cancers	Lung & Bronchus	Prostate	Breast	Colorectal	Bladder	Head & Neck	Non-Hodgkins	Melanoma	Cervix
<b>All</b>										
0-19	16.6	^	^	^	^	^	^	1.4	0.6	^
20-44	112.1	6.1	1.6	46.3	7.3	1.8	4.5	7.5	11.5	14.5
45-64	733.6	114.3	208.4	249.7	72.8	26.3	41.7	24.5	29.3	17.5
65-74	1,962.5	374.1	874.2	390.0	224.6	105.9	67.2	60.6	57.4	14.0
75+	2,385.7	410.5	735.8	408.6	378.3	172.8	63.2	94.6	69.8	12.3
<b>Female</b>										
0-19	14.8	^		^	^	^	^	0.6	0.7	^
20-44	138.3	5.7		46.3	6.8	0.8	2.9	5.8	12.1	14.5
45-64	684.7	93.2		249.7	63.1	11.7	20.0	19.2	24.2	17.5
65-74	1,470.4	290.7		390.0	177.6	46.0	35.1	55.4	37.8	14.0
75+	1,922.9	318.3		408.6	342.5	78.8	39.0	78.2	42.1	12.3
<b>Male</b>										
0-19	18.4	^	^		^	^	^	2.2	^	
20-44	86.3	6.5	1.6		7.8	2.8	6.1	9.2	11.0	
45-64	786.3	137.2	208.4		83.1	42.2	65.3	30.3	34.8	
65-74	2,536.1	470.9	874.2		279.6	175.8	104.4	66.5	80.0	
75+	3,062.0	545.3	735.8		430.3	311.0	98.8	118.4	109.3	
<b>Non-White</b>										
0-19	9.8	^	^	^	^	^	^	0.8		^
20-44	68.8	4.2	1.7	30.6	5.6	^	2.0	7.6		9.2
45-64	535.2	72.5	226.5	158.7	57.6	7.3	28.4	16.6		22.4
65-74	1,506.4	234.1	1,004.0	229.5	181.2	33.4	50.2	33.4		39.3
75+	1,759.6	255.4	885.2	243.1	292.9	59.0	38.6	39.7		20.1
<b>White</b>										
0-19	19.5	^	^	^	^	^	^	1.7	0.6	^
20-44	125.0	6.7	1.5	51.4	7.8	2.3	5.2	7.2	11.5	15.9
45-64	765.9	122.3	202.5	266.2	75.0	29.9	43.8	25.8	29.3	16.4
65-74	1,996.7	388.4	854.1	405.6	227.2	112.7	68.4	63.0	57.4	11.1
75+	2,413.1	420.1	720.7	419.3	381.8	179.7	64.5	98.0	69.8	11.5
<b>NW Female</b>										
0-19	8.1	^		^	^	^	^	^		^
20-44	86.0	3.6		30.6	5.3	^	1.4	6.0		9.2
45-64	443.4	44.5		158.7	48.8	3.9	12.4	14.2		22.4
65-74	1,032.3	144.8		229.5	142.4	18.4	18.4	33.1		39.3
75+	1,332.8	145.8		243.1	266.6	38.6	20.1	36.9		20.1
<b>W Female</b>										
0-19	17.4	^		^	^	^	^	^	0.7	^
20-44	154.7	6.4		51.4	7.2	1.0	3.3	5.6	12.1	15.9
45-64	728.4	103.0		266.2	65.4	13.2	21.2	20.1	24.2	16.4
65-74	1,508.5	306.9		405.6	180.2	48.7	36.5	57.7	37.8	11.1
75+	1,954.9	330.5		419.3	346.1	81.3	40.1	80.5	42.1	11.5
<b>NW Male</b>										
0-19	11.4	^	^		^	^	^	^		
20-44	51.0	4.8	1.7		5.9	^	2.6	9.2		
45-64	639.3	104.4	226.5		67.4	11.1	46.7	19.4		
65-74	2,125.7	351.3	1,004.0		232.1	51.6	90.3	33.8		
75+	2,515.6	450.1	885.2		339.8	95.4	71.5	44.7		
<b>W Male</b>										
0-19	21.4	^	^		^	^	^	2.6	^	
20-44	96.1	6.9	1.5		8.3	3.6	7.1	8.8	11.0	
45-64	806.0	142.9	202.5		85.3	47.8	68.2	32.1	34.8	
65-74	2,559.0	481.6	854.1		281.5	186.7	105.2	69.1	80.0	
75+	3,073.9	549.6	720.7		432.9	322.3	99.8	123.1	109.3	

(1) Rates are expressed as number of cases per 100,000 population per year.

^ Statistics are not displayed for fewer than 10 cases.

NW = Non-White / W = White

## MAP OF FLORIDA, 2000



**Note:** County populations are listed in Appendix A.2

### County

Tables 3.1 and 3.2 provide county-level data for county health departments and planners who may require cancer information for individual counties, and for residents interested in a county's cancer rates. In many instances, the number of cases is very small at the county level, especially for individual cancer sites. The natural random fluctuation of cancer occurrences has great impact on these small numbers. Therefore, rates may be less stable for counties with small numbers of cases, and comparisons should be made only with extreme caution.

### New Cases

- The number of cases varied considerably from county to county, depending primarily on the population of the county. The five counties with the greatest number of new cancer cases were those with the largest populations: Miami-Dade, Broward, Palm Beach, Pinellas, and Hillsborough. Cases in these five counties accounted for 42 percent of all cancer in Florida.
- Thirty of Florida's 67 counties had fewer than 300 new cancer cases in 2000.
- Three counties had fewer than 30 new cases: Glades, Lafayette, and Liberty. These three also have the lowest populations – less than 11,000 residents.

**Table 3.1**  
**Number of New Cases by County, Florida, 2000**

	All Cancers	Lung & Bronchus	Prostate	Breast	Colorectal	Bladder	Head & Neck	Non-Hodgkins	Melanoma	Cervix
<b>Florida (1)</b>	<b>94,630</b>	<b>15,533</b>	<b>13,600</b>	<b>12,390</b>	<b>11,464</b>	<b>4,952</b>	<b>3,619</b>	<b>3,532</b>	<b>3,183</b>	<b>939</b>
Alachua	851	114	120	140	106	34	36	35	28	^
Baker	93	15	10	17	^	^	^	^	^	^
Bay	823	158	106	109	107	32	29	26	48	^
Bradford	110	19	14	13	12	^	^	^	^	^
Brevard	3,093	517	526	402	341	202	81	104	93	16
Broward	9,241	1,377	1,100	1,255	1,198	482	365	410	367	125
Calhoun	56	13	^	^	^	^	^	^	^	^
Charlotte	1,306	223	215	152	175	84	43	49	31	^
Citrus	1,065	215	191	128	136	46	31	42	20	^
Clay	591	115	70	86	76	25	15	30	21	^
Collier	1,753	267	364	208	198	109	46	65	71	11
Columbia	292	60	34	37	35	11	23	11	^	^
Miami-Dade	10,349	1,208	1,509	1,426	1,465	447	404	385	242	152
DeSoto	164	41	23	21	22	^	12	^	^	^
Dixie	89	19	^	17	^	^	^	^	^	^
Duval	3,515	547	488	524	388	144	160	120	114	45
Escambia	1,444	262	233	192	157	55	72	48	39	15
Flagler	472	84	75	73	48	24	12	31	^	^
Franklin	66	11	^	12	^	^	^	^	^	^
Gadsden	183	26	25	31	18	^	13	^	^	^
Gilchrist	72	14	11	^	10	^	^	^	^	^
Glades	27	^	^	^	^	^	^	^	^	^
Gulf	81	19	14	13	^	^	^	^	^	^
Hamilton	47	10	^	^	^	^	^	^	^	^
Hardee	106	24	^	12	20	^	^	^	^	^
Hendry	161	27	29	18	12	^	^	^	^	^
Hernando	1,403	232	258	149	129	91	49	59	41	^
Highlands	849	161	155	101	99	39	28	26	28	^
Hillsborough	4,999	848	716	669	583	222	217	179	190	70
Holmes	80	18	^	^	^	^	^	^	^	^
Indian River	978	199	106	139	107	64	42	41	31	^
Jackson	184	38	23	17	24	^	12	^	^	^
Jefferson	65	15	^	^	^	^	^	^	^	^
Lafayette	19	^	^	^	^	^	^	^	^	^
Lake	1,921	346	314	231	238	120	50	60	47	11
Lee	3,437	569	580	395	389	193	148	109	150	30
Leon	823	127	114	145	91	38	29	26	38	^
Levy	231	50	33	28	27	11	^	11	11	^
Liberty	22	^	^	^	^	^	^	^	^	^
Madison	69	10	10	^	10	^	^	^	^	^
Manatee	1,951	360	274	255	201	118	82	57	63	13
Marion	2,137	429	361	256	248	118	73	83	49	29
Martin	1,077	170	183	137	111	86	51	46	44	^
Monroe	464	77	54	52	58	27	33	14	16	^
Nassau	272	52	42	39	23	16	19	14	^	^
Okaloosa	797	141	102	116	113	50	26	24	20	^
Okeechobee	241	53	19	27	35	15	12	^	^	^
Orange	3,700	585	566	552	410	167	140	138	110	53
Osceola	772	121	105	107	90	28	44	31	16	^
Palm Beach	8,242	1,265	1,070	1,176	917	502	258	357	400	53
Pasco	2,899	525	479	309	362	192	102	105	92	20
Pinellas	6,802	1,167	850	932	922	354	261	233	227	54
Polk	2,817	491	391	333	350	136	102	114	114	35
Putnam	429	105	50	52	51	21	22	12	11	^
Saint Johns	672	110	90	113	64	46	27	20	30	^
Saint Lucie	1,197	222	179	142	147	67	35	43	36	10
Santa Rosa	513	80	81	76	58	23	28	11	14	^
Sarasota	2,927	518	362	416	374	177	103	112	114	15
Seminole	1,380	212	229	201	127	58	53	58	37	^
Sumter	282	52	39	42	33	12	13	^	13	^
Suwannee	159	29	21	22	23	^	^	^	^	^
Taylor	103	26	17	10	^	^	^	^	^	^
Union	106	25	^	^	13	^	14	^	^	^
Volusia	3,229	624	455	387	396	165	105	104	85	30
Wakulla	94	23	14	13	10	^	^	^	^	^
Walton	150	39	19	22	22	^	^	^	^	^
Washington	88	25	^	^	10	^	^	^	^	^

(1) Florida total includes 782 new cases with unknown race and 43 cases with unknown sex.

^ Statistics are not displayed for fewer than 10 cases.

### ***Age-Adjusted Rates***

- County-level age-adjusted rates for all cancers combined varied from 193.8 per 100,000 in Glades County to 892.3 per 100,000 in Union County. Forty-four counties had rates between 400 and 500 per 100,000 population.
- Union County had not only the highest age-adjusted rate for all cancers combined, but also the highest rates for cancer of the lung and bronchus at 243.3 per 100,000; colorectal cancer at 116.5 per 100,000; and head and neck cancer at 112.0 per 100,000. Compared to the second-ranked counties, Union County had more than double the rate for cancer of the lung and bronchus than Taylor County (243.3 per 100,000 versus 121.6 per 100,000); a 46 percent higher rate for colorectal cancer than that of Okeechobee County (116.5 per 100,000 versus 79.8 per 100,000); and a rate for head and neck cancer more than three times higher than Columbia County (112.0 per 100,000 versus 36.5 per 100,000).
- The counties with the highest age-adjusted rates in 2000 for all cancers combined after Union County were Okeechobee (577.3 per 100,000), Hernando (568.0 per 100,000), Hendry (539.5 per 100,000), and Lake (533.2 per 100,000). Hernando County had 1,403 new cases; Lake County had 1,921. The other three counties had fewer than 200 new cases in 2000.
- The counties with the highest rates for the the other major cancer sites were: Gulf County for prostate cancer (198.4 cases per 100,000); Dixie County for breast cancer (209.6 per 100,000); Okeechobee County for bladder cancer (37.4 per 100,000); Flagler County for non-Hodgkin's lymphoma (39.9 per 100,000); Bay County for melanoma (32.2 per 100,000); and Marion County for cervical cancer (22.0 per 100,000).
- The counties with the lowest rates for all cancers combined were Glades (193.8 per 100,000), Lafayette (265.3 per 100,000), Walton (302.4 per 100,000), and Sumter (312.5 per 100,000).
- The lowest rates were in Madison County for cancer of the lung and bronchus at 46.9 per 100,000; Sumter County for prostate cancer at 67.4 per 100,000, colorectal cancer at 34.4 per 100,000, and bladder cancer at 11.1 per 100,000; Jackson County for breast cancer at 67.4 per 100,000; St. Lucie County for head and neck cancer at 11.7 per 100,000; Santa Rosa County for non-Hodgkin's lymphoma at 9.5 per 100,000; Charlotte County for melanoma at 11.5 per 100,000; and, Brevard County for cervical cancer at 5.5 per 100,000.

**Table 3.2**  
**Age-Adjusted Incidence Rates (1) by County, Florida, 2000**

	All Cancers	Lung & Bronchus	Prostate	Breast	Colorectal	Bladder	Head & Neck	Non- Hodgkins	Melanoma	Cervix
Florida	475.1	75.5	145.5	121.3	55.7	23.6	18.9	18.1	18.6	10.8
Alachua	484.1	66.8	164.7	142.4	61.6	19.7	20.5	19.6	17.8	^
Baker	478.6	80.0	108.2	163.9	^	^	^	^	^	^
Bay	522.9	97.0	148.1	128.1	68.4	21.2	18.1	16.8	32.2	^
Bradford	404.3	69.5	109.5	89.8	43.7	^	^	^	^	^
Brevard	470.2	75.0	161.5	120.5	51.2	30.1	13.1	15.4	16.2	5.5
Broward	489.2	72.2	136.5	123.3	60.7	23.8	20.1	21.5	21.7	13.7
Calhoun	401.1	96.7	^	^	^	^	^	^	^	^
Charlotte	431.6	69.5	128.5	106.6	51.8	24.4	15.3	16.0	11.5	^
Citrus	454.9	87.9	150.2	109.7	53.8	17.2	16.2	18.9	14.0	^
Clay	471.8	93.8	120.3	116.0	59.8	21.4	12.9	24.8	17.3	^
Collier	434.4	62.5	166.5	108.4	47.7	24.6	12.4	15.1	15.8	8.7
Columbia	473.1	93.8	112.8	117.3	57.2	17.6	36.5	18.8	^	^
Miami-Dade	444.3	51.6	147.5	110.9	62.6	19.1	17.4	16.7	12.0	12.6
DeSoto	415.5	98.5	110.2	118.7	58.0	^	36.4	^	^	^
Dixie	502.9	94.1	^	209.6	^	^	^	^	^	^
Duval	508.2	80.6	169.6	130.8	57.6	21.4	23.0	17.3	21.4	11.2
Escambia	474.6	85.1	174.6	111.3	51.7	18.1	23.6	16.0	16.3	9.9
Flagler	514.2	79.9	142.6	162.0	49.7	22.3	16.3	39.9	^	^
Franklin	468.8	76.2	^	166.8	^	^	^	^	^	^
Gadsden	415.5	59.1	136.3	125.1	41.6	^	28.4	^	^	^
Gilchrist	457.8	90.1	152.4	^	67.6	^	^	^	^	^
Glades	193.8	^	^	^	^	^	^	^	^	^
Gulf	477.3	115.7	198.4	147.1	^	^	^	^	^	^
Hamilton	377.1	76.7	^	^	^	^	^	^	^	^
Hardee	392.1	81.9	^	86.3	72.4	^	^	^	^	^
Hendry	539.5	92.4	182.3	118.2	40.9	^	^	^	^	^
Hernando	568.0	85.6	184.3	133.0	52.8	32.0	25.3	22.4	20.9	^
Highlands	498.0	83.2	167.5	122.8	51.2	23.0	22.7	19.7	23.4	^
Hillsborough	516.2	88.0	167.6	124.9	61.0	23.1	22.2	18.3	23.1	13.3
Holmes	383.2	87.7	^	^	^	^	^	^	^	^
Indian River	480.1	97.6	105.8	138.1	44.6	29.8	22.8	23.1	17.4	^
Jackson	353.5	72.2	103.1	64.7	45.8	^	22.5	^	^	^
Jefferson	441.5	100.3	^	^	^	^	^	^	^	^
Lafayette	265.3	^	^	^	^	^	^	^	^	^
Lake	533.2	90.4	171.8	133.9	60.8	29.5	14.7	16.2	15.8	9.9
Lee	475.5	72.6	150.4	112.7	51.5	24.8	23.2	16.1	21.2	13.3
Leon	458.5	75.0	149.4	138.2	53.6	22.3	15.6	13.0	25.8	^
Levy	492.7	102.0	143.1	119.9	58.5	24.7	^	24.3	27.5	^
Liberty	325.1	^	^	^	^	^	^	^	^	^
Madison	337.2	46.9	110.2	^	44.3	^	^	^	^	^
Manatee	457.6	83.6	130.5	118.2	43.7	25.6	21.2	13.2	17.5	8.4
Marion	521.7	96.2	166.6	123.5	59.2	26.0	18.7	19.8	14.0	22.0
Martin	480.7	67.3	153.8	133.5	46.0	34.3	25.5	22.4	23.1	^
Monroe	487.0	80.8	108.5	111.9	60.8	29.5	32.6	15.2	16.9	^
Nassau	446.7	81.5	143.3	116.5	43.0	35.9	26.9	22.7	^	^
Okaloosa	482.0	84.6	125.1	127.6	71.7	31.2	14.9	14.1	14.0	^
Okeechobee	577.3	119.2	90.5	134.0	79.8	37.4	29.9	^	^	^
Orange	482.4	78.6	172.1	126.5	55.4	22.6	18.0	17.9	17.1	11.7
Osceola	473.1	74.5	139.1	119.6	56.7	17.5	26.0	18.4	11.9	^
Palm Beach	483.7	69.8	135.5	138.4	50.0	26.3	16.0	20.6	26.5	8.0
Pasco	496.6	86.7	167.0	107.9	54.1	29.8	19.5	19.0	20.3	11.2
Pinellas	498.1	83.1	136.7	134.6	61.6	23.7	21.1	17.5	19.9	10.6
Polk	458.4	77.5	131.1	98.5	54.8	21.0	17.7	19.3	21.7	13.6
Putnam	467.5	109.3	103.1	108.9	53.4	23.8	26.0	14.5	15.5	^
Saint Johns	446.7	71.7	126.3	138.6	42.9	30.6	17.7	13.2	19.8	^
Saint Lucie	419.6	74.9	126.4	98.3	48.6	21.3	11.7	16.0	16.6	9.5
Santa Rosa	444.5	68.7	147.4	122.8	51.4	21.5	24.5	9.5	12.3	^
Sarasota	473.1	79.3	118.1	136.4	53.2	23.5	17.6	18.2	24.4	8.4
Seminole	406.3	63.5	159.0	104.1	38.5	17.9	15.1	17.2	11.9	^
Sumter	312.5	52.2	67.4	107.2	34.4	11.1	14.7	^	17.7	^
Suwannee	361.0	64.7	101.5	98.1	48.7	^	^	^	^	^
Taylor	484.2	121.6	195.3	96.9	^	^	^	^	^	^
Union	892.3	243.3	^	^	116.5	^	112.0	^	^	^
Volusia	495.9	91.3	145.2	116.0	57.1	23.7	17.5	16.9	14.1	12.2
Wakulla	430.3	106.2	126.3	120.3	44.2	^	^	^	^	^
Walton	302.4	73.6	67.7	84.7	47.5	^	^	^	^	^
Washington	352.4	97.6	^	^	40.8	^	^	^	^	^

(1) Rates are expressed as number of cases per 100,000 population per year, adjusted to the 2000 U.S. standard population.

^ Statistics are not displayed for fewer than 10 cases.

## Children

New cancer counts and age-specific incidence rates for Florida children age 0-14 cover the five-year period from 1996 to 2000. The age-specific rates in Table 4 are expressed in cases per million children at risk. Note that the sites used in this table are grouped to correspond more closely to the International Classification of Childhood Cancers (ICCC) and are not the same groups used elsewhere in this report.

- From 1996 to 2000, 2,288 new primary cancers were diagnosed in children in Florida. On average, 458 new cases were diagnosed each year, with a five-year rate of 155.2 per million.
- Leukemia was the most commonly diagnosed cancer among children, accounting for 28.8 percent of new cases, followed by brain and nervous system cancers (22.9 percent) and lymphoma (11.1 percent). Eighty-two percent of leukemia cases were acute lymphocytic leukemia.

**Table 4**  
**Number of New Cases and Age-Specific Incidence Rates for Children Age 0-14, Florida, 1996 - 2000**

Site	New Cases	Percent	Rate (per million)
<b>All Cancers</b>	<b>2288</b>	--	<b>155.2</b>
Leukemia	659	28.8	44.7
Acute Lymphocytic	525	22.9	34.9
Other Leukemia	134	5.9	9.8
Brain & Nervous	525	22.9	35.6
Lymphoma	253	11.1	17.2
Non-Hodgkins	174	7.6	11.8
Hodgkins	79	3.5	5.4
Kidney	133	5.8	9.0
Soft Tissue	142	6.2	9.6
Bones and Joints	121	5.3	8.2
Endocrine	127	5.6	8.6
Eye	89	3.9	6.0
All Other	239	10.4	16.2

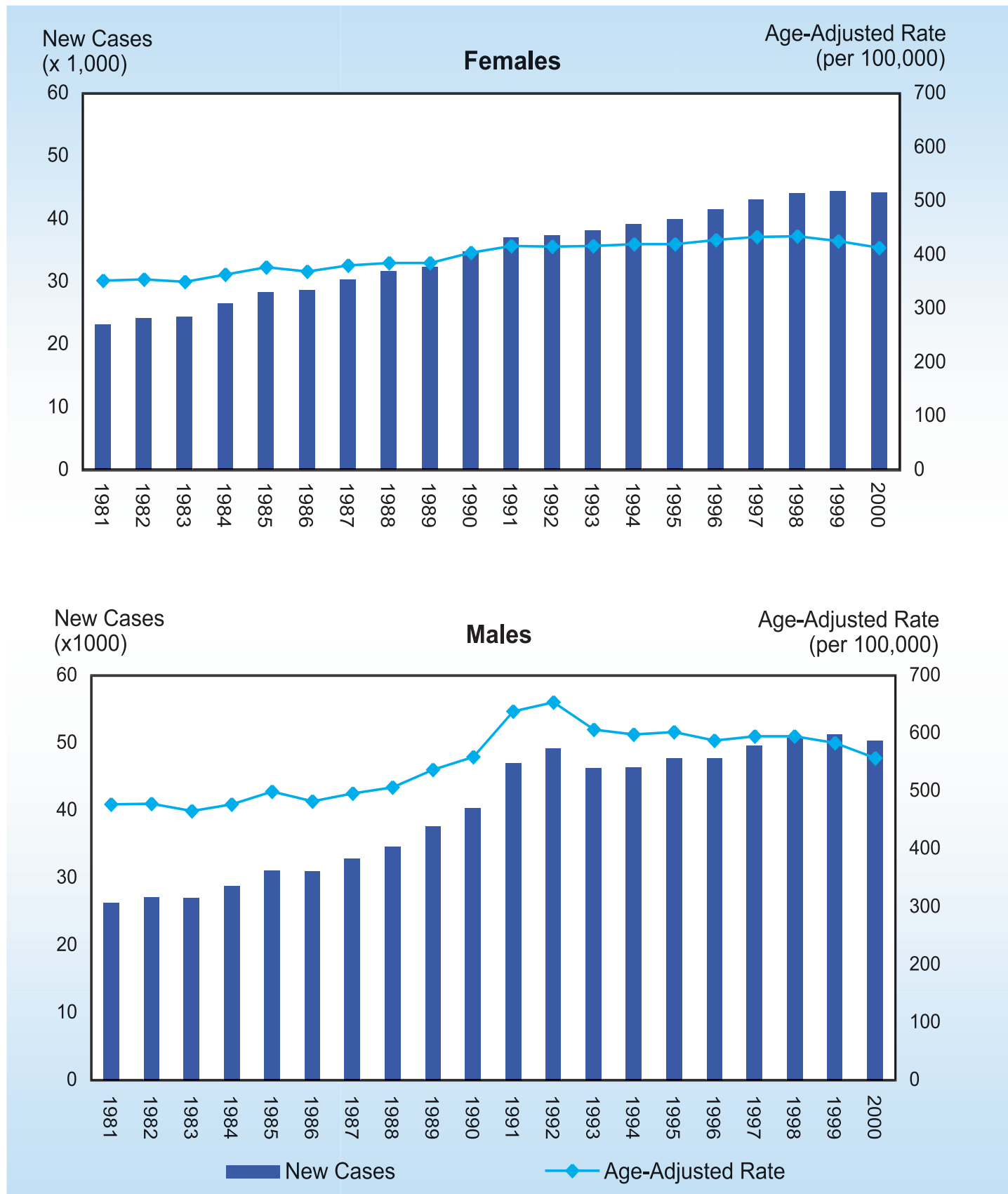
## TIME TRENDS FOR NEW CASES AND INCIDENCE RATES

The number of new cases diagnosed among Florida residents increased by 91 percent in the past 20 years, from 49,513 in 1981 to 94,630 in 2000. More than 80 percent of that increase was due to a 57 percent increase in the population over that time. Age-adjusted incidence rates increased by 17 percent from 1981 to 2000.

### Sex and Race

- Overall, the number of cancer cases diagnosed increased every year during the 20-year period for males and females and for both non-Whites and Whites. However, the number of new cases in males decreased in 1993, which probably represents normalization of new case detection after widespread prostate-specific antigen (PSA) testing began in 1991.
- Age-adjusted incidence rates for all cancers in males declined from a peak in 1992; rates for females began to drop in 1999.
- While incidence rates for all cancers in Whites declined for the past two years, rates for non-Whites had been declining since 1992, with most of the decline in non-White males.
- Non-White females consistently had the lowest rate among the four groups.
- Rates for White females increased each year until 1999, when they began a slight decline.
- Age-adjusted rates have declined since 1992 for both non-White and White males. The decrease in non-White males was enormous with 220 cases per 100,000 over the past eight years.

**Figure 2.1 New Cases and Age-Adjusted Incidence Rates for All Cancers by Sex, Florida, 1981-2000**





**Figure 2.2 New Cases and Age-Adjusted Incidence Rates for All Cancers by Race, Florida, 1981-2000**

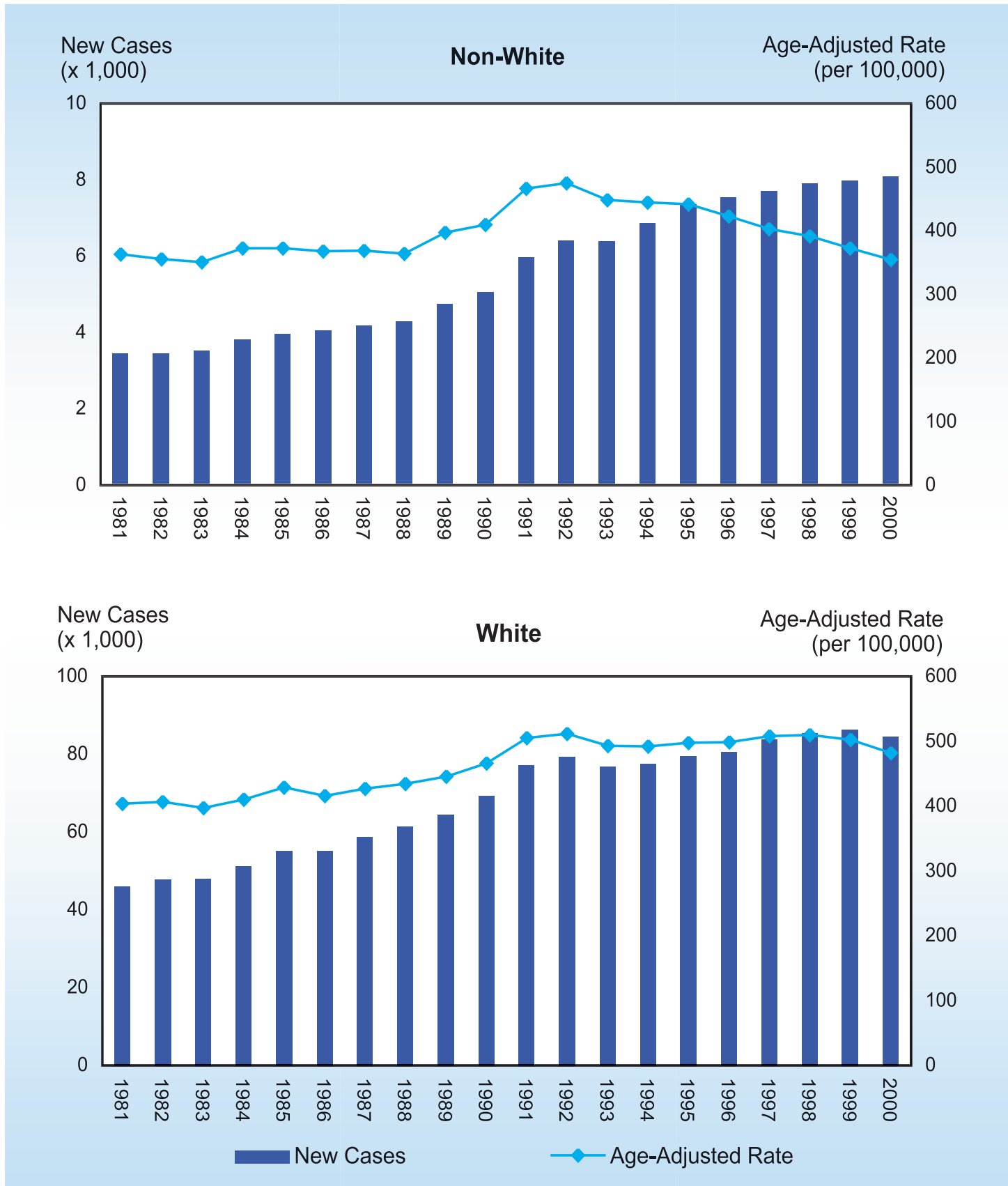
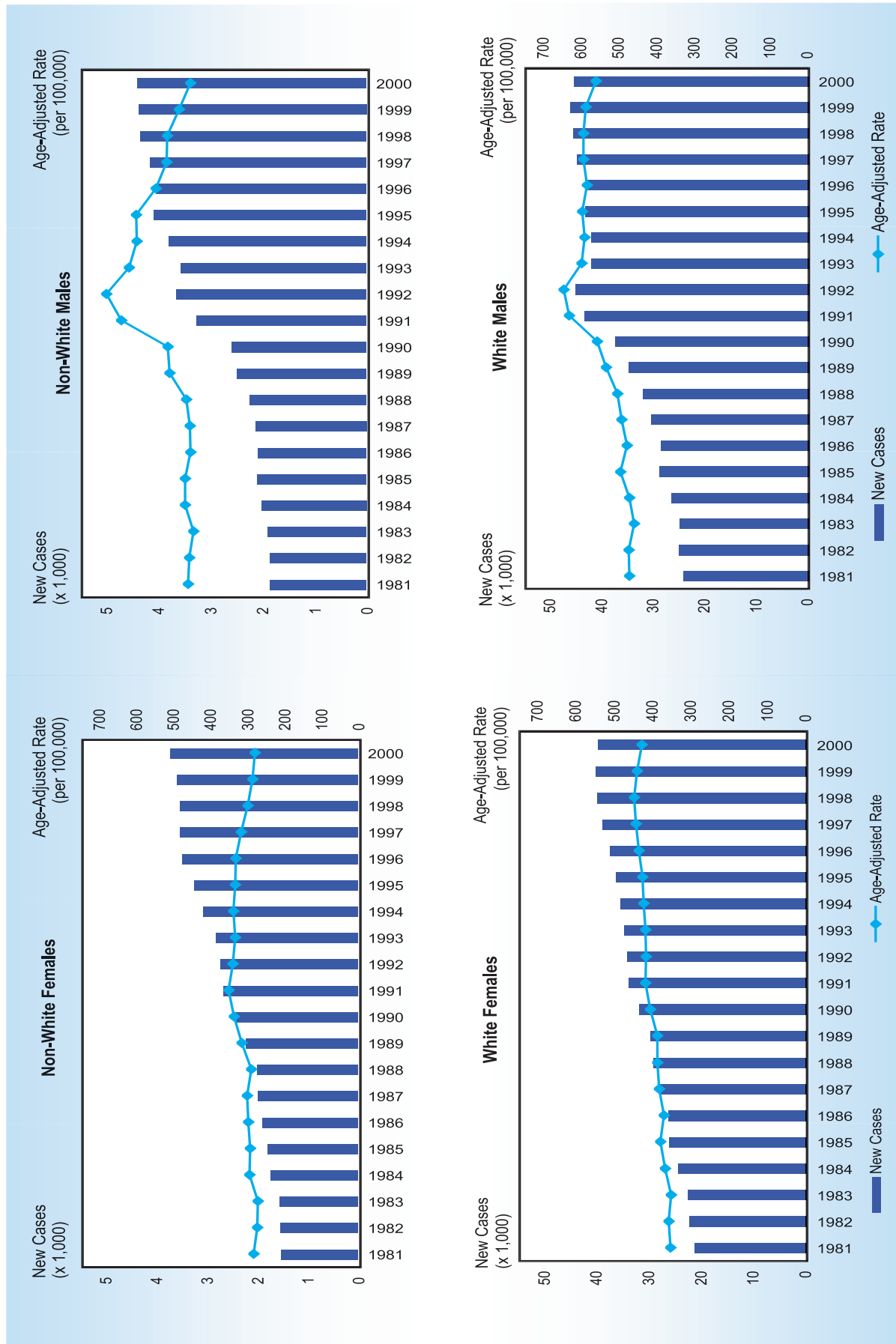
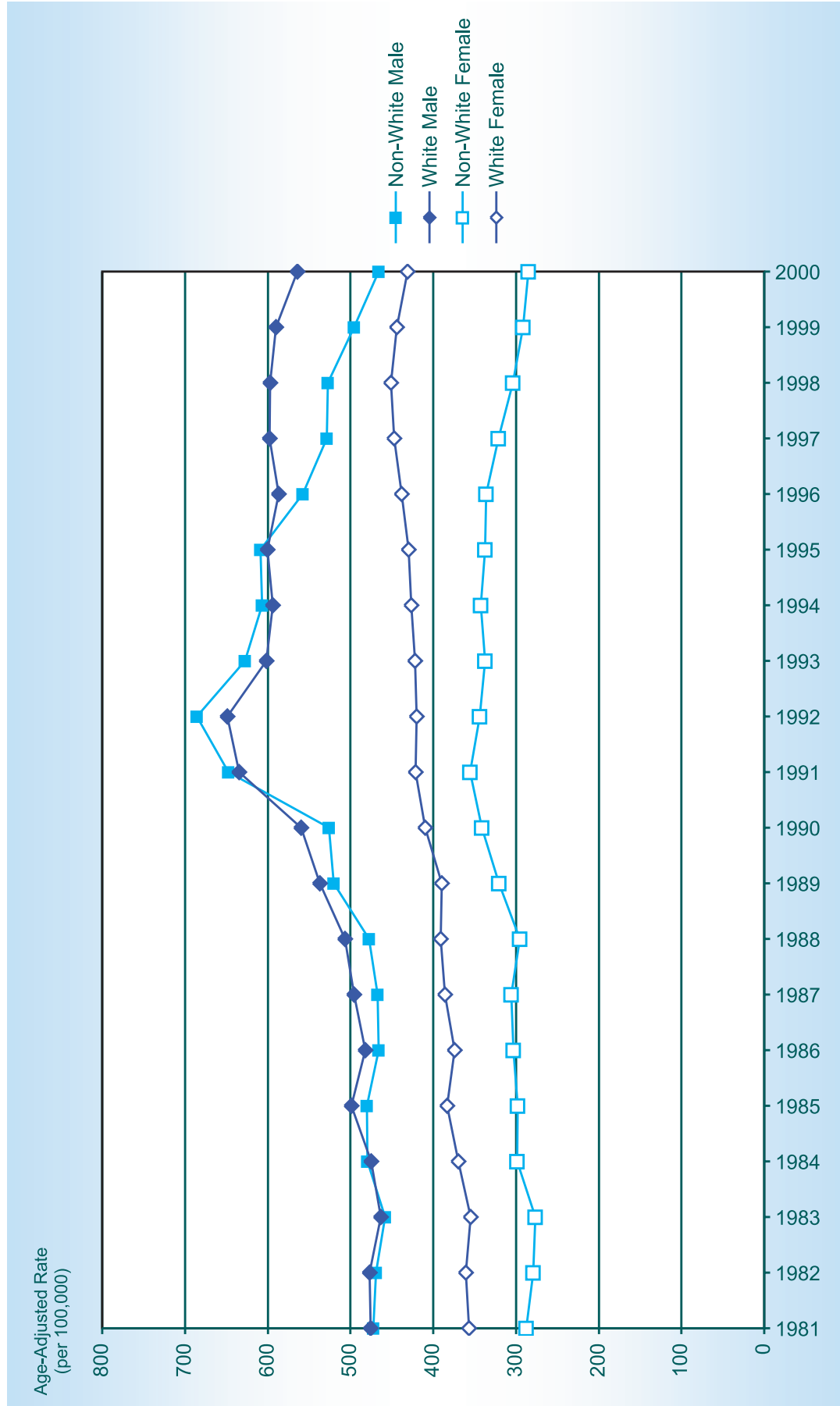


Figure 3. New Cases and Age-Adjusted Incidence Rates for All Cancers by Sex and Race, Florida, 1981-2000



**Figure 4. Age-Adjusted Incidence Rates for All Cancers by Sex and Race, Florida, 1981-2000**



## **Cancer Sites**

### ***Lung and Bronchus***

- In the past 20 years, rates declined overall for both non-White and White males. Rates for non-White males dropped by one-third. Both groups showed large rate increases in 1991, and steady declines since that year.
- Age-adjusted incidence rates in White females rose more than 70 percent over the 20 years, with a slight drop in 2000.
- Rates for non-White females decreased 25 percent from 1996 to 2000.

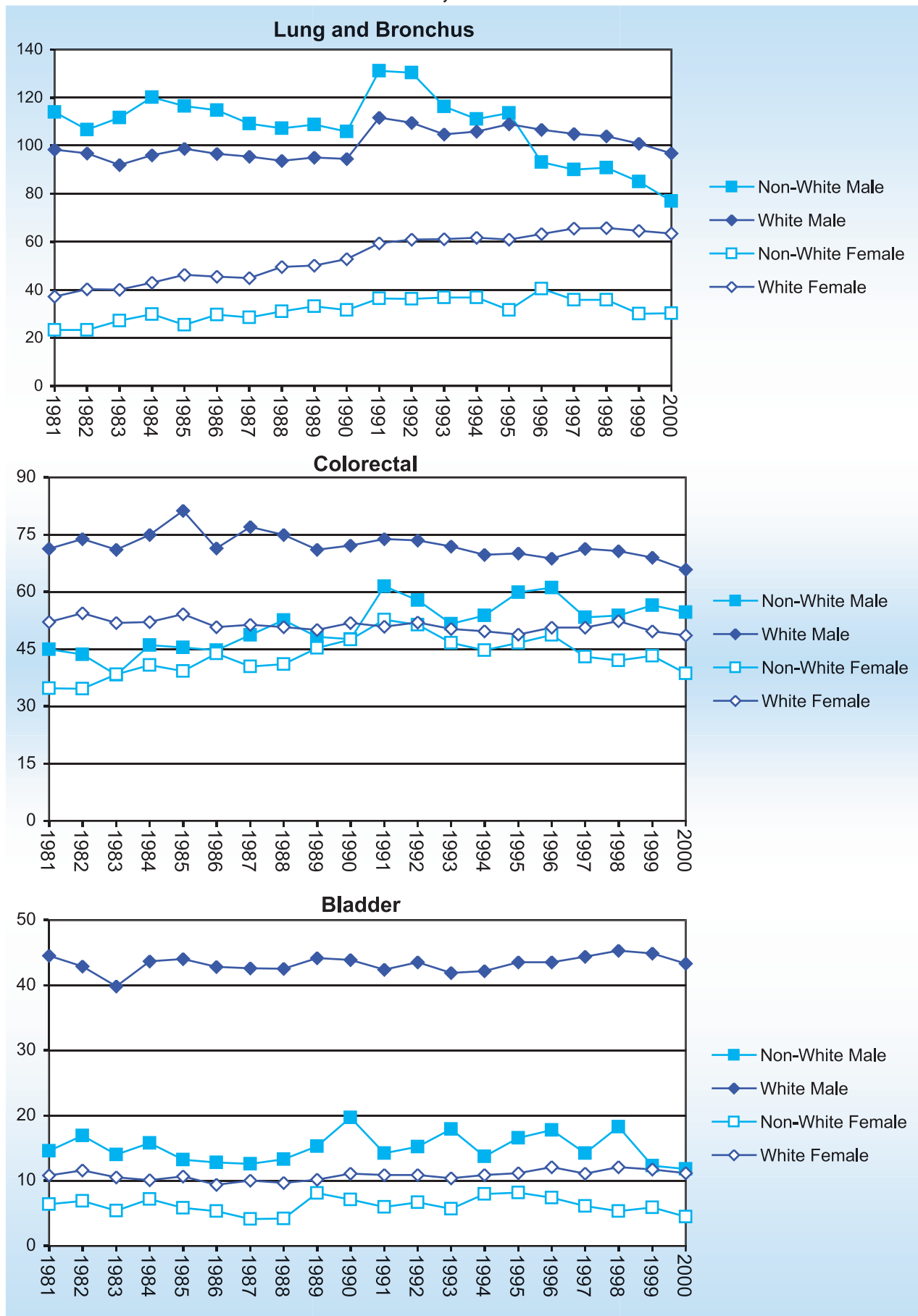
### ***Colorectal***

- White males had the highest age-adjusted rates for the 20-year period, while non-White females had the lowest rates among the four groups.
- Rates decreased by 7 percent for both White males and females since 1981, and increased 22 percent in non-White males and 11 percent in non-White females.

### ***Bladder***

- The age-adjusted incidence rate of bladder cancer in White males remained more than three times as high as rates for the other sex-race groups throughout this period.
- Age-adjusted incidence rates in non-Whites decreased by 30 percent in females and by 20 percent in males, while the rates among Whites remained almost unchanged during the 20-year period.

**Figure 5.1 Age-Adjusted Incidence Rates by Sex and Race, Florida, 1981-2000**



### ***Prostate***

- Non-White males had consistently higher rates of prostate cancer over the 20-year period than White males.
- Age-adjusted rates have risen since 1981, and reached a peak for both White and non-White males in 1992, as the PSA test for prostate cancer came into general use. Prostate cancer rates have declined steadily since that peak – by 36 percent for non-Whites and 30 percent for Whites.

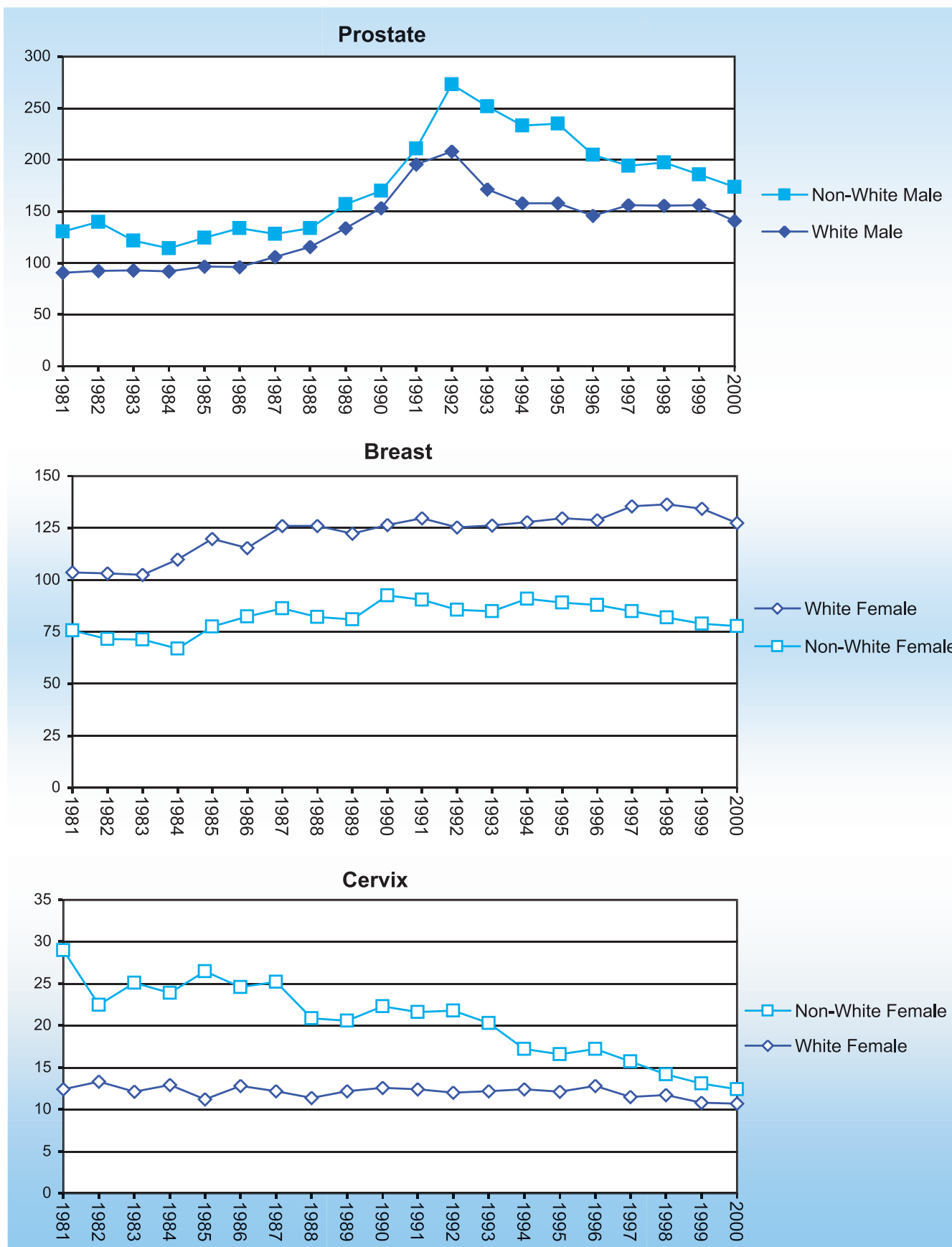
### ***Breast***

- Breast cancer incidence rates in White females were higher than in non-White females over the 20-year period.
- The age-adjusted rate for non-White females remained unchanged between 1981 and 2000, although it increased in the late 1980s and the early 1990s.
- The rate for White females increased by 23 percent since 1981, with most of that increase occurring in the 1980s. This increase might be due to improved sensitivity of mammography and to higher screening rates (Schottenfeld and Fraumeni, 1996, page 1023).

### ***Cervix***

- Non-White females had higher age-adjusted incidence rates than White females in all years. However, this racial gap in rates narrowed significantly over the 20-year period. In 1981, the rate for non-White females was 134 percent higher than for White females. By 2000, that difference was only 15 percent.
- The age-adjusted rate of cervical cancer decreased 57 percent in non-White females between 1981 and 2000. The rate for White females decreased 14 percent over this period.

**Figure 5.2 Age-Adjusted Incidence Rates by Sex and Race, Florida, 1981-2000**



### ***Head and Neck***

- The incidence rates of head and neck cancer in males of both races were more than three times the rates for females until 1997.
- Age-adjusted rates of head and neck cancer in non-White males decreased 39 percent since 1981, and 47 percent since a peak in 1991. Rates for non-White females declined 51 percent over the 20-year period.
- Rates for Whites decreased 11 percent for females and 8 percent for males.

### ***Non-Hodgkin's Lymphoma***

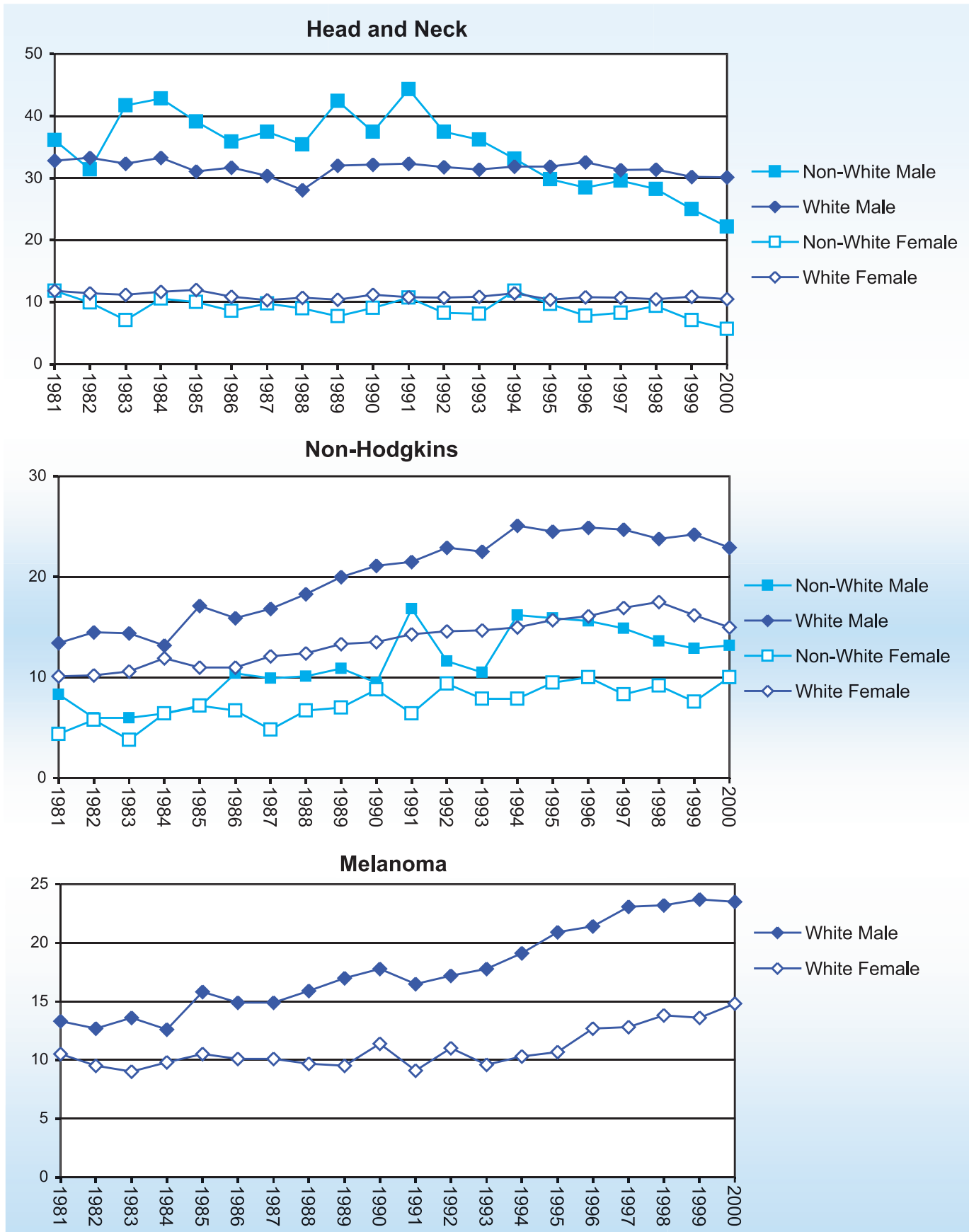
- Non-Hodgkin's lymphoma rates were almost twice as high in White males and females as in their non-White counterparts.
- Age-adjusted incidence rates for non-Hodgkin's lymphoma increased since 1981 for all sex-race groups. The greatest increase was among non-White females (127 percent), with non-White males increasing by 59 percent, White females by 49 percent, and White males by 71 percent.

### ***Melanoma***

- Over the 20-year period, age-adjusted rates for melanoma in White males were consistently higher than for White female rates, ranging from 27 percent higher in 1981 to 95 percent in 1995.
- Rates of melanoma increased by 76 percent for males and 41 percent for females over the 20-year period.



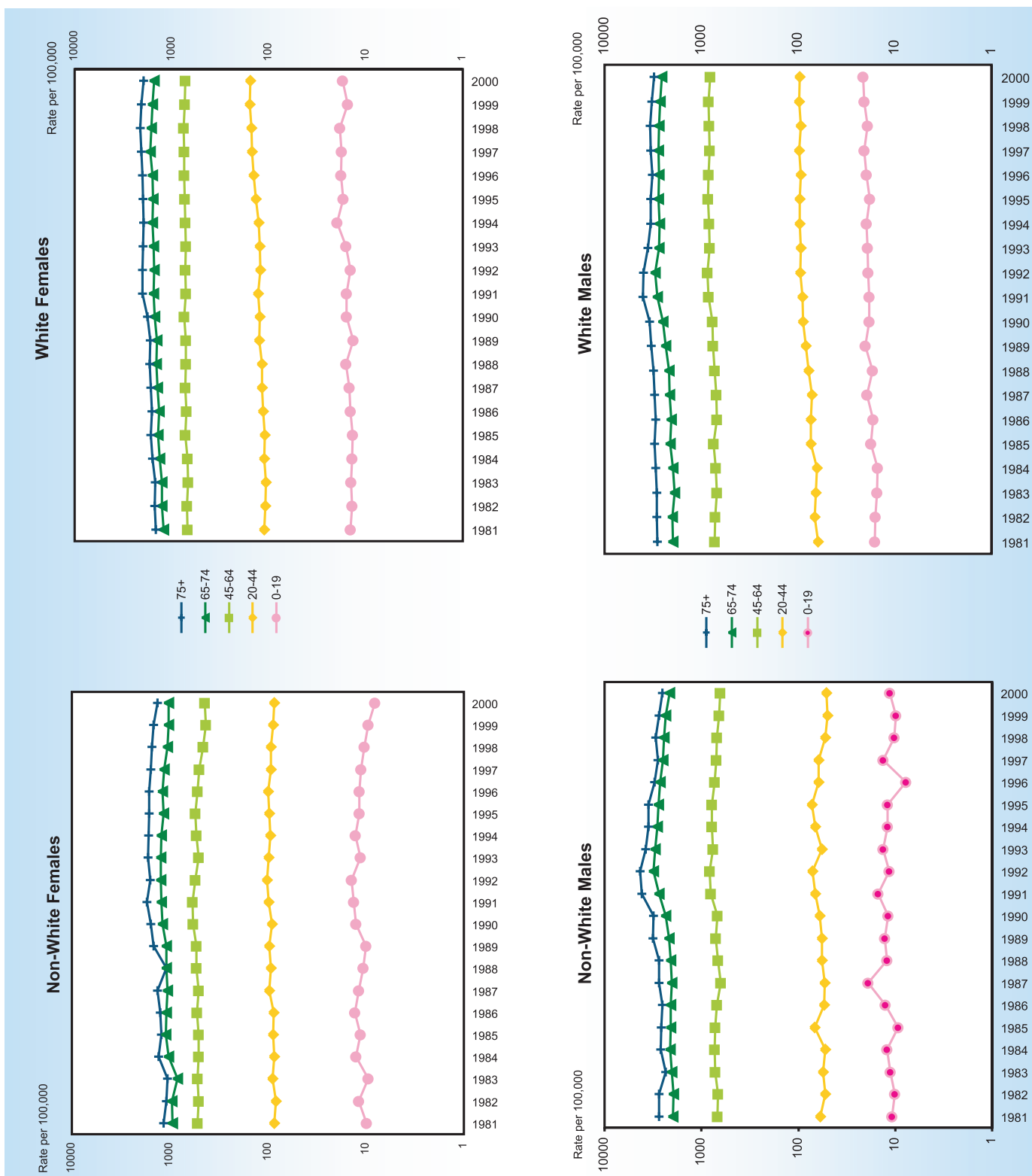
**Figure 5.3 Age-Adjusted Incidence Rates by Sex and Race, Florida, 1981-2000**



## Age Group

- Cancer occurred predominantly among older people and rates increased with age. Age-specific incidence rates for all cancers combined showed remarkable similarity among the four sex-race groups.
- Although older groups had consistently higher rates than younger groups, there were different patterns of increases among males and females.
- For females, age-specific rates for the 20 to 44 age group were 8.2 times higher than rates in the 19 and younger age group over all years. Rates for the 45 to 64 age group were an average of 5.7 times higher than the rates for the 20 to 44 age group; for the 65 to 74 age group, rates were double those of the 45 to 64 age group; and for females age 75 and older, rates were 1.3 times higher than for the 65 to 74 age group.
- For males, the average increases in age-specific rates over all years were 4.8 times greater in the 20 to 44 age group than in the 19 and younger age group, 10.8 times greater in the 45 to 64 age group than in the 20 to 44 age group, 3.2 times greater in the 65 to 74 age group, and 1.3 times greater in the 75 and older age group than in the 65 to 74 age group.
- Age-specific incidence rates decreased for non-Whites in some age groups. Rates for females in the 19 and younger age group decreased by 18 percent and in the 45 to 64 age group by 15 percent. Rates for males ages 20 to 44 decreased by 15 percent, for ages 45 to 64 by 7 percent, and over the age of 75 by 8 percent.
- Rates for Whites increased for all age groups over the 20-year period. Rates among males increased 56 percent for ages 20 to 44 and 8 percent for males age 75 and older. Among females, rates increased 39 percent in the 20 to 44 age group, 6 percent in the 45 to 64 age group, and 33 percent for females age 75 and older since 1981.

**Figure 6. Age-Specific Incidence Rates for All Cancers by Sex, Race, and Age Group, Florida, 1981-2000**



## ESTIMATED ANNUAL PERCENT CHANGE IN INCIDENCE RATES FROM 1991 TO 2000

Age-adjusted incidence rates for most cancers fluctuate over time. Estimated annual percent change (EAPC) is calculated to uncover trends by smoothing the fluctuations. The choice of a baseline year and the number of years included in the calculation both influence the magnitude and direction of the EAPC. Since the EAPC measures percentage change, rare cancers are likely to have the largest EAPCs because of relatively low baseline rates.

The EAPC calculation uses a weighted least squares linear model, which assumes that rates change in a constant manner, increasing or decreasing over time with only small variations. If this assumption is violated, the EAPC may not be an appropriate measure of change. Therefore, caution should be exercised in interpreting the EAPC. A detailed description of this calculation appears in the “Methodology” section of this report.

Sites that have significant changes in estimated annual percent change in age-adjusted incidence rates are denoted in Tables 5 and 6 with an asterisk (\*) to the right of the applicable percentages. The asterisk indicates that the probability of those particular EAPCs occurring due to chance alone is less than 5 percent, or  $p < 0.05$ .

### Females

- The EAPC for all cancers combined in females increased very slightly at 0.3 percent per year for the period from 1991 to 2000, due to an increase in the EAPC of 0.7 percent for White females. EAPC for non-White females decreased significantly at 2.4 percent per year.
- In non-White females, the EAPC decreased significantly over the 10-year period for all cancers combined and for all the top sites except lung cancer, which decreased, though not significantly, by 1.9 percent per year and non-Hodgkin’s lymphoma, which increased 1.6 percent per year. The largest decrease in the EAPC was more than 6 percent per year for cervical cancer.
- Among White females, the EAPC increased for all sites except colorectal, head and neck, and cervical cancer. The cervix was the only site that showed a significant decrease at 1.5 percent per year. Increases in the EAPC were significant for all cancers combined, lung and bronchus, non-Hodgkin’s lymphoma, and melanoma. The largest significant increase was 5.3 percent per year for melanoma.

### Males

- The EAPC decreased significantly for all cancers combined, lung, prostate, colorectal, and head and neck cancers.
- Among White males, the EAPC rose significantly for melanoma at a rate of 4.4 percent per year, and for bladder cancer at 0.6 percent per year. EAPC also increased for non-Hodgkin’s lymphoma. Conversely, the EAPC decreased significantly for cancer of the lung and bronchus (-1.2 percent per year), prostate (-3.4 percent per year), colorectal (-0.9 percent per year), and head and neck cancers (-0.6 percent per year).
- In non-White males, the EAPC decreased in all major sites. These decreases were significant for lung and bronchus, prostate, and head and neck cancers. The largest decrease (6.2 percent per year) was for head and neck cancer.

- Both non-Whites (4.1 percent per year) and Whites (3.4 percent per year) had statistically significant decreases in the EAPC for prostate cancer.
- The EAPC for bladder cancer decreased among non-White males, while it increased significantly for White males.

### Race

- Decreases in the EAPC were four times greater or more for non-White males than for White males for all cancers combined, lung and bronchus, and head and neck cancers.
- The EAPC for colorectal cancer decreased for all sex-race groups. The decreases were significant for non-White females and White males.
- The EAPCs for head and neck cancers also decreased for all sex-race groups. The decreases were significant for non-Whites and more than 10 times greater than for Whites.
- Non-White males were the only group with a decrease in the EAPC for non-Hodgkin's lymphoma. For females, both race groups experienced a similar increase in the EAPC, 1.6 percent for non-Whites and 1.5 percent for Whites. The increase for White females was statistically significant.

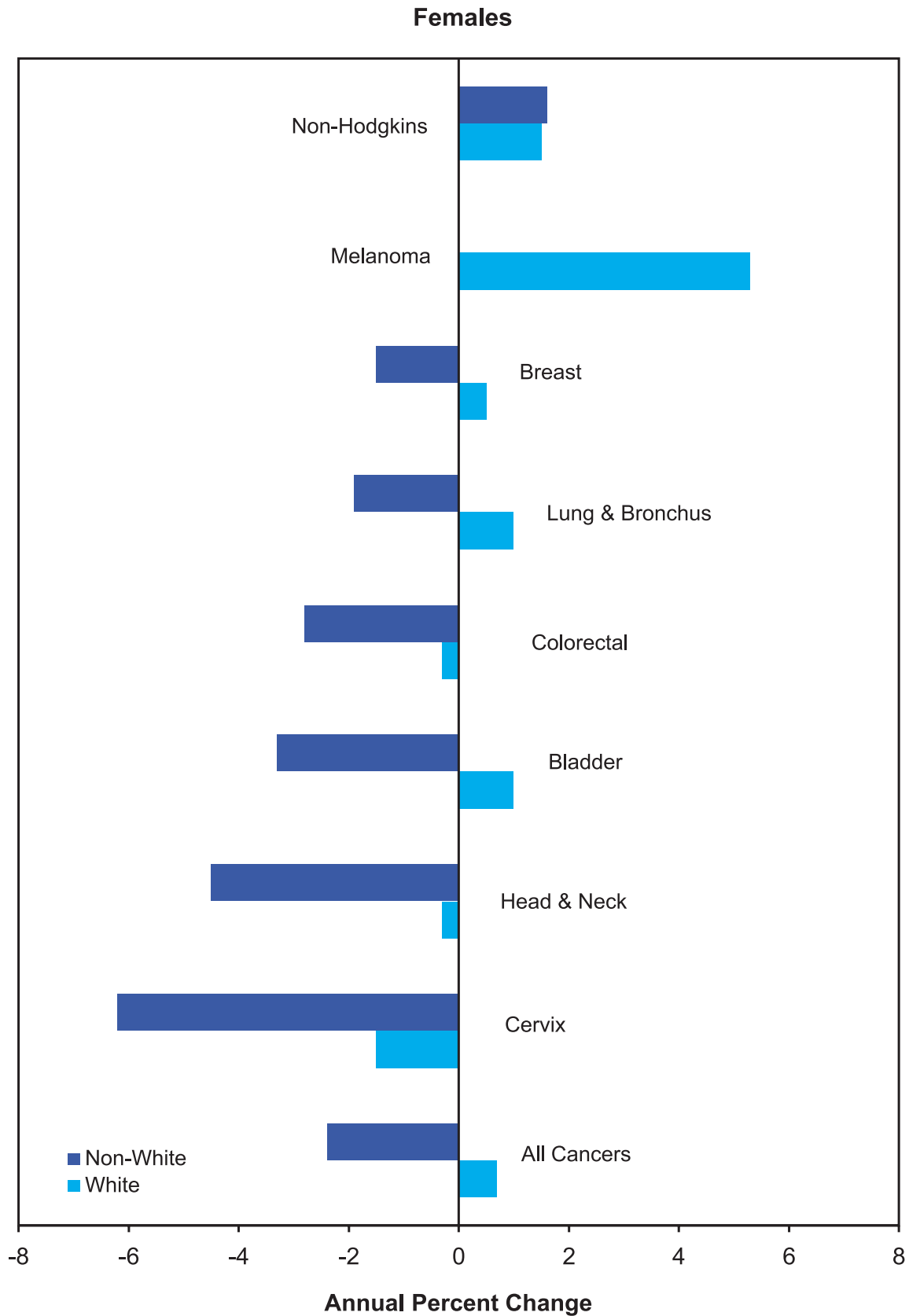
**Table 5. Estimated Annual Percent Change in Age-Adjusted Incidence Rates by Sex and Race, Florida, 1991-2000**

	All Cancers	Lung & Bronchus	Prostate	Breast	Colorectal	Bladder	Head & Neck	Non-Hodgkins	Melanoma	Cervix
Florida	-0.5 *	-0.6 *	-3.4 *	0.1	-0.7 *	0.5	0.7	-1.2 *	4.8 *	-2.6 *
Female	0.3	0.7 *		0.2	-0.5	0.5	-0.8 *	1.4 *	5.3 *	-2.5 *
Male	-1.3 *	-1.6 *	-3.3 *		-0.9 *	0.3	-1.3 *	0.5	4.4 *	
Non-White	-3.1 *	-4.4 *	-4.1 *	-1.5 *	-1.7 *	-2.1	-5.7 *	0.3		-6.2 *
White	-0.2	-0.2	-3.4 *	0.5	-0.5	0.9 *	-0.4 *	1.0	4.8 *	-1.5 *
NW Female	-2.4 *	-1.9		-1.5 *	-2.8 *	-3.3	-4.5 *	1.6		-6.2 *
W Female	0.7 *	1.0 *		0.5	-0.3	1.0	-0.3	1.5 *	5.3 *	-1.4 *
NW Male	-4.0 *	-5.8 *	-4.1 *		-0.6	-1.9	-6.2 *	-0.9		
W Male	-1.1 *	-1.2 *	-3.4 *		-0.9 *	0.6 *	-0.6 *	0.6	4.4 *	

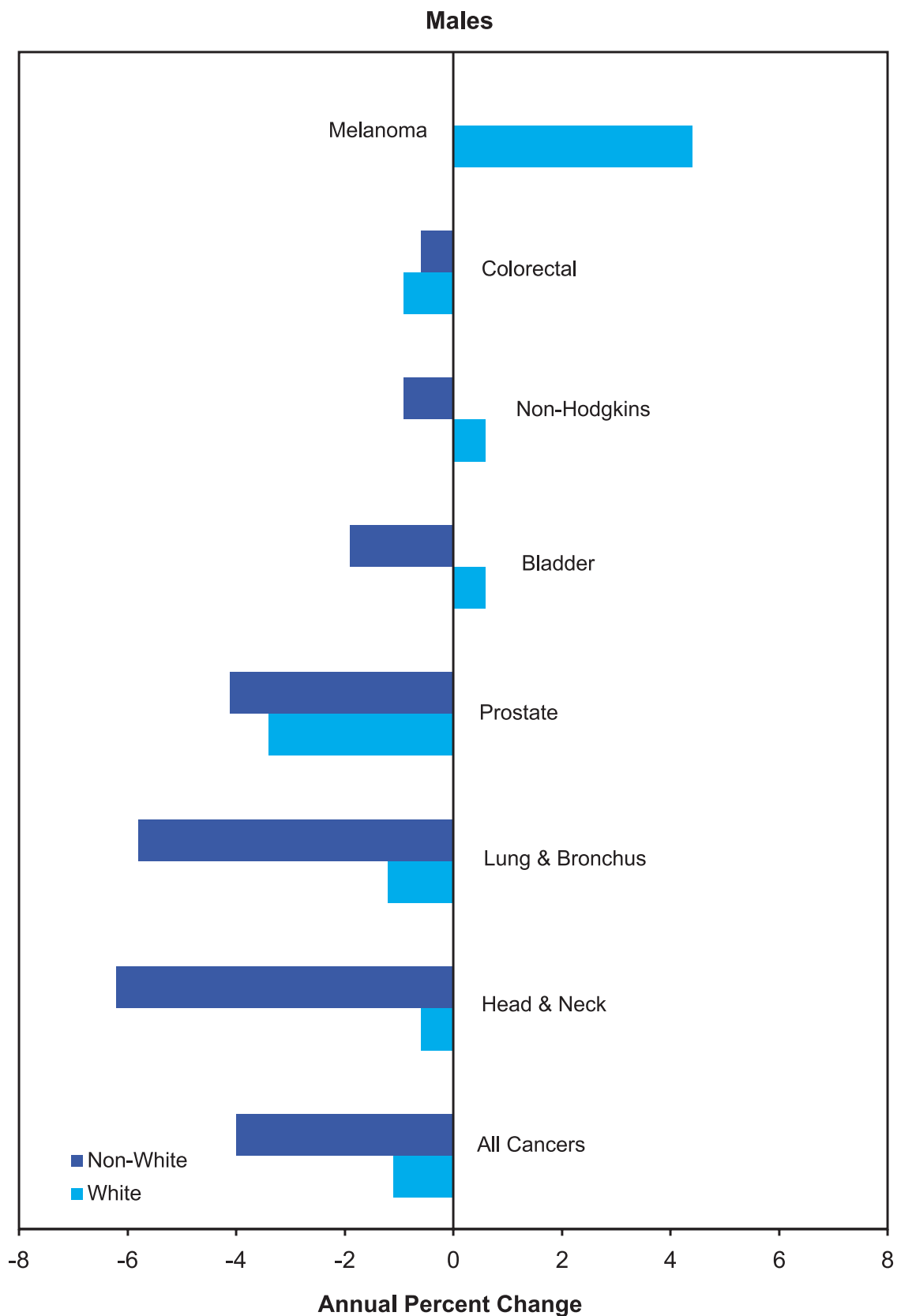
\* Estimated annual percent change (EAPC) is significantly different from zero (p<0.05).

NW = Non-White / W = White

**Figure 7.1 Estimated Annual Percent Change  
in Age-Adjusted Incidence Rates by Race,  
Florida, 1991-2000**



**Figure 7.2 Estimated Annual Percent Change  
in Age-Adjusted Incidence Rates by Race,  
Florida, 1991-2000**



## County

- The EAPC for all cancers combined decreased in 48 of 67 counties over the 10-year period. Fourteen of these decreases were statistically significant. Only two counties, Union and Okaloosa, had significant increases in EAPC for all cancers combined.
- Ten counties had statistically significant decreases in EAPC for lung cancer. Another 30 counties had non-significant decreases. Of the 24 counties that showed an increased EAPC for lung cancer, none were significant.
- The EAPC for prostate cancer went down significantly in 27 counties. Sumter County had the largest decrease in EAPC at 12.8 percent per year. No counties had significant increases in EAPC.
- The breast cancer EAPC decreased in 26 counties; of those, only two, Collier and Volusia, had statistically significant decreases. Of the counties with an increased breast cancer EAPC, only Baker and Okaloosa had significant increases.
- The EAPC in colorectal cancer rates decreased significantly in eight counties, but increased significantly in Miami-Dade and Okaloosa counties.
- For bladder cancer, the EAPC decreased in 17 counties and increased in 38. None of the increases or decreases in the EAPC for bladder cancer were significant.
- EAPCs for head and neck cancer decreased in 38 counties; among those, 10 were statistically significant. No counties had statistically significant increases.
- The EAPC for non-Hodgkin's lymphoma increased significantly in Alachua, Broward, Flagler, and Polk counties. Only Lee County had a significant decrease in the EAPC.
- Sixteen counties had significant increases in the EAPC for melanoma. Six counties had decreases; none of these decreases were significant.
- For cervical cancer, six counties had significant decreases in the EAPC – Broward, Columbia, Miami-Dade, Indian River, Leon, and Palm Beach. Fifteen counties had increases in the EAPC for cervical cancer; none were significant.



**Table 6.**  
**Estimated Annual Percent Change in Age-Adjusted Incidence Rates by County,**  
**Florida, 1991-2000**

	All Cancers	Lung & Bronchus	Prostate	Breast	Colorectal	Bladder	Head & Neck	Non- Hodgkins	Melanoma	Cervix
Florida	-0.5 *	-0.6 *	-3.4 *	0.1	-0.7 *	0.5	-1.2 *	0.7	4.6 *	-2.6 *
Alachua	-1.7 *	-2.5 *	-6.7 *	1.3	0.1	-1.6	-4.1	8.9 *	2.6	-7.2
Baker	-1.3	-5.8 *	-9.4 *	9.3 *	-3.6	3.7	1.5	^	^	1.4
Bay	1.2	0.4	-0.7	2.3	2.0	0.7	1.0	5.7	3.6	-1.4
Bradford	-3.4 *	-8.7 *	-9.2 *	0.3	-5.6	10.0	-2.3	-3.8	^	0.1
Brevard	-1.0 *	-0.9	-5.7 *	-0.3	-1.8	0.1	-1.5	0.1	4.5 *	2.0
Broward	-0.1	-0.7	-1.3	0.2	-0.4	0.0	-1.6 *	1.2 *	4.6 *	-4.6 *
Calhoun	-3.0	-3.0	-7.2	2.6	-1.2	4.3	2.0	^	^	^
Charlotte	0.6	0.2	1.9	-1.3	-1.3	1.9	-0.4	0.9	2.3	-5.2
Citrus	0.0	0.2	-0.9	0.6	1.3	-0.1	-4.6	3.5	0.4	-6.4
Clay	-0.5	-1.6	-2.5	2.2	1.4	-1.6	-1.8	3.6	5.7	-6.9
Collier	-2.1 *	-2.3 *	-5.3	-1.9 *	-3.2 *	0.3	-5.1 *	-1.7	2.3	-3.1
Columbia	1.4	0.7	-1.1	1.0	2.1	3.4	3.4	3.4	5.2	-6.1 *
Miami-Dade	-0.3	-1.3 *	-2.3 *	0.2	0.9 *	0.4	-1.8 *	-0.7	3.7 *	-2.3 *
DeSoto	-1.5	1.0	-6.2	3.9	-2.9	2.3	-1.5	12.3	-5.0	^
Dixie	-1.3	-3.5	-8.3	4.1	-6.4	^	0.4	^	^	^
Duval	-0.5	-1.6 *	-3.0 *	0.7	-0.2	0.8	-0.8	1.0	6.2 *	-2.2
Escambia	-0.3	-0.9	-2.8	1.0	-0.2	2.4	-1.5	0.6	3.7 *	-2.4
Flagler	-0.7	0.9	-6.2 *	4.1	-3.3	-3.5	0.9	7.6 *	0.2	-4.6
Franklin	0.3	4.3	-9.8 *	4.5	6.5	^	-3.6	^	^	^
Gadsden	-1.5	0.8	-6.3	-0.2	-0.6	-7.3	6.2	-2.0	-0.1	-4.2
Gilchrist	-0.4	-2.1	-0.3	-1.8	0.2	^	1.1	^	^	^
Glades	-4.7 *	-5.1	-10.9	^	-6.0	^	^	^	^	^
Gulf	3.0	1.3	2.1	3.1	5.5	^	10.3	^	^	^
Hamilton	-1.9	-2.3	-5.9	-5.8	1.2	^	^	^	^	^
Hardee	-1.5	2.3	-9.0 *	0.0	5.8	-6.8	-8.8 *	3.3	4.0	^
Hendry	1.3	1.4	0.1	-0.9	0.1	-2.3	-3.2	-0.1	^	^
Hernando	1.2	1.7	2.3	0.7	-2.4	0.1	0.0	0.9	2.5	5.8
Highlands	-0.3	0.9	-2.6	-1.7	-3.9 *	2.5	-0.2	3.2	7.9	-3.5
Hillsborough	0.3	-1.1 *	0.0	0.9	-0.1	1.0	0.5	0.9	5.8 *	-2.2
Holmes	1.3	0.9	1.2	3.7	0.3	1.1	^	^	^	^
Indian River	-2.1 *	-0.3	-10.6 *	1.7	-4.0 *	0.7	-2.3	-2.7	6.4 *	-8.5 *
Jackson	-0.6	-1.6	-2.7	-1.4	3.5	2.3	4.6	^	^	^
Jefferson	0.7	3.1	-4.3	-1.0	0.2	^	^	^	^	^
Lafayette	-5.1 *	-5.6	^	^	^	^	^	^	^	^
Lake	-0.4	0.2	-4.4 *	-0.1	0.7	1.5	-5.8 *	4.2	5.3	-5.7
Lee	-1.7 *	-1.8 *	-4.5 *	-0.8	-3.0 *	-1.2	-0.3	-2.9 *	4.9 *	-3.2
Leon	-1.1	-0.7	-5.4 *	0.0	0.8	0.1	-2.5	-3.3	12.1 *	-16.2 *
Levy	0.2	-0.5	-1.9	-1.5	3.6	5.3	-0.4	0.0	14.8	^
Liberty	-2.4	-1.5	^	^	^	^	^	^	^	^
Madison	-0.5	-1.8	-9.1	-1.4	-0.7	^	-5.3	^	^	^
Manatee	0.0	-0.2	-2.7	-0.1	-1.8	1.6	1.9	0.0	6.2 *	-3.0
Marion	0.8	0.0	0.4	-0.2	1.1	1.0	-1.2	2.4	2.4	2.5
Martin	-1.2 *	-2.3	-3.1	-0.5	-4.3 *	2.2	0.1	0.3	2.8	0.1
Monroe	-0.2	-1.0	-6.5 *	-1.0	1.6	4.0	4.2	-1.1	0.1	-4.4
Nassau	-0.5	-1.5	-4.2	2.6	0.3	4.1	4.4	-0.8	-1.5	0.3
Okaloosa	1.5 *	-0.9	-1.8	4.1 *	4.8 *	4.1	-3.0 *	5.2	10.8 *	3.7
Okeechobee	-0.9	-1.3	-11.0 *	0.5	2.9	-0.6	0.6	0.7	-0.7	4.7
Orange	-1.6 *	-2.0 *	-4.1 *	-1.0	-1.1	0.1	-2.3 *	-0.5	3.9 *	-3.2
Osceola	-1.3 *	-1.7	-6.7 *	-0.9	-0.3	0.4	0.7	0.4	-0.6	0.8
Palm Beach	-1.3 *	-0.3	-6.1 *	-0.2	-2.3 *	0.5	-3.0 *	0.6	5.7 *	-4.9 *
Pasco	0.0	0.4	-1.6	-0.5	-2.0 *	1.1	2.1	0.5	6.0 *	1.0
Pinellas	-0.4	-0.3	-4.3 *	-0.3	-0.5	-0.5	-0.8	1.5	4.0 *	-1.0
Polk	-0.1	0.2	-5.9 *	0.5	0.6	0.6	-2.1	2.1 *	5.3 *	-1.0
Putnam	-1.1	0.2	-7.1 *	-0.5	-0.6	0.3	4.1	-2.3	7.8	5.3
Saint Johns	-1.3 *	-2.6	-2.5	1.6	-4.1 *	2.7	-5.9	-1.1	3.4	-9.5
Saint Lucie	-0.5	-1.4	-2.5	1.3	-1.0	1.5	-4.0	0.7	5.6	-5.1
Santa Rosa	-0.8	-2.4	-6.7 *	1.7	-1.0	5.7	-2.5	-3.8	3.6	-0.2
Sarasota	-0.7	0.1	-7.0 *	0.2	-1.1	-1.4	0.3	-0.2	3.0	1.3
Seminole	-0.9	-0.9	-3.0 *	0.2	-1.9	-1.0	-1.4	-0.4	-0.2	-5.6
Sumter	-5.8 *	-6.8 *	-12.8 *	-1.0	-2.9	-4.8	-6.5 *	-1.7	6.8	-7.4
Suwannee	-0.2	-1.9	-4.6	-0.5	6.3	0.9	-5.9	-0.5	9.4	0.3
Taylor	-1.3	-2.0	-3.7	0.2	0.4	-1.6	5.2	0.9	^	^
Union	4.6 *	3.7	1.1	4.7	3.4	^	9.7	2.0	^	^
Volusia	-0.7	0.8	-4.8 *	-1.9 *	-1.1	-0.4	-1.0	2.6	2.8	1.8
Wakulla	-1.0	1.7	-6.8	1.2	-3.1	5.5	-1.1	^	^	^
Walton	0.1	-0.4	0.5	1.0	-1.1	-1.9	-4.1	9.6	^	^
Washington	0.3	1.2	0.6	0.3	-1.7	-0.2	-13.0 *	^	^	^

\* EAPC is significantly different from zero, p<0.05.

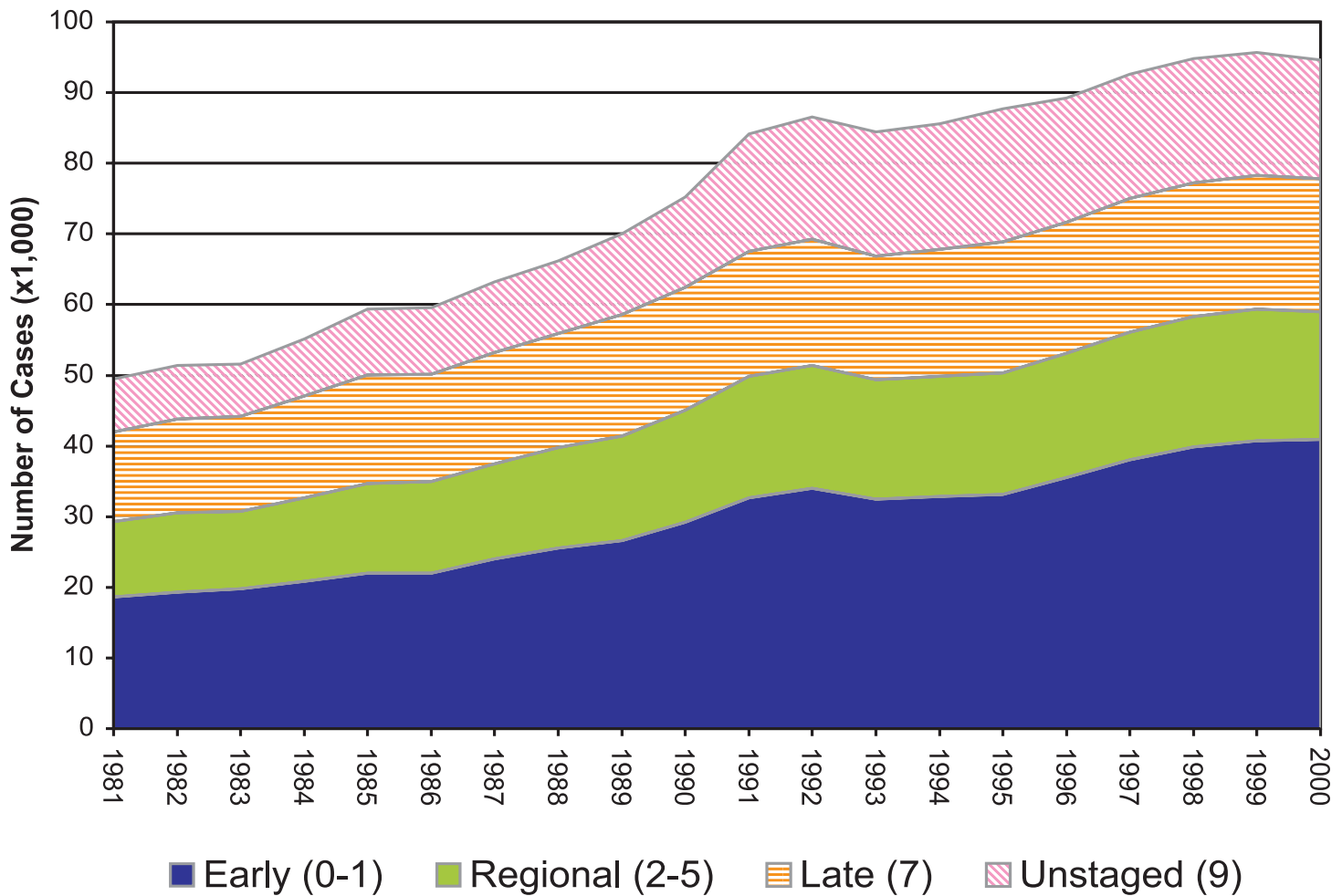
^ Statistics are not displayed for fewer than 10 cases.

## STAGE OF CANCER AT DIAGNOSIS

In this report, early stage cancer is local, except bladder cancer, for which early stage includes in situ cancers. Advanced stage includes all cancer diagnosed at regional and distant stages.

- The percentage of cancer cases diagnosed at the early stage increased from 38 percent in 1981 to 43 percent in 2000, while the percentage of advanced stage cancer diagnoses decreased from 47 percent to 39 percent.

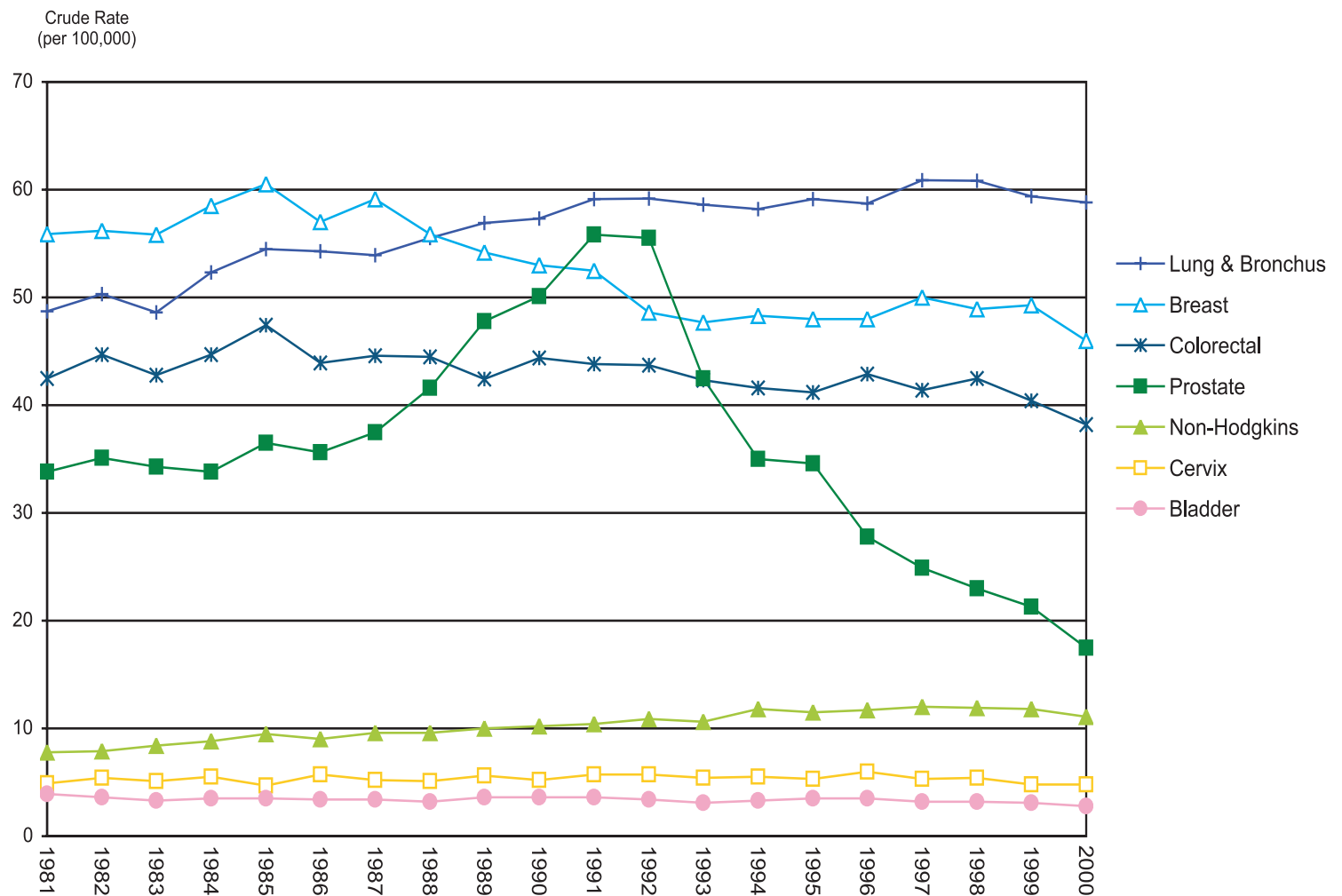
**Figure 8. All Cancers by Stage, Florida, 1981-2000**



### Crude Incidence Rates of Cancer at Advanced Stage

- The crude rate of advanced stage prostate cancer increased from 1981 to 2000. The rate declined dramatically after 1991, indicating fewer cases diagnosed at the advanced stage.
- Crude rates for advanced stage bladder, breast, and colorectal cancer decreased by 28 percent, 18 percent, and 10 percent, respectively, over the 20-year period.
- Crude rates for advanced stage lung and bronchial cancer, and non-Hodgkin's Lymphoma increased by 21 percent and 42 percent, respectively.
- The crude rates for advanced stage cervical cancer remained virtually unchanged from 1981 to 2000. The crude rates for advanced stage melanoma, and head and neck cancer were unchanged and were omitted from the figure.

**Figure 9. Crude Incidence Rates for Advanced Stage Cancer, Florida, 1981-2000**



## Sex and Race

- Bladder cancer was diagnosed the least frequently at advanced stages, accounting for only 9 percent of cases. The sites with the next lowest percentages of advanced stage diagnoses were prostate (10 percent), and melanoma (15 percent).
- Sixty-one percent of lung cancers were diagnosed at the advanced stage, followed by 54 percent of colorectal cancer cases, 51 percent of non-Hodgkin's lymphoma cases, and 48 percent of head and neck cancers.
- More females (42 percent) were diagnosed with advanced stage cancers than males (37 percent). However, females were diagnosed at the advanced stage less frequently for all major sites except bladder cancer. The high percentage of cervical cancer (42 percent), and breast cancer (31 percent) diagnosed at the advanced stage, compared to 10 percent of prostate cancer diagnosed at the advanced stage, accounted for much of this difference.
- More non-Whites (44 percent) were diagnosed at the advanced stage of cancer than Whites (39 percent). The percentage of advanced stage cancer diagnoses in non-Whites was higher than in Whites for all major cancer sites, except non-Hodgkin's lymphoma. Large racial gaps were apparent in prostate, breast, head and neck, and bladder cancer.
- Twenty-five percent of bladder cancers in non-White females were diagnosed at an advanced stage. This was almost twice the percentage in non-White males (14 percent), and nearly three times the percentage of advanced stage diagnoses for White males (9 percent)

**Table 7.**

### Percentage of Advanced Stage(1) Cancer at Diagnosis by Sex and Race, Florida 2000

	All Cancers	Lung & Bronchus	Prostate	Breast	Colorectal	Bladder	Head & Neck	Non-Hodgkins	Melanoma	Cervix
<b>Florida</b>	<b>39.0</b>	<b>60.8</b>	<b>10.1</b>	<b>30.8</b>	<b>53.6</b>	<b>9.1</b>	<b>47.7</b>	<b>50.6</b>	<b>14.9</b>	<b>42.2</b>
Female	41.5	58.3		30.6	53.8	10.1	45.4	49.0	12.9	42.2
Male	36.7	62.8	10.1		53.3	8.7	48.6	52.0	16.1	
Non-White	43.9	65.1	14.1	42.6	59.0	17.5	60.4	55.1		47.8
White	38.6	60.5	9.6	29.6	53.2	8.8	46.5	50.2	14.9	41.1
NW Female	48.1	63.1		42.1	58.2	25.0	64.1	48.9		47.8
W Female	41.0	58.0		29.5	53.6	9.5	43.7	48.8	12.9	41.1
NW Male	40.3	66.1	14.1		59.6	13.9	59.0	60.4		
W Male	36.5	62.5	9.6		52.9	8.5	47.7	51.3	16.1	

(1) Advanced stage includes all regional and distant disease.

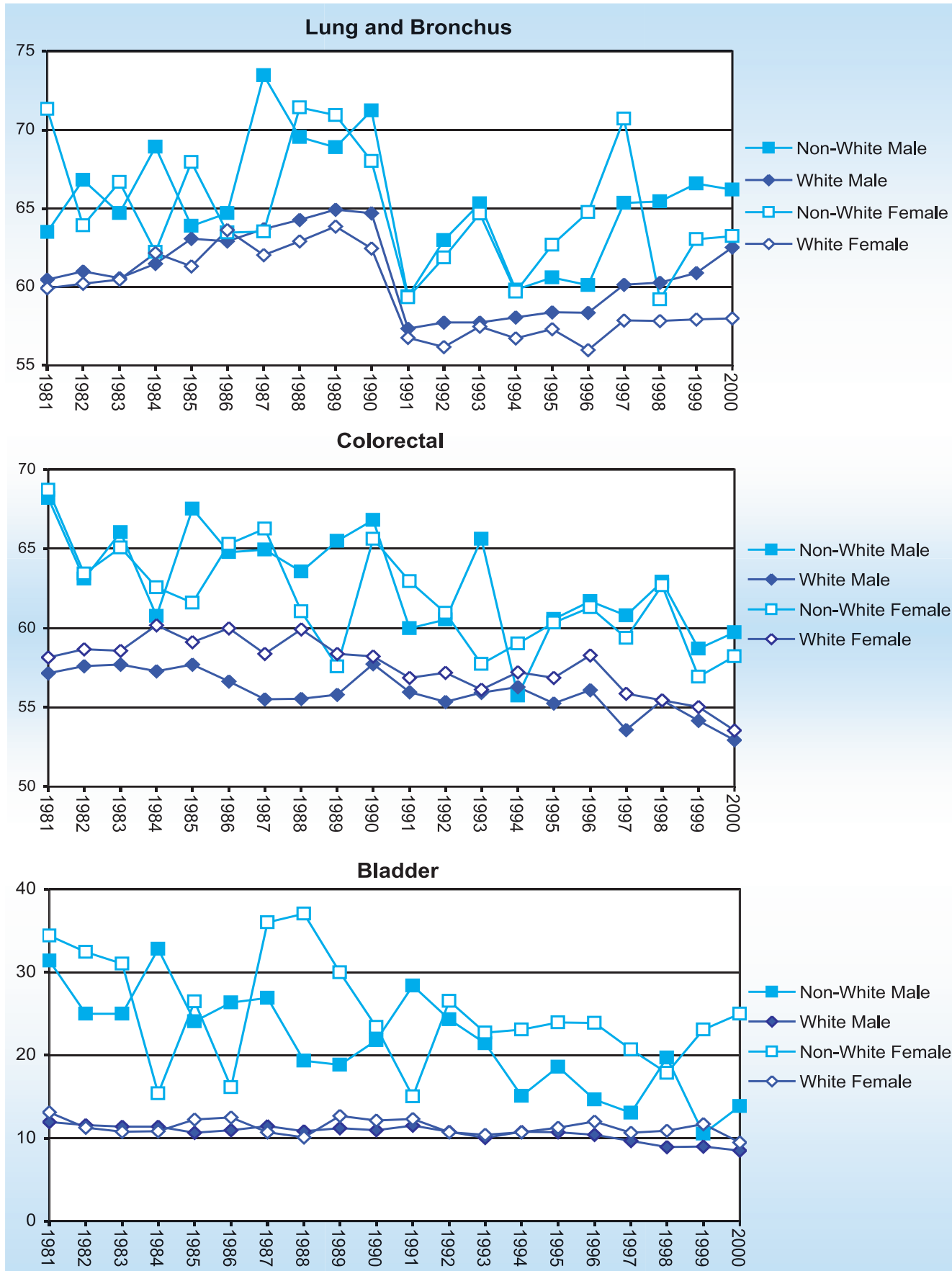
NW = Non-White / W = White

## Cancer Sites

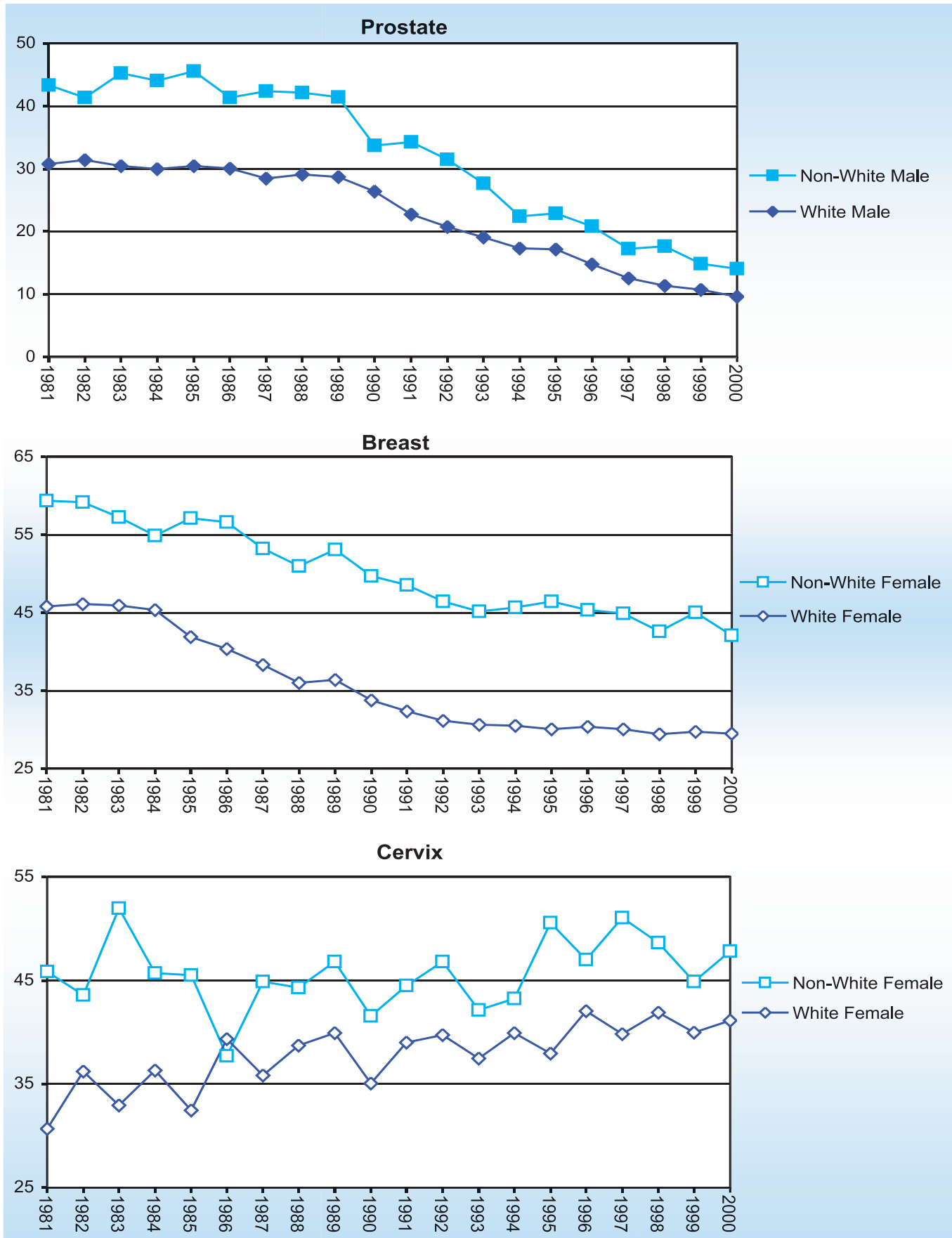
The percentage of cancer diagnosed at advanced stage varied by cancer site. For melanoma, the percentage of advanced stage cancer is omitted in the analysis for non-Whites, because of the low number of incident cases.

- For all the top sites, non-Whites had a higher percentage of advanced stage cancer at diagnosis than Whites.
- The percentage of advanced stage cancer of the lung and bronchus decreased for White males and non-White females, but increased for White females and non-White males.
- The percentage of advanced stage cancer at diagnosis decreased in all sex-race groups for colorectal, bladder, prostate, breast, head and neck cancer, and melanoma during the 20-year period. However, advanced stage cancer diagnoses increased in all sex-race groups for cervical cancer and non-Hodgkin's lymphoma.
- White males had a higher percentage of advanced stage melanoma diagnoses than White females, but a lower percentage of advanced stage colorectal cancer diagnoses.

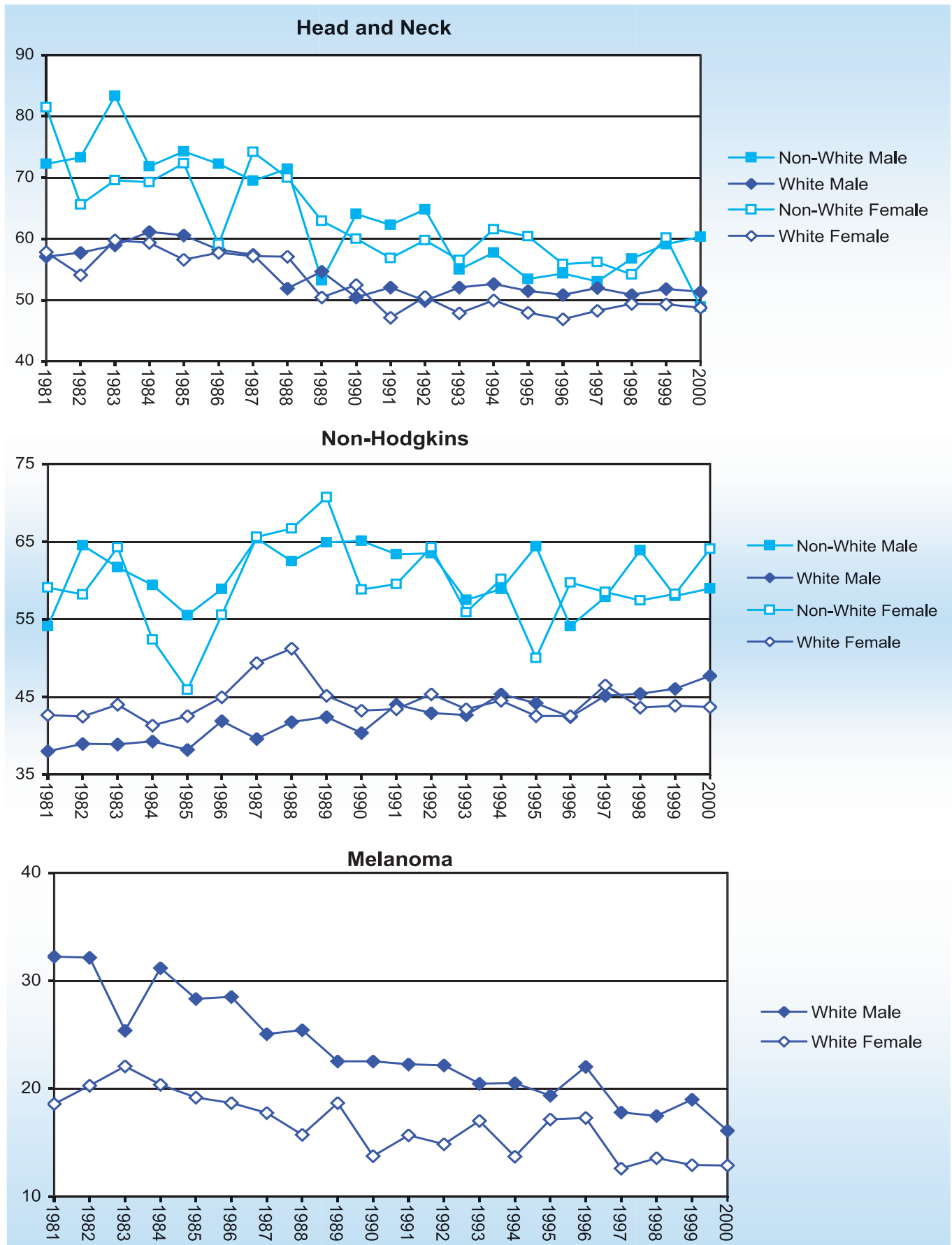
**Figure 10.1 Percentage of Advanced Stage Cancer at Diagnosis by Sex and Race, Florida, 1981-2000**



**Figure 10.2 Percentage of Advanced Stage Cancer at Diagnosis by Sex and Race, Florida, 1981-2000**



**Figure 10.3 Percentage of Advanced Stage Cancer at Diagnosis by Sex and Race, Florida, 1981-2000**





## Age Group

- Overall, for all cancers combined for all sex-race groups, more than 50 percent of the cancer occurring in Florida residents age 19 and younger was diagnosed at advanced stage. This group also had the highest percentage of advanced stage melanoma at diagnosis.
- Non-Whites had higher percentages of advanced stage cancer at diagnosis than Whites for most age groups and most cancer sites. The exceptions were the 20 to 44 and 75 and older age groups for cancer of the lung and bronchus, age 75 and older for breast cancer, and the 20 to 44 age group for cervical cancer, where Whites had higher percentages of advanced stage cancer at diagnosis than non-Whites.
- The 20 to 44 age group had the most advanced stage prostate cancer at diagnosis in both races —12.5 percent for Whites and 16.7 percent for non-Whites. Non-White males age 75 and older were diagnosed at an advanced stage almost as often at 16.2 percent.
- Breast cancer was diagnosed at an advanced stage most often for females age 20 to 44 in both race groups. This suggests a need for better screening in younger females.
- Advanced stage cervical cancer occurred most often in the 65 to 74 age group for both race groups.
- For prostate, cervical, breast, and colorectal cancers, for which screening methods are available to allow early detection, non-Whites had higher percentages of advanced stage cancer at diagnosis in most age groups.

Table 8.

## Percentage of Advanced Stage (1) Cancer at Diagnosis by Sex, Race, and Age Group, Florida, 2000

	All Cancers	Lung & Bronchus	Prostate	Breast	Colorectal	Bladder	Head & Neck	Non- Hodgkins	Melanoma	Cervix
<b>Florida</b>	<b>39.0</b>	<b>60.8</b>	<b>10.1</b>	<b>30.8</b>	<b>53.6</b>	<b>9.1</b>	<b>47.7</b>	<b>50.6</b>	<b>14.9</b>	<b>42.2</b>
0-19	55.5	^	^	^	^	^	^	54.4	29.4	^
20-44	40.6	72.5	13.3	41.2	62.3	14.9	47.2	54.2	13.8	34.8
45-64	42.0	68.7	12.7	34.3	57.4	9.7	53.9	55.0	17.4	45.2
65-74	37.2	60.9	9.0	25.8	53.8	9.5	42.4	48.0	15.6	52.7
75+	37.3	54.2	9.3	25.7	50.8	8.2	42.4	48.0	12.0	49.5
<b>Female</b>										
0-19	56.8	^		^	^	^	^	63.6	40.0	^
20-44	38.8	76.8		41.2	58.9	13.6	38.0	55.3	9.8	34.8
45-64	43.1	66.7		34.3	59.2	9.4	51.4	52.5	14.1	45.2
65-74	41.8	58.4		25.8	54.2	11.4	39.3	47.0	15.9	52.7
75+	40.4	51.2		25.7	51.0	9.6	45.4	46.4	10.5	49.5
<b>Male</b>										
0-19	54.5	^	^		^	^	^	52.2	^	
20-44	43.4	68.7	13.3		65.1	15.2	51.5	53.5	18.0	
45-64	40.9	70.1	12.7		55.8	9.9	54.7	56.8	19.8	
65-74	34.1	62.7	9.0		53.5	8.9	43.6	49.0	15.2	
75+	34.5	56.7	9.3		50.6	7.7	40.7	49.5	12.8	
<b>Non-White</b>										
0-19	54.4	^	^	^	^	^	^	40.0		^
20-44	47.8	71.2	16.7	48.6	67.1	^	64.3	55.1		34.8
45-64	47.4	75.5	14.4	47.3	64.1	22.2	65.3	59.2		55.4
65-74	39.4	60.4	12.7	32.6	54.2	22.9	48.6	47.9		56.3
75+	39.7	50.8	16.2	25.5	54.6	9.1	55.6	56.8		50.0
<b>White</b>										
0-19	55.9	^	^	^	^	^	^	57.4	29.4	^
20-44	39.4	72.9	12.5	39.6	61.0	14.7	45.6	53.9	13.8	35.5
45-64	41.3	67.8	12.2	32.6	56.4	9.0	52.4	54.5	17.4	42.5
65-74	37.1	61.0	8.6	25.3	54.0	9.1	41.9	48.0	15.6	51.3
75+	37.3	54.3	8.8	25.8	50.7	8.2	41.8	47.7	12.0	48.8
<b>NW Female</b>										
0-19	60.8	^		^	^	^	^	^		^
20-44	46.1	80.8		48.6	65.8	^	80.0	44.2		34.8
45-64	51.6	74.2		47.3	63.4	38.5	61.0	51.1		55.4
65-74	46.8	56.8		32.6	51.7	33.3	53.3	44.4		56.3
75+	43.8	48.3		25.5	56.0	8.7	75.0	54.5		50.0
<b>W Female</b>										
0-19	56.5	^		^	^	^	^	^	40.0	^
20-44	37.4	76.0		39.6	56.9	9.5	31.3	58.8	9.8	35.5
45-64	42.1	66.1		32.6	58.7	7.7	50.2	52.4	14.1	42.5
65-74	41.4	58.5		25.3	54.6	10.5	37.9	47.2	15.9	51.3
75+	40.3	51.3		25.8	50.8	9.5	44.0	46.0	10.5	48.8
<b>NW Male</b>										
0-19	50.0	^	^		^	^	^	^		
20-44	50.8	63.6	16.7		68.3	^	55.6	62.5		
45-64	44.0	76.2	14.4		64.6	15.6	66.7	66.1		
65-74	34.6	62.4	12.7		56.3	18.8	46.4	52.4		
75+	35.8	52.3	16.2		52.6	9.4	45.8	60.0		
<b>W Male</b>										
0-19	55.5	^	^		^	^	^	57.9	^	
20-44	42.6	70.1	12.5		64.5	16.2	52.0	50.8	18.0	
45-64	40.5	69.2	12.2		54.5	9.4	53.3	56.0	19.8	
65-74	34.2	62.7	8.6		53.5	8.6	43.5	48.8	15.2	
75+	34.6	57.0	8.8		50.7	7.7	40.6	49.3	12.8	

(1) Advanced stage includes all regional and distant disease.

^ Statistics are not displayed for fewer than 10 advanced stage cases.

NW = Non-White / W = White

## County

- The percentage of all cancers combined that were diagnosed at an advanced stage varied from 30 percent in Charlotte County to 55 percent in Gadsden County. Four other counties had less than 33 percent advanced stage cancer at diagnosis: DeSoto, Holmes, Jefferson, and Pasco. Two additional counties, Hardee and Union, had more than 50 percent of all cancers diagnosed at advanced stages.
- Calhoun County had the highest percentage of advanced stage cancer of the lung and bronchus at diagnosis at 84 percent. Holmes County had the lowest at 33 percent.
- Advanced stage prostate cancer at diagnosis ranged from a low of 3 percent in Levy County to a high of 36 percent in Wakulla County. Gadsden County was the second highest, with nearly two-thirds (32 percent) of its prostate cancer diagnosed at advanced stages.
- Bradford County had the lowest percentage of advanced stage breast cancer at diagnosis at 8 percent, while Hendry County had the highest percentage at 53 percent.
- Hendry County also had the highest percentage of advanced stage colorectal cancer at diagnosis (92 percent); the lowest percentage was 25 percent in Jackson County.
- The percentage of advanced stage bladder cancer at diagnosis was the highest in Okeechobee County (20 percent), the second highest in Escambia County (18 percent), and the lowest in Seminole County (2 percent).
- Head and neck cancer was diagnosed least frequently at an advanced stage in DeSoto County (25 percent) and most frequently in Clay and Collier counties where more than two-thirds of the cases were diagnosed at advanced stages (67 percent).
- The percentage of advanced stage non-Hodgkin's lymphoma at diagnosis ranged from the lowest in Charlotte County at 41 percent to the highest at 82 percent in Levy County.
- Both Levy and Saint Lucie counties had 36 percent of melanoma cases diagnosed at an advanced stage. Escambia County had the lowest percentage of melanoma cases diagnosed at an advanced stage (5 percent).
- The percentage of cervical cancer diagnosed at an advanced stage was the highest in Collier County (64 percent) and the lowest in Brevard County (19 percent).

Table 9.

## Percentage of Advanced Stage (1) Cancer at Diagnosis by County, Florida, 2000

	All Cancers	Lung & Bronchus	Prostate	Breast	Colorectal	Bladder	Head & Neck	Non- Hodgkins	Melanoma	Cervix
Florida	39.0	60.8	10.1	30.6	53.6	9.1	47.7	50.6	14.9	42.2
Alachua	42.2	70.2	10.0	32.4	58.5	8.8	58.3	51.4	18.5	^
Baker	48.4	66.7	10.0	11.8	^	^	^	^	^	^
Bay	41.3	77.2	11.3	41.7	44.9	12.5	58.6	46.2	7.0	^
Bradford	41.8	52.6	21.4	7.7	75.0	^	^	^	^	^
Brevard	39.9	65.2	6.1	27.8	65.1	8.4	45.7	73.1	18.7	18.8
Broward	36.5	56.1	9.2	31.2	46.9	8.3	45.5	43.7	12.5	40.0
Calhoun	41.1	84.6	^	^	^	^	^	^	^	^
Charlotte	30.0	36.8	8.4	24.2	41.7	9.5	25.6	40.8	9.7	^
Citrus	39.7	62.3	9.9	30.2	60.3	10.9	32.3	47.6	10.0	^
Clay	39.4	60.9	8.6	19.8	50.0	0.0	66.7	66.7	14.3	^
Collier	38.5	66.3	5.8	30.5	62.1	14.7	67.4	67.7	7.8	63.6
Columbia	42.1	66.7	17.6	24.3	45.7	9.1	52.2	45.5	^	^
Miami-Dade	40.5	62.7	11.9	33.6	53.7	9.8	48.5	55.3	17.4	49.3
DeSoto	32.3	36.6	17.4	19.1	63.6	^	25.0	^	^	^
Dixie	40.5	63.2	^	35.3	^	^	^	^	^	^
Duval	42.4	70.0	8.8	29.7	59.5	9.7	49.4	62.5	15.1	48.9
Escambia	43.9	67.2	13.7	33.7	52.9	18.2	52.8	54.2	5.3	46.7
Flagler	40.9	64.3	10.7	32.4	45.8	8.3	50.0	67.7	^	^
Franklin	43.9	72.7	^	36.4	^	^	^	^	^	^
Gadsden	55.2	53.8	32.0	51.6	66.7	^	53.8	^	^	^
Gilchrist	48.6	71.4	9.1	^	70.0	^	^	^	^	^
Glades	40.7	^	^	^	^	^	^	^	^	^
Gulf	39.5	73.7	14.3	15.4	^	^	^	^	^	^
Hamilton	44.7	60.0	^	^	^	^	^	^	^	^
Hardee	52.6	47.4	^	22.2	63.6	^	^	^	^	^
Hendry	48.4	70.4	13.8	52.9	91.7	^	^	^	^	^
Hernando	39.8	62.5	8.9	30.4	53.5	14.3	57.1	47.5	12.5	^
Highlands	37.9	57.8	7.1	39.0	49.5	10.3	39.3	57.7	7.1	^
Hillsborough	40.6	66.3	9.2	32.8	51.8	13.5	53.0	53.6	13.4	41.4
Holmes	32.5	33.3	^	^	^	^	^	^	^	^
Indian River	43.3	65.8	9.4	27.0	63.6	14.1	57.1	58.5	12.9	^
Jackson	34.2	39.5	13.0	29.4	25.0	^	41.7	^	^	^
Jefferson	32.3	40.0	^	^	^	^	^	^	^	^
Lafayette	47.4	^	^	^	^	^	^	^	^	^
Lake	39.1	57.2	9.6	29.6	65.5	4.2	48.0	40.0	15.6	36.4
Lee	40.8	65.7	12.2	26.0	64.0	8.8	54.1	59.6	13.5	40.0
Leon	41.7	64.6	20.2	33.1	62.6	10.5	55.2	38.5	18.9	^
Levy	41.1	66.0	3.0	28.6	59.3	9.1	^	81.8	36.4	^
Liberty	40.9	^	^	^	^	^	^	^	^	^
Madison	33.3	60.0	20.0	^	30.0	^	^	^	^	^
Manatee	43.1	70.0	11.7	25.7	62.7	5.1	48.8	54.4	21.0	61.5
Marion	37.4	56.6	13.9	26.5	61.7	10.2	43.8	27.7	18.8	27.6
Martin	38.6	73.5	9.3	28.1	48.6	9.3	51.0	58.7	11.6	^
Monroe	36.0	58.4	14.8	36.5	41.4	11.1	45.5	28.6	25.0	^
Nassau	43.8	75.0	4.8	23.1	69.6	18.8	31.6	78.6	^	^
Okaloosa	35.6	58.2	10.8	27.0	47.8	6.0	46.2	41.7	10.0	^
Okeechobee	38.6	47.2	0.0	11.5	60.0	20.0	50.0	^	^	^
Orange	39.8	63.2	11.5	35.2	58.3	13.2	50.7	41.3	18.1	35.9
Osceola	38.7	58.7	8.6	37.7	44.4	3.6	50.0	48.4	12.5	^
Palm Beach	36.2	58.6	7.4	30.5	50.4	4.6	49.6	45.7	10.5	49.1
Pasco	32.2	45.7	8.1	20.8	42.5	8.9	37.3	47.6	23.1	40.0
Pinellas	38.8	59.4	11.3	31.1	49.9	9.0	46.4	43.8	14.3	50.0
Polk	38.2	55.2	8.2	30.9	48.6	11.8	39.2	49.1	18.8	37.1
Putnam	38.9	57.1	6.0	19.6	52.9	9.5	59.1	66.7	9.1	^
Saint Johns	38.1	65.5	11.1	27.9	64.1	13.0	44.4	40.0	14.3	^
Saint Lucie	40.1	59.5	10.6	33.8	58.5	6.0	37.1	60.5	36.1	50.0
Santa Rosa	41.1	58.8	13.6	35.1	67.2	4.3	42.9	63.6	7.1	^
Sarasota	38.9	64.3	9.9	25.4	51.1	7.3	33.0	50.0	16.2	40.0
Seminole	42.2	67.5	13.5	34.5	66.9	1.7	54.7	56.9	13.9	^
Sumter	40.8	57.7	10.3	30.0	69.7	8.3	61.5	^	23.1	^
Suwannee	34.6	62.1	9.5	31.8	34.8	^	^	^	^	^
Taylor	45.6	65.4	23.5	40.0	^	^	^	^	^	^
Union	50.0	52.0	^	^	84.6	^	50.0	^	^	^
Volusia	38.1	58.8	7.9	30.6	54.3	9.1	42.9	43.3	18.3	46.7
Wakulla	43.6	65.2	35.7	15.4	60.0	^	^	^	^	^
Walton	35.3	35.9	15.8	33.3	63.6	^	^	^	^	^
Washington	33.0	52.0	^	^	30.0	^	^	^	^	^

(1) Advanced stage includes all regional and distant disease.

^ Statistics are not displayed for fewer than 10 advanced stage cases.

## CANCER SCREENING

Screening for breast, cervical, and colorectal cancers is assessed in the 2002 Florida Behavioral Risk Factor Surveillance System (BRFSS) survey. The Florida BRFSS is an anonymous telephone survey of a sample of adults age 18 and older, in households with telephones. Survey respondents are randomly selected to ensure that survey data will be representative of all adults in Florida. The Florida BRFSS survey followed a protocol developed by the CDC to ensure the quality of the survey and comparability of the data. The prevalence of cancer screening is estimated from data collected from approximately 34,000 adults in Florida.

More detailed data from the Florida BRFSS surveys can be found on the Florida Department of Health web site at: [http://www.doh.state.fl.us/disease\\_ctrl/epi/brfss/index.htm](http://www.doh.state.fl.us/disease_ctrl/epi/brfss/index.htm). BRFSS results by state since 1990 are available at: <http://apps.nccd.cdc.gov/brfss/TrendData.asp>.

### MAMMOGRAM

- Among females age 40 and older, 79 percent reported having a mammogram in the past two years.
- The lowest prevalence of mammogram screening was 60 percent in Gilchrist County; the highest prevalence was 90 percent in Saint Johns County.

### PAP SMEAR

- In 2002, 82 percent of adult females in Florida reported having a Pap smear test within the past two years.
- The prevalence of Pap smear testing ranged from 52 percent in Lafayette County to 90 percent in Santa Rosa County. The prevalence of Pap smear testing among adult females within the past two years exceeded 75 percent in 57 of 67 Florida counties.

### BLOOD STOOL TEST

- One-third of adults age 50 and older (34 percent) had blood stool screening tests in the past two years.
- Prevalence of blood stool screening varied considerably, from 17 percent in Walton County to 48 percent in Manatee County. Seventeen counties had a prevalence of greater than 40 percent.

### SIGMOIDOSCOPY

- More than half of adults age 50 and older (53 percent), have ever had a sigmoidoscopy exam. The prevalence of sigmoidoscopy screening ranged from 39 percent in Miami-Dade County to 67 percent in Leon County. Counties with a low prevalence of sigmoidoscopy screening were likely to have a low prevalence of blood stool testing.

**Table 10. Prevalence of Cancer Screenings in Adults by County, Florida, 2002**

	Mammogram in 2 years Women 40 and older			Pap Smear Adult women			Blood Stool Test Adults 50 and older			Sigmoidoscopy Adults 50 and older		
	Percent	95% CI		Percent	95% CI		Percent	95% CI		Percent	95% CI	
<b>Florida</b>	<b>79.0</b>	<b>77.5</b>	<b>80.5</b>	<b>82.2</b>	<b>80.7</b>	<b>83.7</b>	<b>33.5</b>	<b>31.9</b>	<b>35.1</b>	<b>52.6</b>	<b>50.8</b>	<b>54.5</b>
Alachua	80.4	73.2	87.6	84.2	78.6	89.8	35.2	26.7	43.8	52.9	43.2	62.6
Baker	68.0	50.6	85.5	77.9	60.6	95.3	38.1	27.1	49.1	60.4	49.2	71.6
Bay	65.4	55.6	75.2	83.4	77.4	89.4	22.1	15.1	29.1	52.7	44.0	61.5
Bradford	83.6	76.7	90.6	87.6	81.1	94.2	30.1	20.9	39.4	48.1	36.2	60.1
Brevard	85.9	81.3	90.4	73.8	55.6	91.9	42.2	35.7	48.7	56.0	49.4	62.6
Broward	78.8	71.9	85.7	83.6	78.3	88.9	28.4	21.8	35.1	54.7	47.4	62.0
Calhoun	77.2	69.7	84.8	83.1	72.3	93.9	31.7	23.9	39.5	45.4	36.3	54.4
Charlotte	76.3	70.0	82.6	75.9	68.8	83.1	33.8	28.1	39.5	60.4	54.5	66.2
Citrus	78.7	73.2	84.3	71.6	64.4	78.9	34.2	28.5	40.0	58.0	52.1	63.9
Clay	84.0	78.6	89.5	87.7	82.8	92.6	25.4	18.2	32.6	52.2	42.1	62.4
Collier	79.8	71.0	88.5	82.8	74.0	91.7	44.3	35.8	52.8	64.5	57.5	71.6
Columbia	73.3	63.9	82.6	83.4	76.6	90.2	43.8	35.5	52.0	55.8	47.8	63.9
Miami-Dade	82.2	75.9	88.4	80.4	74.8	86.0	22.3	15.7	28.9	38.9	30.3	47.4
DeSoto	78.8	69.1	88.6	87.6	81.3	93.9	25.4	16.5	34.3	50.5	35.4	65.7
Dixie	63.7	38.1	89.3	84.7	76.8	92.6	47.1	25.2	69.1	53.8	32.5	75.0
Duval	75.3	68.2	82.4	88.9	82.8	94.9	40.6	32.9	48.2	52.4	44.7	60.2
Escambia	79.9	73.4	86.5	83.9	77.8	90.0	29.0	22.4	35.6	59.0	51.8	66.2
Flagler	84.5	79.8	89.2	82.1	76.4	87.7	46.6	40.9	52.3	62.6	57.0	68.1
Franklin	66.6	57.9	75.3	76.5	64.6	88.4	32.8	26.0	39.7	49.4	41.4	57.3
Gadsden	82.8	76.5	89.0	85.4	77.1	93.6	40.4	30.9	50.0	50.5	40.0	61.1
Gilchrist	59.8	37.8	81.9	73.6	51.7	95.5	37.9	20.3	55.4	48.7	30.3	67.2
Glades	80.9	73.4	88.5	85.9	79.1	92.7	24.8	17.3	32.3	46.8	36.6	57.0
Gulf	80.7	73.9	87.4	83.3	76.7	89.8	29.5	21.6	37.4	51.5	44.0	58.9
Hamilton	76.9	61.5	92.3	86.7	77.7	95.8	21.4	12.0	30.9	58.3	41.8	74.7
Hardee	67.3	59.5	75.0	82.3	76.6	88.0	24.6	18.4	30.7	46.2	39.3	53.1
Hendry	64.3	55.6	73.0	77.4	70.3	84.5	20.4	14.5	26.4	42.2	35.1	49.4
Hernando	80.7	75.4	86.0	79.0	73.1	84.9	35.7	29.9	41.6	58.0	52.2	63.9
Highlands	74.9	69.2	80.7	77.5	70.9	84.0	27.6	22.2	33.0	47.6	41.0	54.3
Hillsborough	80.8	74.4	87.2	84.5	78.7	90.3	23.7	17.3	30.0	50.1	42.4	57.9
Holmes	69.0	61.5	76.4	71.7	63.4	80.1	20.7	14.4	27.0	44.0	36.6	51.3
Indian River	74.5	68.3	80.6	78.6	72.8	84.4	32.5	26.7	38.3	51.4	45.2	57.6
Jackson	77.6	71.6	83.7	76.4	69.7	83.1	20.7	12.7	28.7	53.3	37.7	68.8
Jefferson	73.2	64.9	81.4	88.4	82.5	94.3	34.7	27.8	41.6	50.6	43.1	58.1
Lafayette	71.8	62.4	81.3	51.7	12.5	90.9	42.1	32.0	52.3	40.1	31.7	48.4
Lake	72.2	65.9	78.5	80.8	74.5	87.2	41.2	34.5	47.8	51.4	44.8	58.1
Lee	83.5	78.1	88.8	82.0	76.0	87.9	37.0	31.1	43.0	54.5	48.4	60.6
Leon	85.6	79.1	92.0	88.0	83.1	92.9	47.0	38.0	56.1	67.1	58.8	75.3
Levy	74.1	67.1	81.1	79.8	73.0	86.6	39.2	32.4	46.1	48.7	41.8	55.6
Liberty	77.6	71.3	83.9	88.4	81.4	95.4	44.7	37.5	51.9	54.6	47.4	61.7
Madison	78.6	72.9	84.2	82.2	76.6	87.7	31.1	24.9	37.3	47.9	41.1	54.7
Manatee	78.3	68.6	88.1	78.0	71.3	84.7	48.3	33.5	63.1	55.3	42.1	68.5
Marion	74.1	67.6	80.6	77.9	71.4	84.5	36.1	30.0	42.2	50.9	44.4	57.3
Martin	82.0	76.1	87.9	81.0	73.9	88.1	34.5	28.4	40.5	56.4	49.9	62.9
Monroe	76.8	70.1	83.6	80.7	74.4	87.0	34.3	25.8	42.7	43.9	36.2	51.6
Nassau	75.3	68.8	81.8	82.0	75.4	88.6	32.9	24.3	41.5	51.8	43.3	60.2
Okaloosa	83.2	77.3	89.1	84.6	78.8	90.4	24.8	18.5	31.0	59.9	52.7	67.0
Okeechobee	70.6	62.8	78.5	81.5	74.8	88.1	21.3	15.9	26.8	44.8	37.5	52.1
Orange	71.3	63.5	79.1	82.4	76.8	87.9	33.3	25.5	41.2	53.1	44.3	61.9
Osceola	74.7	67.9	81.6	83.5	76.9	90.0	30.3	23.4	37.2	52.6	44.9	60.3
Palm Beach	83.2	77.1	89.2	83.5	76.9	90.1	40.0	32.7	47.4	55.3	47.1	63.5
Pascoe	77.6	71.6	83.6	82.4	76.7	88.1	41.8	35.0	48.5	50.1	43.1	57.1
Pinellas	76.3	69.5	83.1	80.2	73.6	86.8	41.6	34.7	48.5	61.2	54.4	68.0
Polk	77.9	71.4	84.4	72.4	65.8	79.0	28.6	22.5	34.6	51.1	44.3	57.9
Putnam	65.5	58.4	72.5	76.9	70.0	83.7	31.9	25.5	38.3	42.8	36.1	49.5
St. Johns	89.5	85.2	93.8	89.4	84.6	94.2	36.5	29.9	43.1	64.8	58.2	71.3
St. Lucie	80.1	74.1	86.2	82.6	77.0	88.3	30.9	24.9	36.9	53.1	46.7	59.6
Santa Rosa	80.0	73.2	86.8	89.9	85.2	94.7	28.7	21.9	35.6	60.3	52.9	67.7
Sarasota	81.8	75.9	87.7	85.7	80.5	90.9	38.4	31.5	45.3	56.7	49.4	64.0
Seminole	74.6	67.1	82.1	88.2	83.8	92.6	38.8	31.0	46.6	55.5	47.6	63.3
Sumter	75.3	68.3	82.3	75.9	67.6	84.2	39.8	33.5	46.1	58.1	52.0	64.3
Suwannee	73.5	66.5	80.5	77.1	70.2	83.9	40.4	33.5	47.3	48.4	41.2	55.6
Taylor	70.7	63.8	77.6	72.3	61.7	82.9	29.3	23.1	35.5	47.7	40.9	54.6
Union	60.1	49.4	70.9	81.0	72.6	89.4	26.8	19.0	34.7	48.0	38.2	57.7
Volusia	79.1	72.8	85.4	84.1	78.4	89.9	28.3	22.7	34.0	49.2	42.6	55.7
Wakulla	83.5	77.3	89.7	84.2	78.0	90.3	47.0	38.9	55.1	54.4	46.3	62.6
Walton	73.3	65.9	80.6	73.4	65.4	81.5	16.6	11.5	21.7	48.3	41.0	55.6
Washington	67.6	60.1	75.0	77.1	69.3	84.8	19.1	14.1	24.2	47.1	39.6	54.6

## CANCER MORTALITY

### DEATHS AND AGE-ADJUSTED MORTALITY RATES

- In 2000, 38,191 cancer deaths were reported among Florida residents. There were 877 more cancer deaths than in 1999, representing a 2.4 percent increase. Cancers of the lung and bronchus, colon and rectum, breast, and prostate were the leading causes, accounting for 53 percent of cancer deaths in 2000.

### Sex

- Fifty-four percent of deaths from all cancers combined in 2000 occurred in males. Males died of cancer in some sites more frequently than females, accounting for 66 percent of melanoma deaths, 70 percent of bladder cancer deaths, and 73 percent of deaths from head and neck cancer.
- Among females, cancers of the lung and bronchus, breast, and colon and rectum accounted for about 52 percent of all cancer deaths.
- Deaths from the four top-ranked cancers constituted 57 percent of all male cancer deaths. These four sites were lung and bronchus, prostate, colon and rectum, and non-Hodgkin's lymphoma.
- The age-adjusted mortality rate for all cancers combined in males was 50 percent higher than in females.
- Age-adjusted mortality rates in males were more than three times as high as in females for head and neck, and bladder cancer; more than twice as high for melanoma; and 67 percent higher for non-Hodgkin's lymphoma.

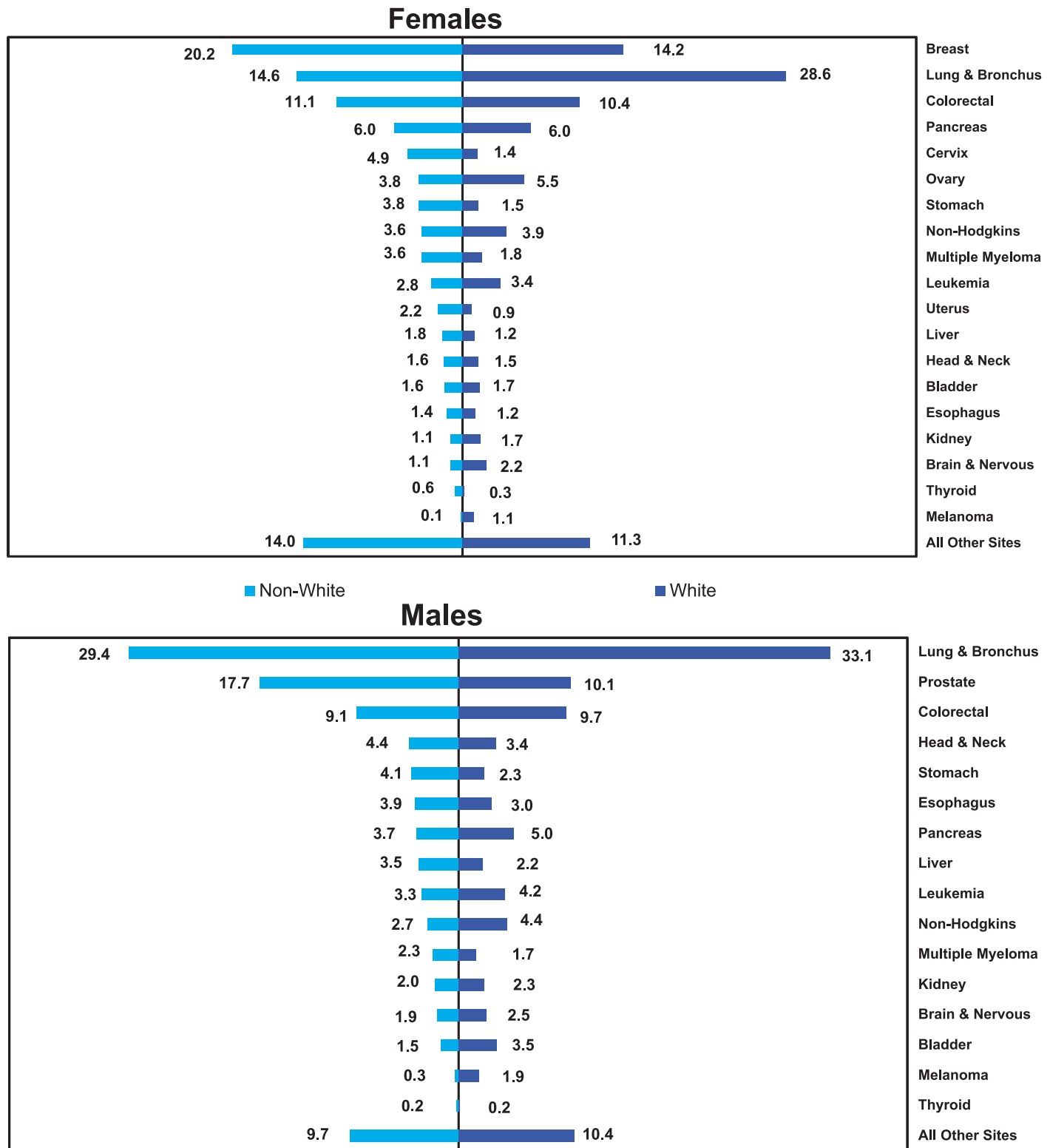
### Race

- Cancer deaths in Whites accounted for 90 percent of the total cancer deaths in Florida in 2000, although only 78 percent of the population was White.
- The age-adjusted mortality rate for all cancers combined was slightly higher for Whites (187 per 100,000 than non-Whites (173 per 100,000).
- Non-Whites had higher mortality rates for prostate, breast, and cervical cancer, but lower mortality rates for non-Hodgkin's lymphoma, lung and bronchus, and bladder cancers.

### Sex and Race

- Males of both race groups had higher age-adjusted mortality rates for all major cancers than females.
- White females had higher mortality rates than non-White females for all cancers combined, and for cancers of the lung and bronchus, head and neck, and non-Hodgkin's lymphoma. Non-White females had higher mortality rates for cancers of the colon and rectum, breast, and cervix than White females.
- White males had higher rates than non-White males for cancer of the lung and bronchus, bladder, and non-Hodgkin's lymphoma, but lower rates for prostate cancer.
- The mortality rate for cancer of the lung and bronchus was the highest of all major cancer sites for non-White males, and for both White males and females.

**Figure 11. Percentage of Cancer Deaths by Sex, Race, and Site, Florida, 2000**





**Table 11.**  
**Number of Deaths and Age-Adjusted Mortality Rates (1) by Sex and Race, Florida, 2000**

Number of Deaths	All Cancers			Lung & Bronchus		Prostate	Breast	Colorectal	Bladder	Head & Neck			
<b>Florida (2)</b>	<b>38,191</b>	<b>11,530</b>	<b>2,214</b>	<b>2,608</b>	<b>3,825</b>	<b>966</b>	<b>981</b>	<b>1,555</b>	<b>525</b>	<b>305</b>			
Female	17,632	4,796		2,608	1,849	292	267	690	176	305			
Male	20,556	6,733	2,214		1,975	674	714	865	349				
Non-White	3,660	824	346	345	366	57	114	114		83			
White	34,459	10,690	1,866	2,261	3,451	906	867	1,438	525	222			
Non-White Female	1,705	249		345	189	27	28	61		83			
White Female	15,893	4,538		2,261	1,657	263	239	626	176	222			
Non-White Male	1,954	574	346		177	30	86	53					
White Male	18,565	6,152	1,866		1,794	643	628	812	349				
<b>Mortality Rates</b>													
<b>Florida (1)</b>	<b>185.6</b>	<b>55.6</b>	<b>25.1</b>	<b>24.1</b>	<b>18.4</b>	<b>4.5</b>	<b>4.9</b>	<b>7.5</b>	<b>3.1</b>	<b>3.3</b>			
Female	153.5	41.4		24.1	15.4	2.3	2.4	5.8	2.0	3.3			
Male	229.1	73.7	25.1		22.1	7.6	8.0	9.7	4.5				
Non-White	173.3	38.6	52.2	25.9	18.0	3.0	4.9	4.9		5.9			
White	186.5	57.4	22.9	23.5	18.3	4.7	4.9	7.7	3.1	2.9			
Non-White Female	136.5	20.2		25.9	15.6	2.3	2.2	4.7		5.9			
White Female	154.7	43.9		23.5	15.2	2.3	2.4	5.9	2.0	2.9			
Non-White Male	231.9	65.3	52.2		22.1	4.3	8.4	4.9					
White Male	229.0	74.6	22.9		22.2	7.9	8.0	10.1	4.5				

(1) Rates are expressed as number of cases per 100,000 population per year, age-adjusted to the 2000 U.S. standard population.

(2) Florida total counts and rates include 72 deaths with unknown race and three deaths with unknown sex.

## Age Group

- In general, deaths from cancer occur primarily among older people. In 2000, there were 28,278 deaths, or 74 percent of the total cancer deaths, among persons age 65 and older. However, there were several exceptions.
- For head and neck and cervical cancer, the largest numbers of deaths occurred in the 45 to 64 age group.
- Among non-Whites, the greatest number of deaths occurred in the 45 to 64 age group for all cancers combined, cancers of the lung and bronchus, breast, head and neck, cervix, and non-Hodgkin's lymphoma. In Whites, the most deaths from cervical cancer were among females between the ages of 45 and 64.
- Age-specific mortality rates increased considerably with age and were the highest in the 75 and older group for all cancers combined and for all major sites for all sex-race groups. The only exception was head and neck cancer in non-Whites, which had the highest rates in the 65 to 74 age group.
- Mortality rates for males and females in the groups below age 45 were similar, except for cancer of the lung and bronchus in the 20 to 44 age group, where males had a 30 percent higher rate (4.2 per 100,000) than females (2.9 per 100,000).
- In the 45 to 64 age group, males began to have higher age-specific mortality rates than females: 30 percent higher for all cancers combined, 200 percent higher for bladder cancer, 320 percent higher for head and neck cancer, 80 percent higher for non-Hodgkin's lymphoma, and 129 percent higher for melanoma. After age 65, mortality rates among males were much higher than among females.
- Age-specific mortality rates for prostate cancer for non-White males were higher than rates among White males for all age groups. In the 75 and older age group, the rate for non-Whites was more than double the rate for White males in the same age group.
- White females had higher age-specific mortality rates than non-White females for most cancers in all age groups. The age-specific mortality rate for cancer of the lung cancer among White females was more than double that of non-White females. On the other hand, age-specific mortality rates for cervical cancer were higher among non-White females than White females.

**Table 12.1 Number of Deaths by Sex, Race, and Age Group, Florida, 2000**

	All Cancers	Lung & Bronchus	Prostate	Breast	Colorectal	Bladder	Head & Neck	Non-Hodgkins	Melanoma	Cervix
<b>Florida (1)</b>	<b>38,191</b>	<b>11,530</b>	<b>2,214</b>	<b>2,608</b>	<b>3,825</b>	<b>966</b>	<b>981</b>	<b>1,555</b>	<b>525</b>	<b>305</b>
0-19	126	^	^	^	^	^	^	^	^	^
20-44	1,225	196	^	177	96	^	29	84	56	78
45-64	8,562	2,786	162	803	730	122	353	284	139	126
65-74	10,409	3,822	475	575	921	219	279	368	124	47
75+	17,869	4,725	1,576	1,053	2,076	620	320	813	205	54
<b>Female</b>										
0-19	54	^	^	^	^	^	^	^	^	^
20-44	654	80	^	177	43	^	^	32	28	78
45-64	3,863	1,065	^	803	313	33	72	107	45	126
65-74	4,496	1,542	^	575	388	46	81	156	39	47
75+	8,565	2,109	^	1,053	1,105	211	110	393	64	54
<b>Male</b>										
0-19	72	^	^	^	^	^	^	^	^	^
20-44	570	116	^	^	53	^	25	52	28	^
45-64	4,698	1,721	162	^	416	89	281	177	94	^
65-74	5,913	2,280	475	^	533	173	198	212	85	^
75+	9,303	2,615	1,576	^	971	409	210	420	141	^
<b>Non-White</b>										
0-19	41	^	^	^	^	^	^	^	^	^
20-44	293	46	^	56	23	^	^	25	^	21
45-64	1,262	297	48	158	120	16	62	35	^	38
65-74	929	272	101	59	83	13	31	25	^	13
75+	1,135	208	197	72	140	27	15	27	^	11
<b>White</b>										
0-19	84	^	^	^	^	^	^	^	^	^
20-44	921	149	^	120	72	^	23	59	56	57
45-64	7,279	2,482	114	645	609	105	291	248	139	88
65-74	9,464	3,547	373	515	837	206	248	342	124	34
75+	16,711	4,512	1,378	981	1,931	591	305	785	205	43
<b>NW Female</b>										
0-19	22	^	^	^	^	^	^	^	^	^
20-44	170	19	^	56	14	^	^	12	^	21
45-64	580	83	^	158	60	^	12	15	^	38
65-74	403	80	^	59	42	^	^	14	^	13
75+	530	67	^	72	73	13	^	19	^	11
<b>W Female</b>										
0-19	32	^	^	^	^	^	^	^	^	^
20-44	479	61	^	120	28	^	^	20	28	57
45-64	3,276	979	^	645	253	24	60	91	45	88
65-74	4,085	1,460	^	515	346	42	72	141	39	34
75+	8,021	2,038	^	981	1,030	196	104	373	64	43
<b>NW Male</b>										
0-19	19	^	^	^	^	^	^	^	^	^
20-44	123	27	^	^	^	^	^	13	^	^
45-64	682	214	48	^	60	^	50	20	^	^
65-74	526	192	101	^	41	^	22	11	^	^
75+	604	140	197	^	67	14	^	^	^	^
<b>W Male</b>										
0-19	52	^	^	^	^	^	^	^	^	^
20-44	441	88	^	^	44	^	20	39	28	^
45-64	4,003	1,503	114	^	356	81	231	157	94	^
65-74	5,379	2,087	373	^	491	164	176	201	85	^
75+	8,690	2,474	1,378	^	901	395	201	412	141	^

(1) Florida total includes 72 deaths with unknown race and three deaths with unknown sex.

^ Statistics are not displayed for fewer than 10 cases.

NW = Non-White / W = White

**Table 12.2 Age-Specific Mortality Rates (1) by Sex, Race, and Age Group, Florida, 2000**

	All Cancers	Lung & Bronchus	Prostate	Breast	Colorectal	Bladder	Head & Neck	Non- Hodgkins	Melanoma	Cervix
<b>Florida (1)</b>										
0-19	3.1	^	^	^	^	^	^	^	^	^
20-44	22.2	3.6	^	6.5	1.7	^	0.5	1.5	1.4	2.8
45-64	233.6	76.0	9.2	42.1	19.9	3.3	9.6	7.8	4.6	6.6
65-74	716.4	263.1	70.9	73.4	63.4	15.1	19.2	25.3	9.5	6.0
75+	1,316.8	348.2	286.8	130.4	153.0	45.7	23.6	59.9	16.2	6.7
<b>Female</b>										
0-19	2.7	^	^	^	^	^	^	^	^	^
20-44	23.9	2.9	^	6.5	1.6	^	^	1.2	1.0	2.8
45-64	202.3	55.8	^	42.1	16.4	1.7	3.8	5.6	2.4	6.6
65-74	574.0	196.8	^	73.4	49.5	5.9	10.3	19.9	5.0	6.0
75+	1,060.9	261.2	^	130.4	136.9	26.1	13.6	48.7	8.1	6.7
<b>Male</b>										
0-19	3.4	^	^	^	^	^	^	^	^	^
20-44	20.5	4.2	^	7.8	1.6	^	0.9	1.9	1.2	2.9
45-64	267.7	98.1	9.2	47.9	19.4	5.1	16.0	10.1	5.5	11.5
65-74	883.1	340.5	70.9	72.4	57.8	25.8	29.6	31.7	12.7	16.0
75+	1,692.7	475.8	286.8	120.7	150.2	74.4	38.2	76.4	25.8	18.4
<b>Non-White</b>										
0-19	3.2	^	^	^	^	^	^	^	^	^
20-44	20.7	3.3	^	7.8	1.6	^	^	1.8	^	2.9
45-64	203.7	47.9	16.6	47.9	19.4	2.6	10.0	5.7	^	11.5
65-74	647.3	189.5	162.8	72.4	57.8	9.1	21.6	17.4	^	16.0
75+	1,217.8	223.2	587.2	120.7	150.2	29.0	16.1	29.0	^	18.4
<b>White</b>										
0-19	3.0	^	^	^	^	^	^	^	^	^
20-44	22.5	3.6	^	5.9	1.8	^	0.6	1.4	1.4	2.8
45-64	239.0	81.5	7.8	40.8	20.0	3.4	9.6	8.1	4.6	5.6
65-74	722.8	270.9	61.4	73.4	63.9	15.7	18.9	26.1	9.5	4.8
75+	^	^	^	131.2	^	^	^	^	^	^
<b>NW Female</b>										
0-19	3.5	^	^	^	^	^	^	^	^	^
20-44	23.6	2.6	^	7.8	1.9	^	^	1.7	^	2.9
45-64	175.7	25.1	^	47.9	18.2	^	3.6	4.5	^	11.5
65-74	494.7	98.2	^	72.4	51.6	^	^	17.2	^	16.0
75+	888.5	112.3	^	120.7	122.4	21.8	^	31.9	^	18.4
<b>W Female</b>										
0-19	2.3	^	^	^	^	^	^	^	^	^
20-44	23.7	3.0	^	5.9	1.4	^	^	1.0	1.4	2.8
45-64	207.4	62.0	^	40.8	16.0	1.5	3.8	5.8	2.8	5.6
65-74	582.0	208.0	^	73.4	49.3	6.0	10.3	20.1	5.6	4.8
75+	1,072.7	272.6	^	131.2	137.8	26.2	13.9	49.9	8.6	5.8
<b>NW Male</b>										
0-19	2.9	^	^	^	^	^	^	^	^	^
20-44	17.7	3.9	^	7.8	1.9	^	^	1.9	^	2.9
45-64	235.8	74.0	16.6	47.9	20.7	^	17.3	6.9	^	11.5
65-74	847.7	309.4	162.8	72.4	66.1	^	35.5	17.7	^	16.0
75+	1,800.2	417.3	587.2	120.7	199.7	41.7	^	^	^	18.4
<b>W Male</b>										
0-19	3.6	^	^	^	^	^	^	^	^	^
20-44	21.2	4.2	^	5.9	2.1	^	1.0	1.9	1.3	2.8
45-64	273.1	102.5	7.8	40.8	24.3	5.5	15.8	10.7	6.4	5.6
65-74	885.4	343.5	61.4	73.4	80.8	27.0	29.0	33.1	14.0	4.8
75+	1,683.9	479.4	267.0	131.2	174.6	76.5	38.9	79.8	27.3	5.8

(1) Age-specific mortality rates are expressed as number of deaths per 100,000 population.

^ Statistics are not displayed for fewer than 10 cases.

NW = Non-White / W = White

## County

- Florida's six most populous counties, Miami-Dade, Broward, Palm Beach, Pinellas, Hillsborough, and Duval, recorded 16,742 cancer deaths in 2000, accounting for 44 percent of the total 38,191 cancer deaths in Florida.
- Twenty-three counties had fewer than 100 cancer deaths. Of those, Lafayette and Liberty counties had fewer than 20 cancer deaths.
- Age-adjusted mortality rates for Florida counties varied from 329 per 100,000 in Union County to 136 per 100,000 in Hardee County. Forty-seven counties had mortality rates greater than the age-adjusted rate for Florida of 187 per 100,000.
- Among the six counties with the highest number of deaths, four had mortality rates less than the age-adjusted rate for Florida: Pinellas, Broward, Palm Beach, and Miami-Dade.

**Table 13.1 Number of Deaths by County, Florida, 2000**

	All Cancers	Lung & Bronchus	Prostate	Breast	Colorectal	Bladder	Head & Neck	Non- Hodgkins	Melanoma	Cervix
Florida (1)	38,191	11,530	2,214	2,608	3,825	966	981	1,555	525	305
Alachua	349	100	24	31	33	12	^	23	^	^
Baker	41	^	^	^	^	^	^	^	^	^
Bay	351	130	21	33	32	^	^	10	^	^
Bradford	58	20	^	^	^	^	^	^	^	^
Brevard	1,369	421	73	89	127	32	41	67	15	^
Broward	3,581	968	182	277	385	107	84	161	48	33
Calhoun	24	^	^	^	^	^	^	^	^	^
Charlotte	538	168	33	32	49	19	^	26	^	^
Citrus	500	183	39	28	32	12	^	21	^	^
Clay	263	88	16	23	25	^	^	15	^	^
Collier	580	183	36	36	57	12	13	12	^	^
Columbia	160	55	^	10	10	^	^	^	^	^
Miami-Dade	3,840	891	269	298	407	119	91	156	38	42
DeSoto	75	23	^	^	^	^	^	^	^	^
Dixie	39	11	^	^	^	^	^	^	^	^
Duval	1,511	448	82	114	157	33	51	44	24	20
Escambia	632	210	33	37	47	14	18	20	^	^
Flagler	167	43	14	15	23	^	^	13	^	^
Franklin	26	^	^	^	^	^	^	^	^	^
Gadsden	106	30	^	^	^	^	^	^	^	^
Gilchrist	31	10	^	^	^	^	^	^	^	^
Glades	33	12	^	^	^	^	^	^	^	^
Gulf	38	22	^	^	^	^	^	^	^	^
Hamilton	31	15	^	^	^	^	^	^	^	^
Hardee	36	12	^	^	^	^	^	^	^	^
Hendry	61	22	^	^	^	^	^	^	^	^
Hernando	546	187	31	31	42	14	^	28	^	^
Highlands	285	88	19	16	27	^	^	12	^	^
Hillsborough	1,984	646	104	144	197	46	66	64	28	19
Holmes	41	10	^	^	^	^	^	^	^	^
Indian River	392	146	21	25	37	^	^	14	^	^
Jackson	108	32	12	^	11	^	^	^	^	^
Jefferson	33	13	^	^	^	^	^	^	^	^
Lafayette	14	^	^	^	^	^	^	^	^	^
Lake	695	225	28	47	80	16	14	32	^	^
Lee	1,258	428	72	68	135	28	39	51	13	^
Leon	375	88	29	45	40	^	12	10	^	^
Levy	100	30	^	^	14	^	^	^	^	^
Liberty	16	^	^	^	^	^	^	^	^	^
Madison	40	^	^	^	^	^	^	^	^	^
Manatee	813	278	54	56	82	11	19	24	11	^
Marion	827	285	52	38	99	14	21	41	^	11
Martin	397	113	22	26	33	13	11	11	^	^
Monroe	175	56	^	^	17	^	^	12	^	^
Nassau	116	37	^	^	11	^	^	^	^	^
Okaloosa	362	132	17	23	34	11	13	^	^	^
Okeechobee	92	39	^	^	^	^	^	^	^	^
Orange	1,429	413	81	101	168	32	36	57	18	^
Osceola	276	83	15	21	27	^	11	12	^	^
Palm Beach	3,085	876	195	209	293	73	69	139	43	20
Pasco	1,209	397	55	93	122	27	30	59	17	^
Pinellas	2,741	852	145	185	285	83	66	99	50	13
Polk	1,273	394	90	74	142	25	28	43	24	12
Putnam	233	79	^	15	14	^	12	^	^	^
Saint Johns	286	95	10	12	29	^	^	13	^	^
Saint Lucie	590	179	32	32	61	16	17	28	12	11
Santa Rosa	202	60	^	22	16	^	10	10	^	^
Sarasota	1,208	358	82	78	113	33	27	63	18	^
Seminole	634	176	36	59	58	16	19	28	^	^
Sumter	162	48	^	^	19	^	^	12	^	^
Suwannee	82	30	^	^	12	^	^	^	^	^
Taylor	62	20	^	^	^	^	^	^	^	^
Union	34	20	^	^	^	^	^	^	^	^
Volusia	1,376	440	95	93	132	40	28	50	25	11
Wakulla	37	12	^	^	^	^	^	^	^	^
Walton	106	40	^	^	^	^	^	^	^	^
Washington	57	16	^	^	^	^	^	^	^	^

(1) Florida total includes 72 deaths with unknown race and 3 deaths with unknown sex.

^ Statistics are not displayed for fewer than 10 cases.

**Table 13.2 Age-Adjusted Mortality Rates by County, Florida, 2000**

	All Cancers	Lung & Bronchus	Prostate	Breast	Colorectal	Bladder	Head & Neck	Non- Hodgkins	Melanoma	Cervix
Florida	185.6	55.6	25.1	24.1	18.4	4.5	4.9	7.5	3.1	3.3
Alachua	202.5	58.8	41.8	30.7	19.3	7.2	^	13.2	^	^
Baker	235.3	^	^	^	^	^	^	^	^	^
Bay	226.5	80.0	39.6	39.2	20.4	^	^	6.7	^	^
Bradford	217.3	75.1	^	^	^	^	^	^	^	^
Brevard	204.1	60.9	26.6	26.0	19.0	5.0	6.1	9.9	2.5	^
Broward	179.0	49.6	20.9	25.1	18.8	4.8	4.6	7.9	2.8	3.5
Calhoun	164.8	^	^	^	^	^	^	^	^	^
Charlotte	172.5	51.8	22.1	19.3	15.3	5.0	^	7.3	^	^
Citrus	198.2	73.4	31.0	21.3	12.6	4.3	^	9.2	^	^
Clay	218.5	71.2	38.6	31.9	20.0	^	^	13.3	^	^
Collier	143.4	42.5	19.7	20.2	14.5	2.5	3.1	3.0	^	^
Columbia	262.5	86.3	^	^	17.6	^	^	^	^	^
Miami-Dade	164.2	38.1	30.6	22.4	17.4	5.1	3.9	6.6	2.0	3.5
DeSoto	196.8	59.6	^	^	^	^	^	^	^	^
Dixie	235.2	55.9	^	^	^	^	^	^	^	^
Duval	225.0	66.7	36.2	28.8	23.8	5.1	7.4	6.6	4.7	5.1
Escambia	208.9	68.3	30.3	21.4	15.8	4.7	6.0	6.6	^	^
Flagler	175.0	41.7	32.0	27.5	26.0	^	^	16.4	^	^
Franklin	187.0	^	^	^	^	^	^	^	^	^
Gadsden	239.2	68.3	^	^	^	^	^	^	^	^
Gilchrist	212.4	66.5	^	^	^	^	^	^	^	^
Glades	235.1	88.5	^	^	^	^	^	^	^	^
Gulf	228.2	127.9	^	^	^	^	^	^	^	^
Hamilton	250.7	118.9	^	^	^	^	^	^	^	^
Hardee	136.3	45.0	^	^	^	^	^	^	^	^
Hendry	213.8	74.6	^	^	^	^	^	^	^	^
Hernando	210.2	67.0	26.8	27.9	17.0	4.7	^	10.5	^	^
Highlands	159.7	46.2	19.3	26.0	12.5	^	^	7.8	^	^
Hillsborough	207.7	67.3	29.6	26.4	20.9	4.8	6.8	6.8	3.4	3.6
Holmes	189.2	48.5	^	^	^	^	^	^	^	^
Indian River	178.4	66.1	18.3	27.7	18.0	^	^	5.9	^	^
Jackson	205.1	60.8	60.5	^	21.1	^	^	^	^	^
Jefferson	221.7	87.8	^	^	^	^	^	^	^	^
Lafayette	202.3	^	^	^	^	^	^	^	^	^
Lake	184.8	58.1	14.9	24.6	21.1	3.9	4.2	8.3	^	^
Lee	164.4	54.3	20.4	17.8	17.4	3.8	5.5	6.2	1.9	^
Leon	220.5	52.6	52.0	42.2	23.6	^	6.7	6.1	^	^
Levy	216.5	63.5	^	^	29.1	^	^	^	^	^
Liberty	266.4	^	^	^	^	^	^	^	^	^
Madison	189.7	^	^	^	^	^	^	^	^	^
Manatee	184.0	62.2	26.3	25.4	17.3	2.5	4.9	5.5	4.2	^
Marion	199.1	64.9	26.8	18.8	24.3	3.3	5.1	9.4	^	6.9
Martin	161.7	45.3	18.2	22.1	13.7	4.6	4.1	4.1	^	^
Monroe	189.6	59.2	^	^	20.5	^	^	12.3	^	^
Nassau	195.9	60.7	^	^	16.0	^	^	^	^	^
Okaloosa	226.9	78.8	38.5	26.7	22.1	6.9	7.3	^	^	^
Okeechobee	215.1	86.4	^	^	^	^	^	^	^	^
Orange	194.1	56.0	29.8	23.1	23.3	4.5	4.7	7.8	3.0	^
Osceola	174.2	51.6	24.4	23.5	17.4	^	6.9	7.3	^	^
Palm Beach	166.6	47.3	21.5	22.2	15.1	3.4	4.1	7.5	3.0	2.7
Pasco	196.7	65.0	18.6	31.1	18.4	3.9	5.4	9.4	3.7	^
Pinellas	183.8	58.0	22.0	23.2	18.0	5.0	5.0	6.5	3.8	2.3
Polk	201.3	62.0	33.7	22.1	22.1	3.8	4.8	6.7	4.6	4.5
Putnam	255.0	81.6	^	29.9	14.7	^	13.2	^	^	^
Saint Johns	189.7	61.7	14.7	13.9	19.5	^	^	9.0	^	^
Saint Lucie	199.6	58.9	22.7	21.1	20.3	5.5	5.7	9.2	5.2	8.5
Santa Rosa	196.6	56.2	^	35.7	17.7	^	9.5	8.8	^	^
Sarasota	176.6	49.5	23.9	21.4	17.0	4.2	4.2	9.0	3.4	^
Seminole	196.8	54.0	33.0	30.8	18.6	5.1	5.5	8.8	^	^
Sumter	174.4	47.2	^	^	20.1	^	^	12.7	^	^
Suwannee	184.5	66.9	^	^	25.5	^	^	^	^	^
Taylor	295.3	95.7	^	^	^	^	^	^	^	^
Union	329.9	199.0	^	^	^	^	^	^	^	^
Volusia	200.6	63.9	31.0	27.4	18.5	5.6	4.6	7.7	4.7	4.0
Wakulla	179.4	56.8	^	^	^	^	^	^	^	^
Walton	214.6	75.2	^	^	^	^	^	^	^	^
Washington	221.0	62.6	^	^	^	^	^	^	^	^

^ Statistics are not displayed for fewer than 10 cases.

## Children

Cancer deaths for children were combined for the five-year period, 1996 to 2000. A single age-specific mortality rate was calculated to summarize childhood cancer during those years. Note that this rate is expressed as cases per million population at risk for the five-year period because of the relatively small number of cancer deaths in children compared to Floridians of all ages.

- Between 1996 and 2000, there were 361 cancer deaths in Florida for children age 14 and younger, an average of 72 each year for all cancers combined.
- Cancer of the brain and nervous system was the leading cause of death from cancer among children in Florida over the 5-year period, responsible for 121 deaths, or 34 percent of all childhood cancer deaths. The deaths-to-cases ratio for brain and nervous system cancer is 0.23, one of the highest among children.
- Leukemia was the most commonly diagnosed cancer and the second leading cause of cancer deaths among children. There were 107 deaths from leukemia in children between 1996 and 2000, accounting for 30 percent of all childhood cancer deaths. The deaths-to-cases ratio for childhood leukemia was 0.16 for the most recent five-year period, indicating that the prognosis for leukemia in children is relatively good.
- Endocrine cancer, including thyroid cancer, accounted for 10 percent of childhood deaths, and has the second highest deaths-to-cases ratio, 0.31.

**Table 14. Number of Deaths and Age-Specific Mortality Rates for Children Age 0-14, Florida, 1996 - 2000**

Site	Number	Percent	Rate (per million)
All Cancers	361	--	24.5
Leukemia	107	29.6	7.3
Acute Lymphocytic	51	14.1	3.5
Other Leukemia	56	15.5	3.8
Brain & Nervous	121	33.5	8.2
Lymphoma	15	4.2	1.0
Non-Hodgkins	12	3.3	0.8
Hodgkins	3	0.8	0.2
Kidney	12	3.3	0.8
Soft Tissue	11	3.0	0.7
Bones and Joints	24	6.6	1.6
Endocrine	39	10.8	2.6
Eye	2	0.6	0.1
All Other	30	8.3	2.0



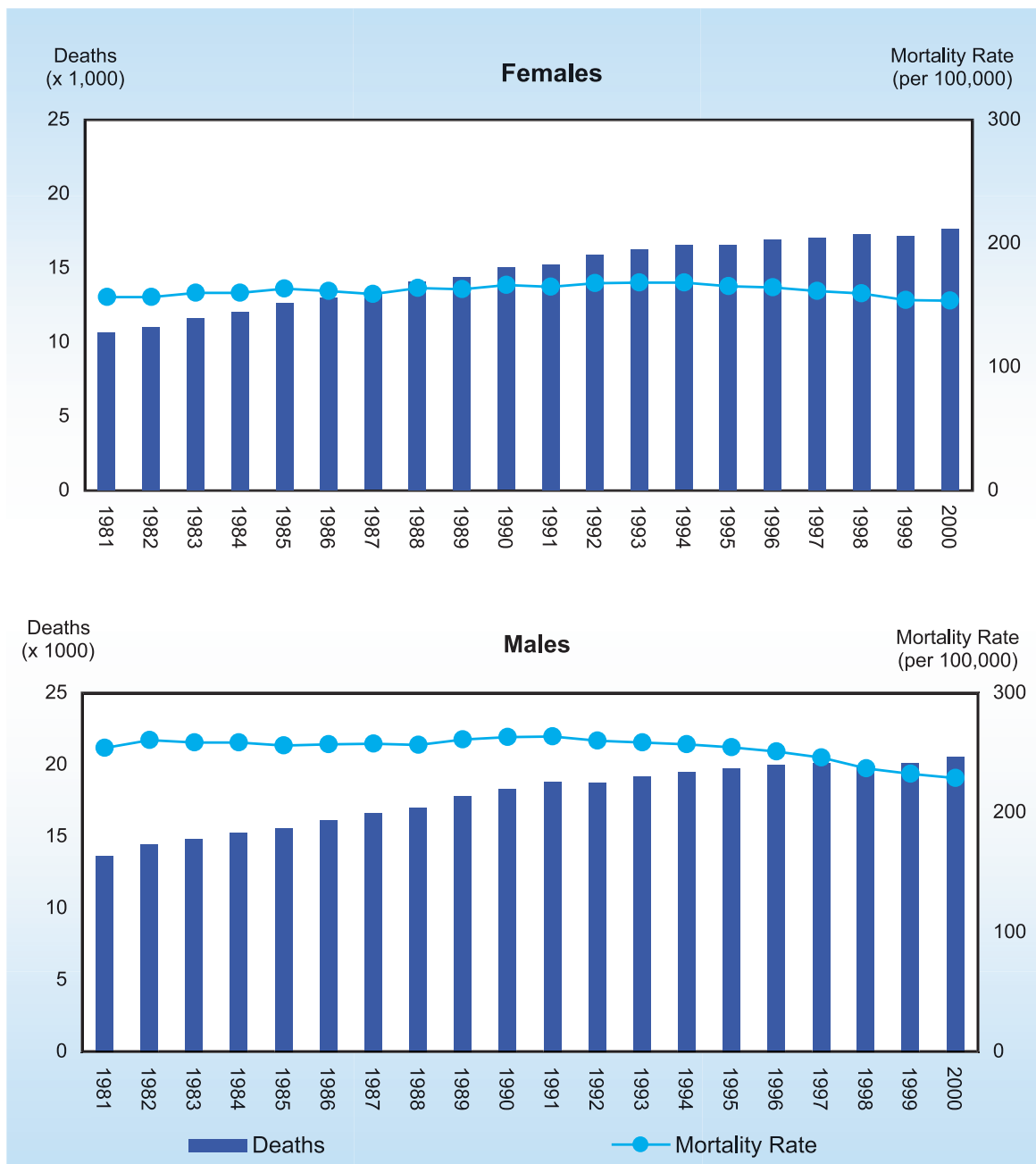
### TIME TRENDS FOR DEATHS AND MORTALITY RATES

- Over the 20-year period since 1981, the number of cancer deaths per year increased 57 percent, from 24,298 to 38,188.

### Sex

- Age-adjusted mortality rates in females for all cancers combined remained stable around 162 deaths per 100,000, while mortality rates in males decreased by 10 percent from 254 per 100,000 to 229 per 100,000 during the 20-year period from 1981 to 2000.

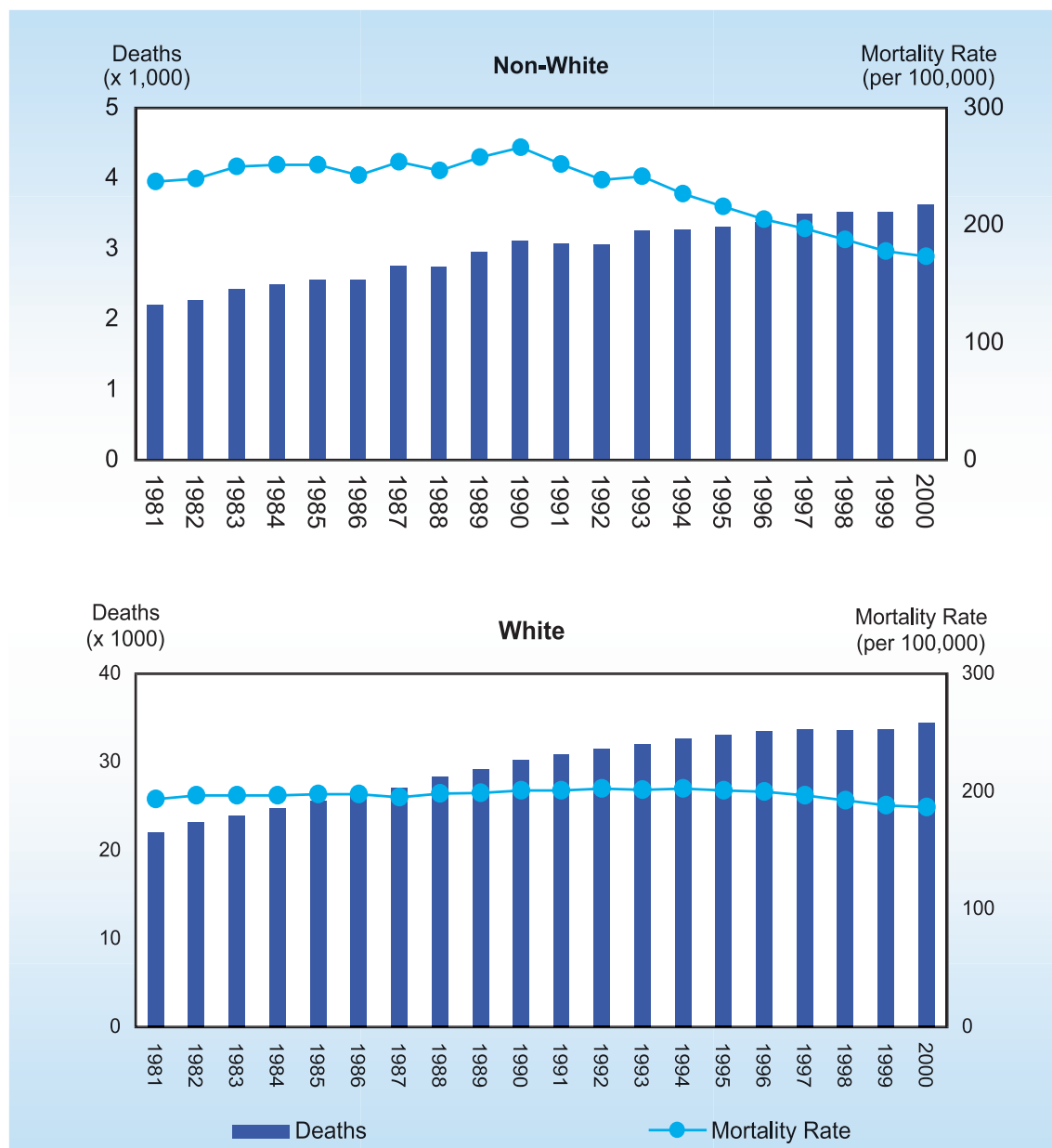
**Figure 12.1 Deaths and Age-Adjusted Mortality Rates for All Cancers by Sex, Florida, 1981-2000**



## Race

- The number of cancer deaths increased by 64 percent for non-Whites and 56 percent for Whites from 1981 to 2000.
- The age-adjusted mortality rate for all cancers combined remained essentially unchanged in Whites over the 20-year period, while decreasing consistently for non-Whites since 1990.
- In 1990, the mortality rate among non-Whites was 33 percent higher than among Whites. In 2000, the mortality rate for non-Whites was 7 percent less than the rate for Whites, due to an average decrease in the non-White mortality rate of 4.5 percent per year. This compared to an average decrease in the mortality rate for Whites of 0.7 percent per year.

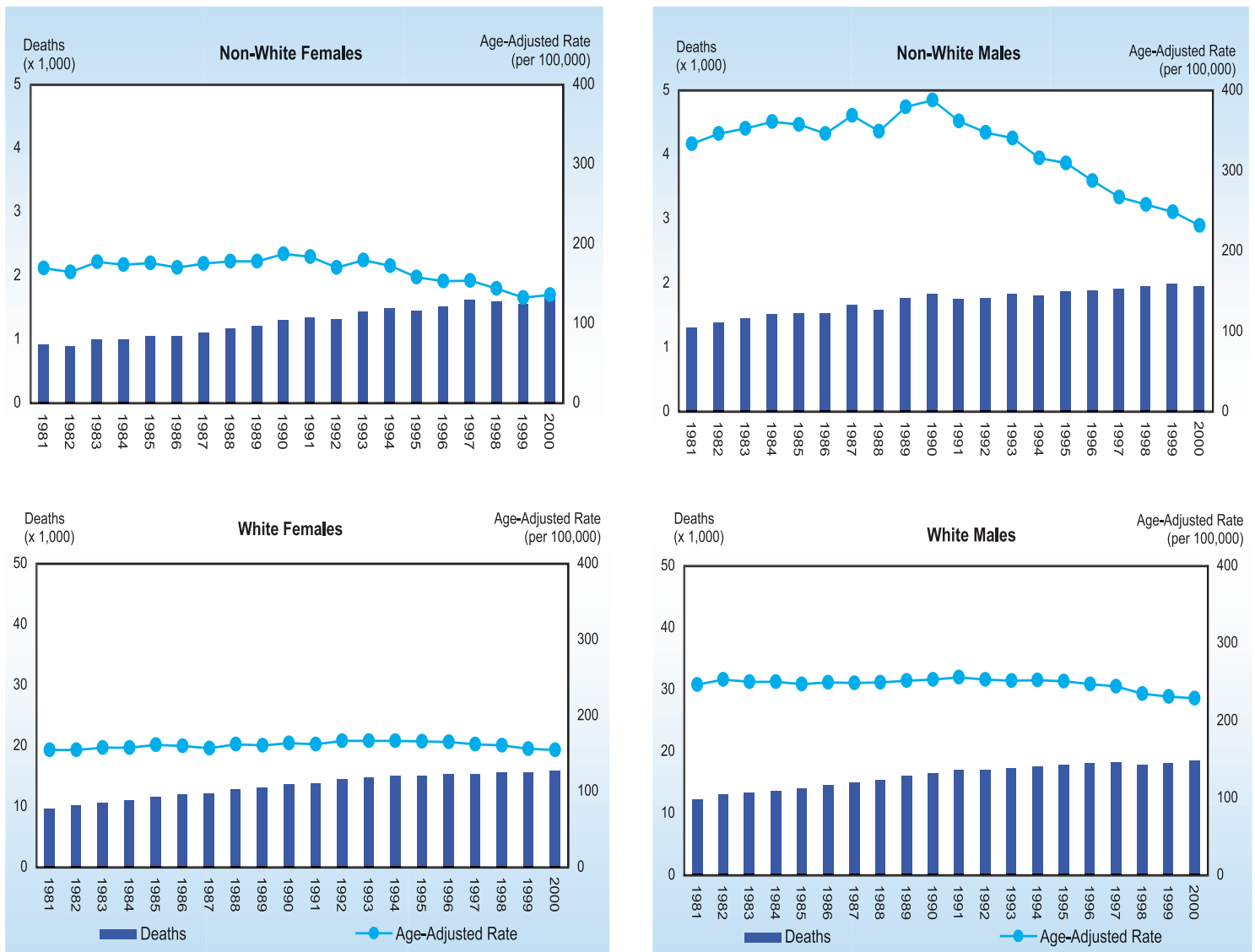
**Figure 12.2 Deaths and Age-Adjusted Mortality Rates for All Cancers by Race, Florida, 1981-2000**



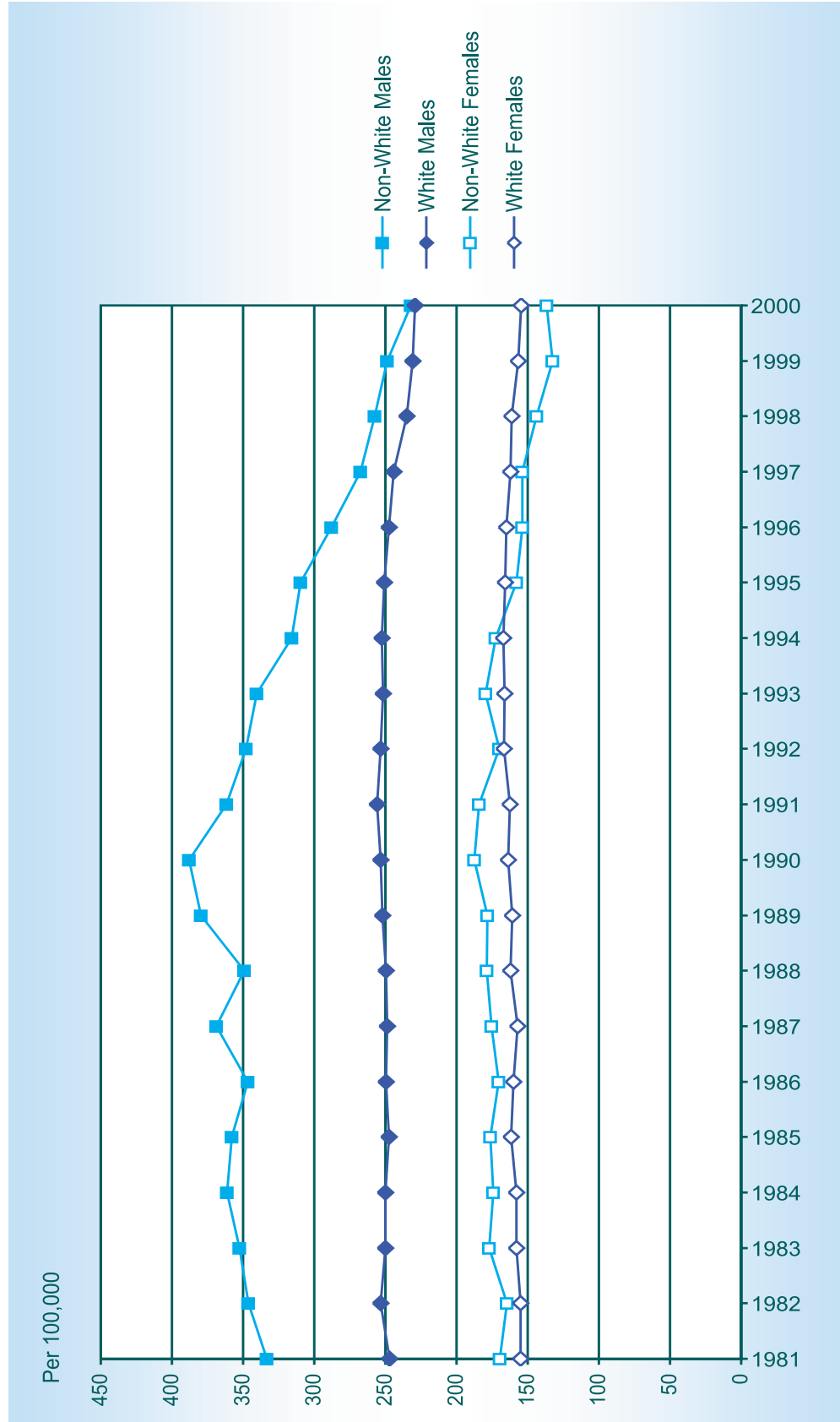
## Sex and Race

- Since 1981, age-adjusted cancer mortality rates for non-Whites decreased significantly, by 30 percent among males and 20 percent among females. Most of this rate decline occurred in the 1990s.
- The mortality rate for all cancers combined in White females was almost unchanged since 1981, and declined 7 percent among White males between 1981 and 2000.

**Figure 13. Deaths and Age-Adjusted Mortality Rates for All Cancers by Sex and Race, Florida, 1981-2000**



**Figure 14. Age-Adjusted Mortality Rates for All Cancers by Sex and Race, Florida, 1981-2000**



## Cancer Sites

### Females

- The mortality rate for cancer of the lung and bronchus decreased 3 percent in non-White females over the 20-year period, while increasing significantly by 58 percent among White females, from 27.7 per 100,000 to 43.9 per 100,000 in 2000.
- Mortality rates for breast cancer declined steadily in both non-White and White females. Compared to rates in 1981, the breast cancer mortality rate decreased 13 percent for non-Whites and 18 percent for Whites.
- Mortality rates for bladder cancer decreased by 12 percent in non-Whites and 30 percent in White females during the 20-year period.
- Mortality rates for non-Hodgkin's lymphoma rose for both non-White and White females, 16 percent and 81 percent, respectively, a five times greater increase for Whites than for non-Whites.
- Mortality rates for colorectal and head and neck cancers declined in both non-White and White females over the past two decades.

### Males

- Mortality rates for cancer of the lung and bronchus dropped in males during the 20-year period, suggesting a decrease in tobacco use. The decline is more pronounced among non-White males (36 percent) than among White males (10 percent).
- Beginning in 1990, mortality rates declined steadily in males for all cancers combined, cancer of the lung and bronchus, and colorectal cancer. Mortality rates from head and neck cancer in non-White males decreased by 62 percent over the same time. There were also slight decreases in mortality rates from bladder and oral cancers in males through 2000.
- The declines in lung, bladder, and head and neck cancer mortality rates were likely attributable to declining rates of cigarette smoking over the past three decades (Schottenfeld and Fraumeni, 1996, page 642). In Florida, the prevalence of cigarette smoking among males declined by about 3 percent during the 1990s (Florida BRFSS, <http://apps.nccd.cdc.gov/brfss/Trends/TrendData.asp>).
- Colorectal cancer mortality rates declined by 27 percent in White males over the past 20 years. For non-White males, rates decreased 9 percent in the same period.
- Bladder cancer mortality rates decreased by 33 percent for non-White males and 17 percent for White males.
- Rates of prostate cancer mortality exhibited downward trends in both races, since 1993 for non-Whites, and since 1990 for Whites. Over the past 20 years, the mortality rate decreased by 25 percent for non-Whites and 17 percent for Whites. The racial disparity in prostate mortality decreased. Whereas non-White rates were 151 percent higher than White rates in 1981, they are only 128 percent higher in 2000.
- Mortality rates for non-Hodgkin's lymphoma decreased among non-Whites, but increased in Whites over the past two decades.

### ***Lung and Bronchus***

- The age-adjusted mortality rate for lung cancer is almost unchanged for non-White females, but increased about 10 per 100,000 in White females.
- Mortality rates for White males declined by about 8 per 100,000 since 1981, while the rate for non-White males peaked in 1989 at about 25 per 100,000 above the 1981 level. Since 1989, the mortality rate for non-White males has declined by almost half, about 60 cases per 100,000, so that it is now lower than the age-adjusted mortality rate for White males.

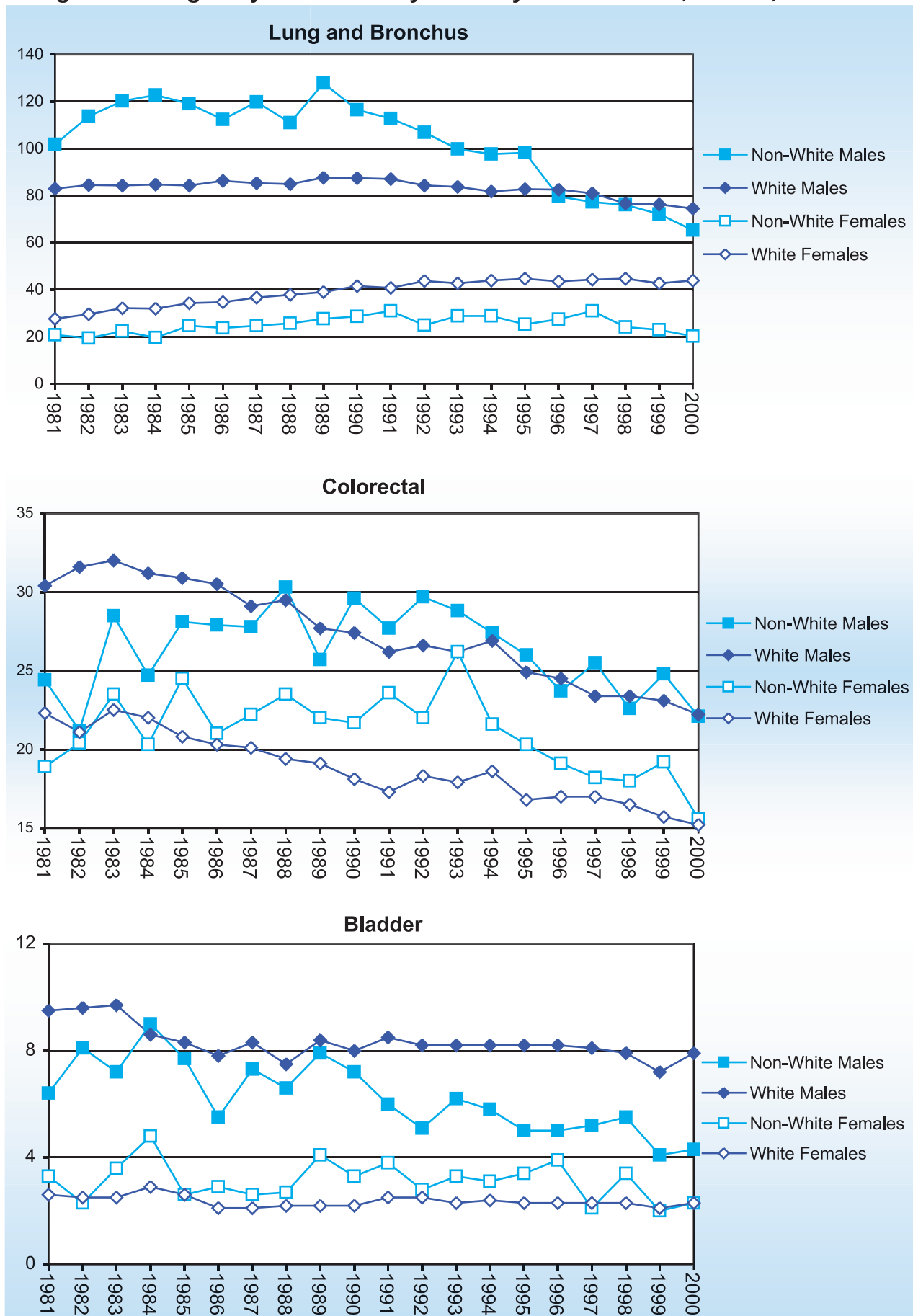
### ***Colorectal***

- Mortality rates from colorectal cancer were very slightly lower for non-Whites for the 20-year period, down 3 percent for females and 2 percent for males. Despite the large fluctuations in non-White colorectal mortality rates, there was a definite downward trend since peaks in the early 1990s. Female rates have declined 40 percent since 1993, while the rate for males has decreased by 23 percent since 1992.
- The downward trend in colorectal mortality rates was more consistent in Whites. Rates declined by 7 deaths per 100,000 in females, and 8 deaths per 10,000 in males since 1981.

### ***Bladder***

- Mortality rates for bladder cancer declined for all sex-race groups with a more pronounced decline among non-Whites over the 20-year period.

**Figure 15.1 Age-Adjusted Mortality Rates by Sex and Race, Florida, 1981-2000**



### ***Prostate***

- The age-adjusted mortality rate from prostate cancer for non-White males was more than twice the rate for White males in all years since 1981. The racial disparity was reduced over the 20-year period due to a greater decrease in mortality in non-White males than in Whites males.

### ***Breast***

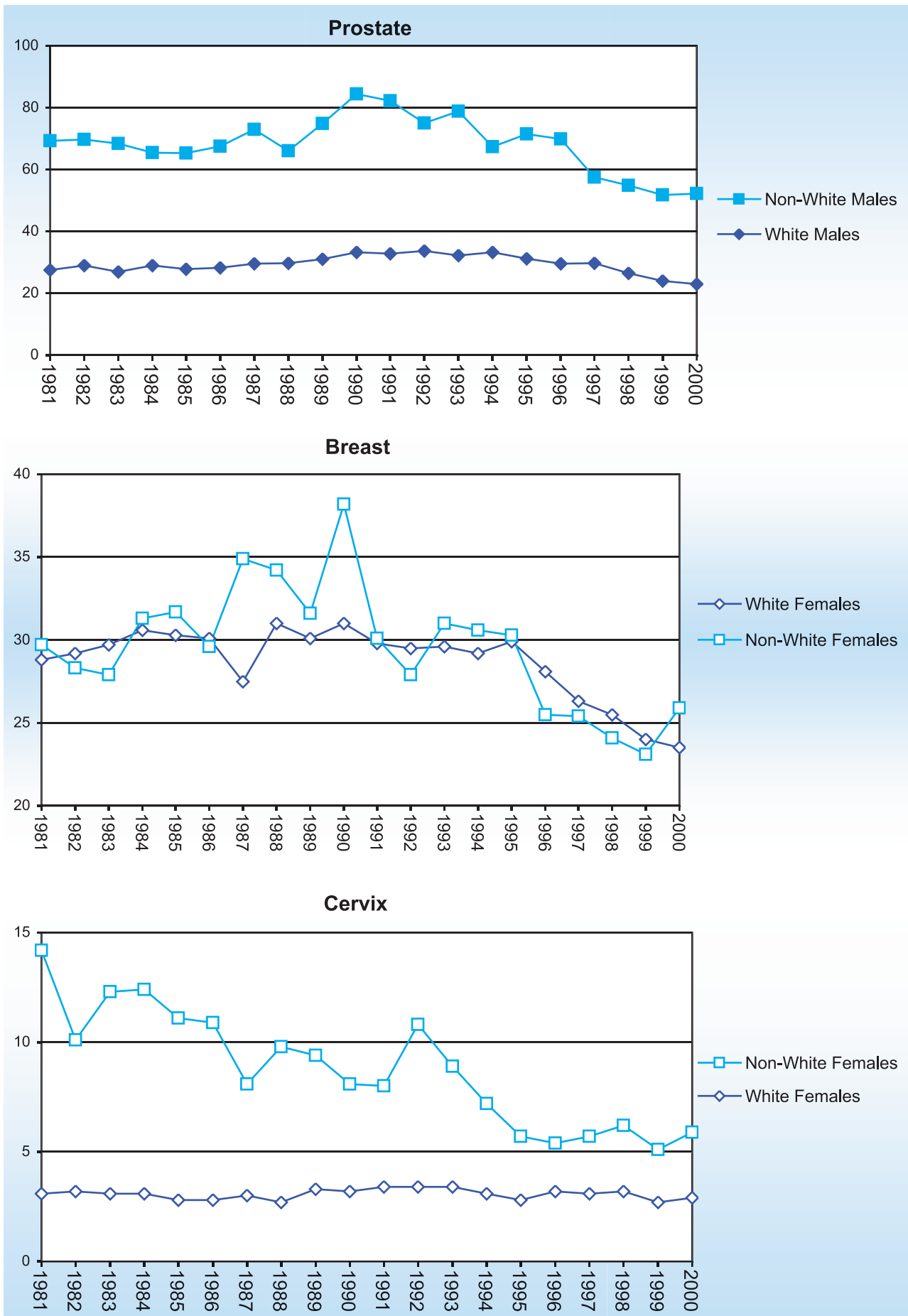
- The two race groups had very similar age-adjusted mortality rates from breast cancer over the 20-year period.
- Since 1990, breast cancer mortality has decreased slightly even as incidence has increased. This may be due to more widespread breast cancer screening, which detects breast cancer at earlier, and consequently, more treatable stages, as well as to more effective treatment following diagnosis (Schottenfeld and Fraumeni, 1996, page 1023).

### ***Cervix***

- In 1981, the age-adjusted mortality rate for cervical cancer in non-White females was about four times as high as for White females. Over the last 20 years, the rate for cervical cancer in non-White females has declined 58 percent, while the rate in White females has decreased 6 percent.



**Figure 15.2 Age-Adjusted Mortality Rates by Sex and Race, Florida, 1981-2000**



### ***Head and Neck***

- Age-adjusted mortality rates for head and neck cancer were generally higher in both female and male non-Whites than in Whites.
- Over the 20-year period, the mortality rate for non-White males from head and neck cancer has decreased by 62 percent; non-White female declined 42 percent; and White male rates decreased 16 percent while mortality for White females declined 31 percent.

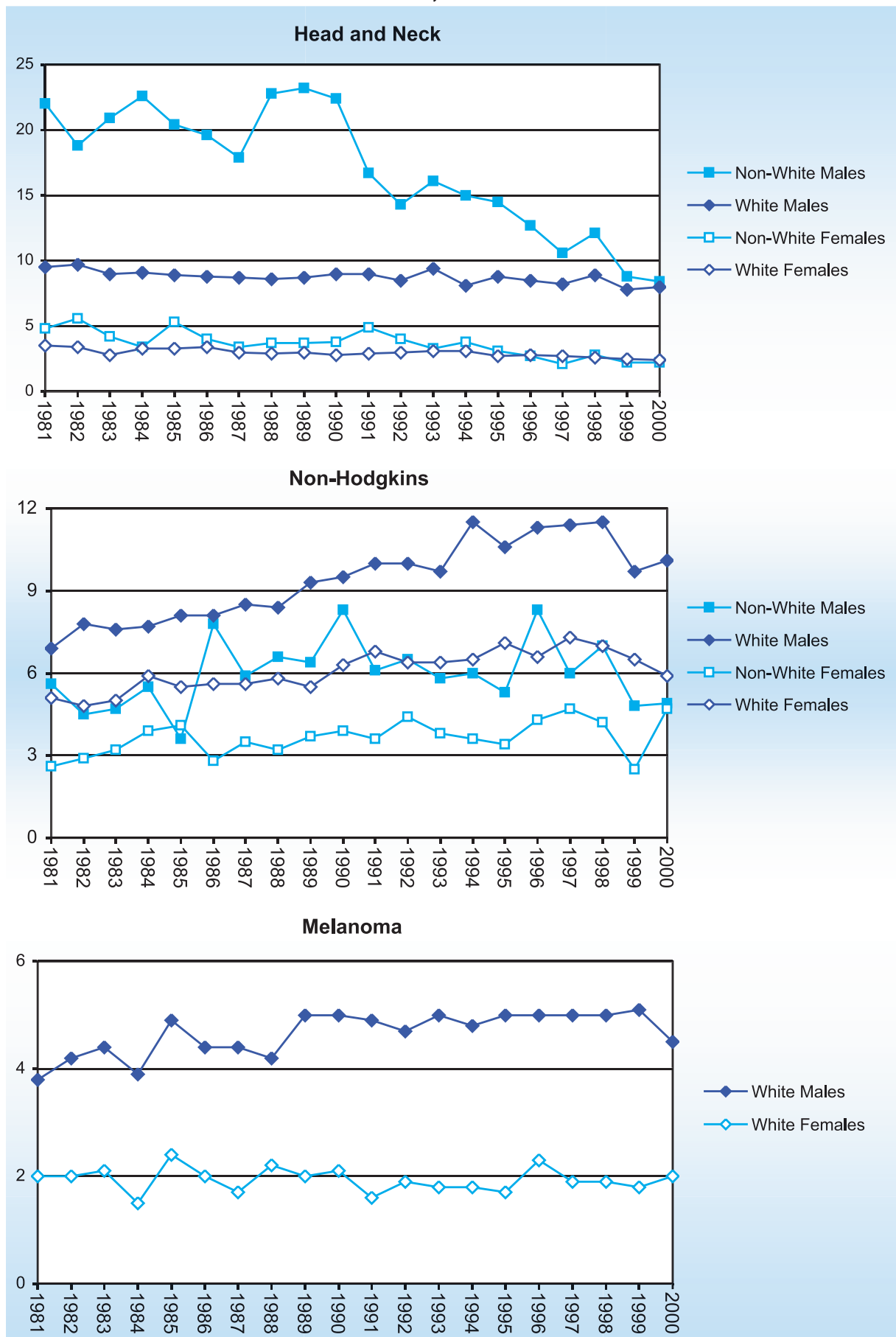
### ***Non-Hodgkin's Lymphoma***

- The mortality rate for non-Hodgkin's lymphoma varies widely for non-Whites, but appears to have increased for all sex-race groups except non-White males. Non-White females have the largest increase, approximately 81 percent.

### ***Melanoma***

- Age-adjusted mortality rates for melanoma were up 18% for White males and remained stable for White females over the 20-year period.

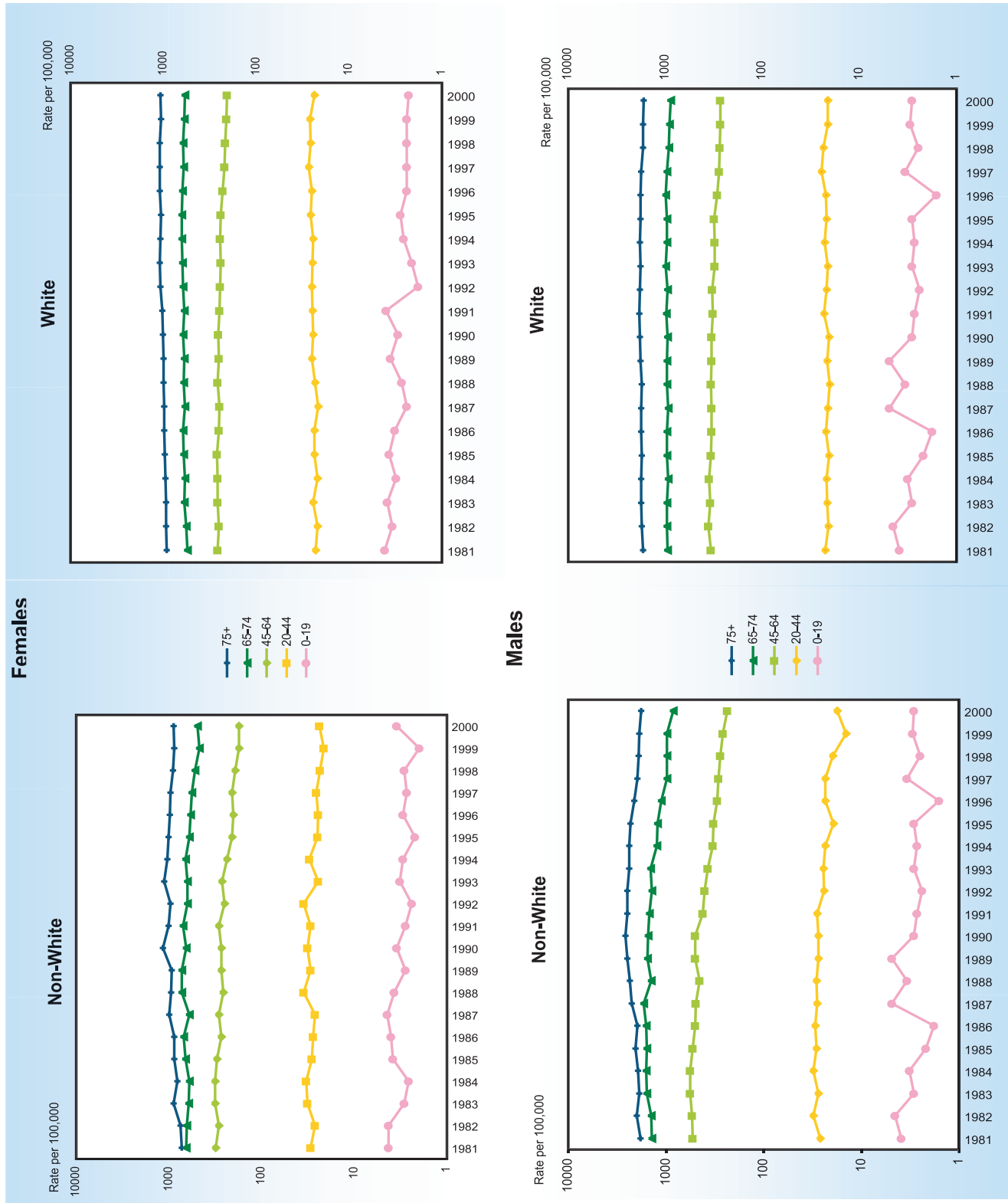
**Figure 15.3. Age-Adjusted Mortality Rates by Sex and Race, Florida, 1981-2000**



## Age Group

- Among White females, age-specific mortality rates decreased over the 20 years since 1981 by 43 percent in the 19 and younger age group and by 20 percent in the 45 to 64 age group. Age-specific mortality rates increased 3 percent in the group age 20 to 44, 6 percent for the 65 to 74-year old group, and 17 percent for ages 75 and older.
- Among White males, age-specific mortality rates decreased for all age groups over the 20-year period. The magnitude of the decreases varied from 19.2 percent in the 45 to 64 age group to 1 percent for the 75 and older age group.
- Age-specific mortality rates for non-White females decreased in all age groups except 75 and older, where rates increased 23 percent between 1981 and 2000. The decreases ranged from 19 percent in the 19 and younger age group to 44 percent in the 45 to 64 age group.
- For non-White males, age-specific mortality rates decreased for all age groups between 1981 and 2000; the most pronounced decline was 56 percent in the 45 to 64 age group.

**Figure 16. Age-Specific Mortality Rates for All Cancers by Sex, Race, and Age Group Florida, 1981-2000**

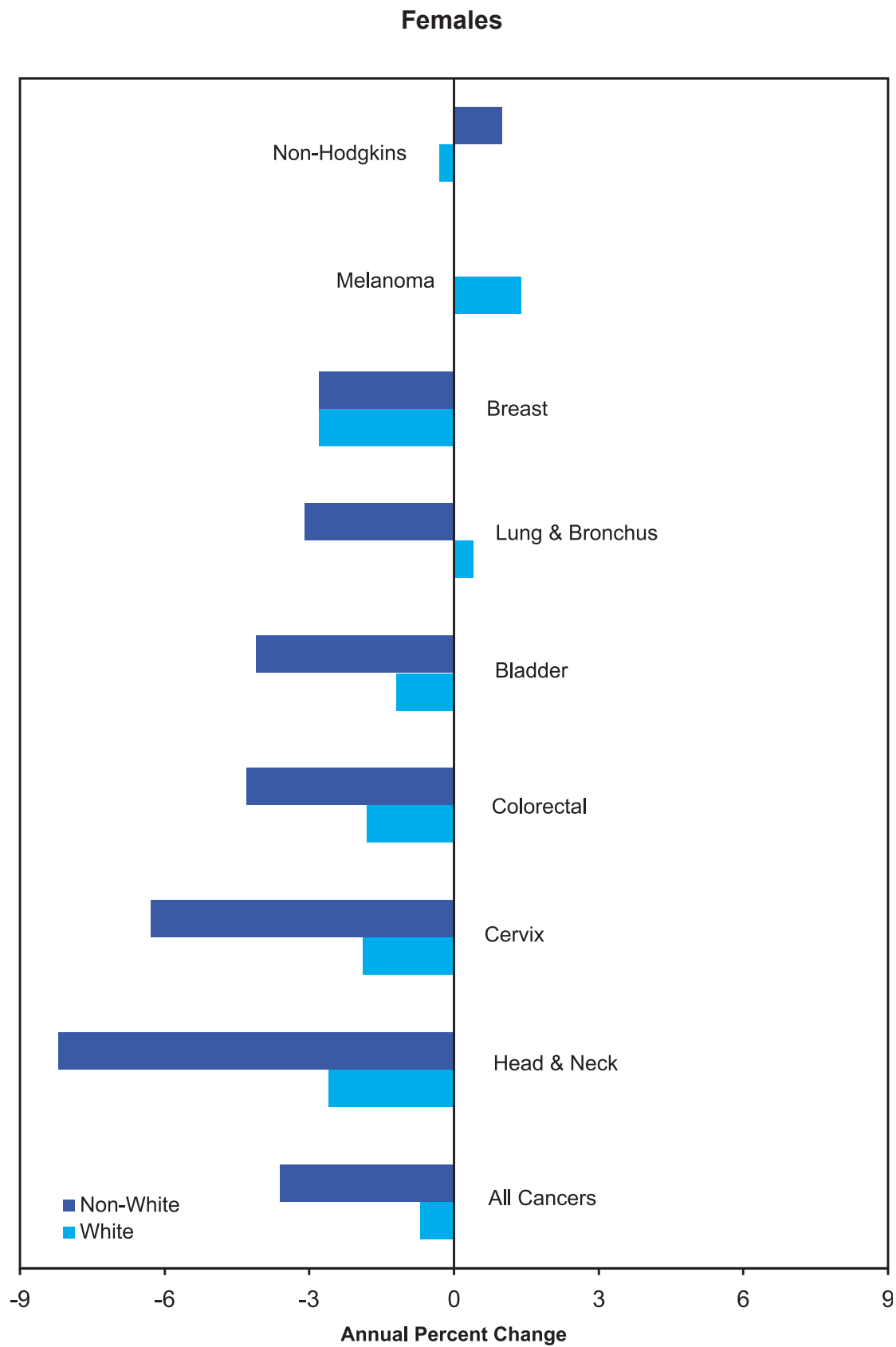


## ESTIMATED ANNUAL PERCENT CHANGE (EAPC) IN MORTALITY RATES FROM 1991 TO 2000

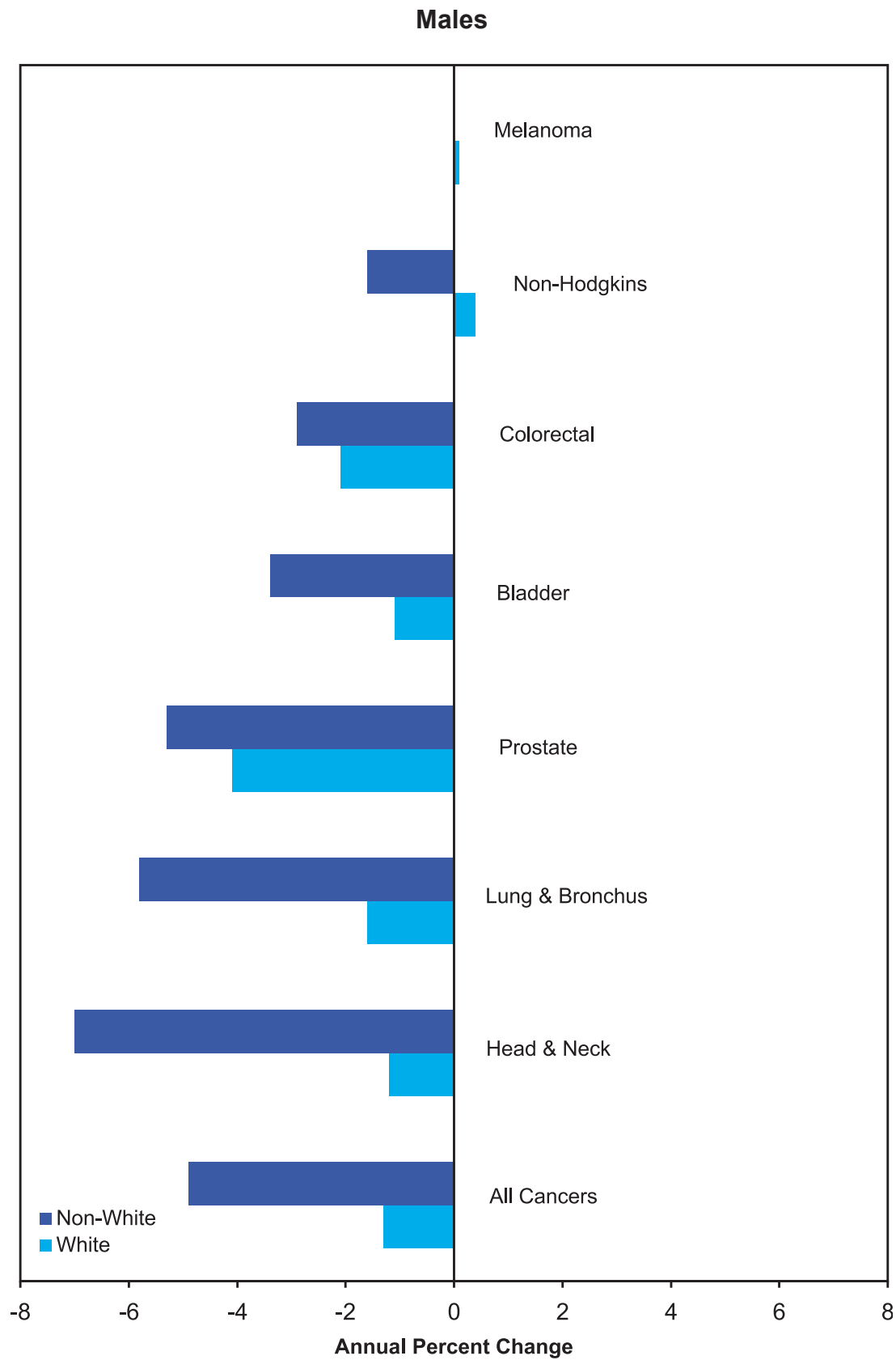
### Sex and Race

- Over the past 10 years, non-Whites had greater decreases in EAPC than Whites.
- The EAPC decreased for all cancers combined and for the major sites, for both males and females with five exceptions.
- Among females, a 1 percent increase in the EAPC occurred in non-Hodgkin's lymphoma in non-Whites, and in Whites, a 1.4 percent increase occurred for melanoma and a 0.5 percent increase occurred for lung cancer.
- For White males, the increases in EAPC over the 10-year period were 0.4 percent for non-Hodgkin's lymphoma and 0.1 percent for melanoma per year.
- Non-White males had no increases in EAPC over the 10-year period.
- The EAPC in mortality rate for all cancers combined for all sex-race groups decreased significantly for the 10 years since 1991. In addition, the EAPC decreased significantly for all major cancer sites except melanoma.
- The EAPC for cancer of the lung and bronchus increased only in White females, though not significantly; in all other sex-race groups, the EAPC decreased significantly.
- For non-Hodgkin's lymphoma, the EAPC went down in females, up in males, down for non-Whites, and up for Whites. None of these changes were statistically significant.
- The melanoma EAPC increased for both White females and White males; the changes were not significant for either group.
- The changes in the EAPC for non-Whites were much greater than for Whites for all major sites except breast cancer. Particularly, the decrease in the EAPC of 5 percent per year for cancer of the lung and bronchus for non-Whites was seven times greater than the decrease for Whites at 0.7 percent, although both changes were significant.
- The EAPC for head and neck cancers in non-Whites declined 7.1 percent per year for the 10-year period, five times the decrease for Whites at 1.4 percent per year; both were significant.
- Non-White females had the largest decrease in EAPC for colorectal cancer — 4.3 percent per year. Non-White males had the next largest decrease, 2.9 percent per year.
- Non-White females had the largest decrease in the EAPC for cervical cancer, and head and neck cancers.

**Figure 17.1 Estimated Annual Percent Change  
in Age-Adjusted Mortality Rates by Race, Florida, 1991-2000**



**Figure 17.2 Estimated Annual Percent Change  
in Age-Adjusted Mortality Rates by Race, Florida, 1991-2000**





**Table 15. Estimated Annual Percent Change in Age-Adjusted Mortality Rates by Sex and Race, Florida, 1991-2000**

	All Cancers										
	Lung & Bronchus	Prostate	Breast	Colorectal	Bladder	Head & Neck	Non-Hodgkins	Melanoma	Cervix		
Florida	-1.3 *	-1.1 *	-4.1 *	-2.8 *	-2.0 *	-1.2 *	-2.2 *	-0.1	0.6	-2.7 *	
Female	-1.0 *	0.1		-2.8 *	-1.9 *	-1.5 *	-3.4 *	-0.5	1.4	-2.7 *	
Male	-1.6 *	-2.0 *	-4.1 *		-2.2 *	-1.3 *	-1.9 *	0.3	0.1		
Non-White	-4.3 *	-5.0 *	-5.3 *	-2.8 *	-3.5 *	-3.5 *	-7.1 *	-0.4		-6.3 *	
White	-0.9 *	-0.7 *	-4.1 *	-2.8 *	-1.8 *	-1.0 *	-1.4 *	0.1	0.6	-1.9 *	
NW Female	-3.6 *	-3.1 *		-2.8 *	-4.3 *	-4.1	-8.2 *	1.0		-6.3 *	
W Female	-0.7 *	0.4		-2.8 *	-1.8 *	-1.2 *	-2.6 *	-0.3	1.4	-1.9 *	
NW Male	-4.9 *	-5.8 *	-5.3 *		-2.9 *	-3.4 *	-7.0 *	-1.6			
W Male	-1.3 *	-1.6 *	-4.1 *		-2.1 *	-1.1 *	-1.2	0.4	0.1		

\* Estimated Annual Percent Change (EAPC) is significantly different from zero (p<0.05).

NW = Non-White / W = White

## County

- The EAPC decreased significantly for all cancers combined in 19 Florida counties over the 10-year period. The EAPC decreased in another 35 counties, but the changes were not statistically significant. Only Columbia County had a significant increase for all cancers combined, 2 percent per year.
- In the counties with a population of more than 500,000 people, all but Duval and Orange had significant decreases in the EAPC for all cancers combined over the past 10 years. Miami-Dade's EAPC declined 1.7 percent; Broward and Palm Beach were both down 1.9 percent; Hillsborough was down 1.3 percent; and Pinellas was down 1.0 percent.
- Nine counties had significant decreases in the EAPC for lung cancer. The EAPC decreased in another 45 counties, although these decreases were not significant.
- Forty-five counties had decreases in the EAPC for prostate cancer; 15 of these decreases were significant. The prostate EAPC decreased 10.5 percent per year in Okeechobee County; Sumter County had a 12.6 percent per year decrease.
- Forty counties had a decreased EAPC for breast cancer. The decrease was significant in 13 counties. The largest decrease was 9.3 percent per year in Monroe County.
- The colorectal EAPC decreased significantly in 13 counties. The largest decrease was 18.6 percent per year in Wakulla County. Suwannee County was the only county that had a significant increase in the colorectal cancer EAPC at 8.9 percent per year.
- The EAPC for bladder cancer mortality decreased in 31 counties and increased in seven counties. None of these changes were significant.
- The EAPC for head and neck cancer mortality increased significantly in Broward, Miami-Dade, and Pinellas counties. Levy County had the only significant increase at 11 percent per year.
- The EAPC for non-Hodgkin's lymphoma increased significantly in Pasco and Alachua counties. Bay, Miami-Dade, Lee, and Martin counties had significant decreases in the EAPC for non-Hodgkin's lymphoma.
- The EAPC for melanoma went down significantly in Collier County (12.2 percent per year) and increased significantly in Volusia County (9.7 percent per year).
- Broward, Lake, and Palm Beach counties had significant decreases in the EAPC for cervical cancer. There were no significant increases in the cervical cancer EAPC in any counties.

**Table 16. Estimated Annual Percent Change in Age-Adjusted Mortality Rates by County, Florida, 1991-2000**

	All Cancers	Lung & Bronchus	Prostate	Breast	Colorectal	Bladder	Head & Neck	Non- Hodgkins	Melanoma	Cervix
Florida	-1.3 *	-1.1 *	-4.1 *	-2.8 *	-2.0 *	-1.2 *	-2.2 *	-0.1	0.6	-2.7 *
Alachua	-0.5	-1.7	0.3	0.5	3.3	1.2	-4.9	10.6 *	5.0	^
Baker	-1.3	0.9	^	2.9	-4.9	^	^	^	^	^
Bay	-0.5	0.2	-3.0	-0.5	1.7	-1.5	4.0	-7.9 *	3.7	-4.4
Bradford	-4.4 *	-4.6	-8.0	-6.6	-10.9	^	^	^	^	^
Brevard	-1.1 *	-1.1	-4.6 *	-4.5 *	-2.1 *	-3.7	-1.1	2.4	0.3	-3.3
Broward	-1.9 *	-2.1 *	-4.8 *	-3.2 *	-1.9 *	-0.3	-3.3 *	-0.9	-1.1	-4.8 *
Calhoun	-4.2 *	-3.8	^	^	^	^	^	^	^	^
Charlotte	-0.9	-1.0	-5.2 *	-2.6	-3.0 *	-4.9	-3.9	-2.5	6.5	~
Citrus	-0.9	-0.4	-3.3	-1.4	-0.9	2.4	-7.0	2.8	-6.2	~
Clay	-1.1	-2.4	0.0	-0.8	0.9	~	-3.3	5.4	1.6	~
Collier	-2.6 *	-2.3 *	-4.4	-4.6 *	-4.5 *	-4.9	-2.0	-2.5	-12.2 *	~
Columbia	2.0 *	1.5	3.4	3.0	-0.5	1.5	-0.1	5.1	~	~
Miami-Dade	-1.7 *	-2.1 *	-2.7 *	-3.0 *	-1.9 *	-0.1	-4.2 *	-2.7 *	1.4	-1.1
DeSoto	-3.2	-1.7	-9.1	2.7	-3.8	^	^	^	^	^
Dixie	-1.2	-3.1	^	^	^	^	^	^	^	^
Duval	-0.8	-1.2 *	-2.3	0.6	-1.8 *	-4.1	-1.5	0.2	2.9	0.2
Escambia	-0.8	-0.7	-4.3	-2.7	-2.2	-0.1	-4.5	2.9	0.8	-6.8
Flagler	-0.6	-1.3	-4.3	2.9	0.2	-1.0	^	11.7	^	^
Franklin	0.5	-1.1	^	-1.2	^	^	^	^	^	^
Gadsden	-0.3	-0.4	-3.0	-2.6	-5.1	-3.0	8.3	^	^	^
Gilchrist	-0.8	-4.2	^	^	^	^	^	^	^	^
Glades	0.7	4.9	^	^	-2.1	^	^	^	^	^
Gulf	0.6	4.8	^	^	^	^	^	^	^	^
Hamilton	-2.7	-1.0	^	^	-0.2	^	^	^	^	^
Hardee	0.0	-1.1	-9.0	^	-6.8	^	^	^	^	^
Hendry	-2.0	-0.1	^	^	-7.2	^	^	^	^	^
Hernando	-0.7	1.4	-3.9	-3.6	-3.0	-2.5	-5.9	-3.1	-4.0	-6.8
Highlands	-2.0 *	-1.1	-8.4 *	-3.0	-4.6 *	-5.8	0.7	-0.9	1.5	^
Hillsborough	-1.3 *	-0.8	-4.0 *	-2.4	-1.6	-3.4	0.1	0.4	-0.6	-1.8
Holmes	-1.3	-2.4	-2.5	^	0.7	^	^	^	^	^
Indian River	-1.7	0.3	-7.8 *	-1.9	-5.5 *	-5.8	-7.1	-0.1	-1.9	2.2
Jackson	-0.1	-4.2 *	2.8	-2.4	1.8	-0.5	^	^	^	^
Jefferson	0.3	2.5	^	4.0	^	^	^	^	^	^
Lafayette	-0.9	-3.2	^	^	^	^	^	^	^	^
Lake	-1.7	-0.7	-5.7	-4.5	-1.3	-2.4	-4.1	2.0	4.3	-12.9 *
Lee	-1.7 *	-1.3 *	-6.1 *	-3.7 *	-1.8	-2.6	2.4	-2.5 *	-4.4	-0.3
Leon	-0.7	-1.0	-1.3	-0.3	0.3	3.1	-7.2	-0.4	-4.6	-5.5
Levy	-2.1	-2.1	^	-4.2	0.7	^	11.0 *	^	^	^
Liberty	2.1	4.5	^	^	^	^	^	^	^	^
Madison	-1.4	-2.3	-7.1	^	1.9	^	^	^	^	^
Manatee	-0.9 *	-0.5	-1.6	-4.0 *	-0.1	-2.6	-2.0	-2.5	1.5	^
Marion	-0.5	-1.0	-3.0	0.3	0.5	0.9	-0.5	2.4	0.1	1.2
Martin	-2.9 *	-2.9 *	-5.3	-4.5 *	-6.2 *	-5.1	-2.0	-7.5 *	-6.6	8.2
Monroe	-1.4	-1.0	-2.1	-9.3 *	-5.6	3.5	-0.7	2.5	2.8	^
Nassau	-1.5	-1.8	-5.7	-1.2	-1.6	^	-7.1	^	^	^
Okaloosa	-0.1	0.1	-0.3	-2.1	-0.6	-1.1	-3.2	-0.8	6.7	^
Okeechobee	-1.4	-1.8	-10.5	0.4	-2.7	^	-0.8	^	^	^
Orange	-2.0 *	-2.2 *	-4.4 *	-5.0 *	-1.3	-0.9	-0.9	-1.9	-3.9	-1.1
Osceola	1.0	-1.2	-1.7	-1.9	1.4	-1.6	6.6	3.6	1.3	^
Palm Beach	-1.9 *	-0.9	-4.7 *	-4.2 *	-4.1 *	-1.6	-1.5	-0.7	-0.4	-5.3 *
Pasco	-0.4	-0.3	-6.0 *	-1.9	-2.5	-1.1	3.5	4.8 *	7.8	-7.8
Pinellas	-1.0 *	-0.8	-5.0 *	-3.1 *	-2.1 *	-0.2	-2.9 *	1.7	1.4	-2.6
Polk	0.3	0.3	-2.7	-2.0	1.4	0.0	-2.2	0.8	3.7	2.6
Putnam	-0.1	-1.3	-3.7	-0.7	-2.5	-1.6	3.7	4.2	^	^
Saint Johns	-2.0	-1.5	-4.6	-7.7 *	-3.3	-2.7	-2.2	1.3	4.4	^
Saint Lucie	-1.3 *	-2.1	-5.8 *	-2.7	-2.2	-0.3	-0.7	3.0	0.4	2.1
Santa Rosa	0.5	-0.1	7.8	3.1	-1.0	^	-1.7	-5.1	^	^
Sarasota	-0.5	-0.5	-3.0	-4.4	-2.5	0.5	-1.7	1.9	3.1	^
Seminole	-0.8 *	-1.5	-3.1	-0.5	-0.8	-3.4	-2.0	-0.4	-4.0	-3.6
Sumter	-2.4 *	-4.6 *	-12.6 *	-8.1 *	-2.3	^	5.5	^	^	^
Suwannee	-1.2	-0.7	1.2	-2.1	8.9 *	-12.6	^	-4.8	^	^
Taylor	-0.8	-2.7	1.6	10.2	0.2	^	^	^	^	^
Union	4.0	5.1	^	^	0.1	^	^	^	^	^
Volusia	-1.0 *	-0.4	-2.1	-1.3	-3.2 *	-1.4	-3.8	1.5	9.7 *	-0.5
Wakulla	-4.5 *	-1.5	-0.5	^	-18.6 *	^	^	^	^	^
Walton	1.2	2.0	8.8	0.7	-6.4	^	^	^	^	^
Washington	0.1	3.9	-7.1 *	^	3.0	^	^	^	^	^

\* Estimated Annual Percent Change (EAPC) is significantly different from zero, p<0.05.

^ Statistics are not displayed for fewer than 10 deaths.

## DEATHS-TO-CASES RATIOS

The deaths-to-cases ratio is a general indication of the prognosis of a specific cancer. It is defined as the number of cancer deaths divided by the number of new cases. Ratios closer to 1.0 indicate a poorer prognosis overall than ratios closer to zero. Deaths-to-cases ratios should be understood as averages, since even within the same cancer site, many factors influence the progress of an individual case of cancer.

### Sex and Race

- In 2000, lung cancer had the highest deaths-to-cases ratios among the top cancer sites; second highest was colorectal cancer with ratios about half that of lung cancer.
- Males and females had similar deaths-to-cases ratios for all major cancers except bladder cancer and melanoma. For females, the deaths-to-cases ratio was 29 percent higher than males for bladder cancer, and 26 percent lower for melanoma.
- For all cancers combined, the deaths-to-cases ratio was 12.5 percent higher for non-Whites than for Whites. Deaths-to-cases ratios were also higher for non-Whites than for Whites for all cancer sites except non-Hodgkin's lymphoma. Deaths-to-cases ratios were 60 percent higher for breast cancer, 95 percent higher for bladder cancer, and 50 percent higher for cervical cancer in non-White females.
- The deaths-to-cases ratio for prostate cancer was 0.22 for non-White males and 0.16 for White males.
- Non-White females had the highest deaths-to-cases ratio for bladder cancer of the four sex-race groups at 0.52, compared to 0.30 for non-White males, 0.22 for White females, and 0.18 for White males.
- Non-White males had the highest deaths-to-cases ratio for lung cancer at 0.82, which is about 24 percent higher than for non-White females and 6 percent higher than White males.
- Non-Whites had a deaths-to-cases ratio for head and neck cancers 33 percent higher than Whites.
- Non-White males had the lowest deaths-to-cases ratio at 0.32 for non-Hodgkin's lymphoma in all the sex-race groups.

**Table 17. Deaths-to-Cases Ratios by Sex and Race, Florida, 2000**

	All Cancers	Lung & Bronchus	Prostate	Breast	Colorectal	Bladder	Head & Neck	Non-Hodgkins	Melanoma	Cervix
<b>Florida</b>	<b>0.40</b>	<b>0.74</b>	<b>0.16</b>	<b>0.21</b>	<b>0.33</b>	<b>0.20</b>	<b>0.27</b>	<b>0.44</b>	<b>0.17</b>	<b>0.32</b>
Female	0.40	0.71		0.21	0.33	0.24	0.25	0.43	0.14	0.32
Male	0.41	0.77	0.16		0.33	0.18	0.28	0.45	0.18	
Non-White	0.45	0.76	0.22	0.32	0.38	0.37	0.36	0.37		0.45
White	0.40	0.74	0.16	0.20	0.33	0.19	0.27	0.45	0.17	0.30
Non-White Female	0.45	0.66		0.32	0.40	0.52	0.36	0.43		0.45
White Female	0.40	0.71		0.20	0.33	0.22	0.25	0.43	0.14	0.30
Non-White Male	0.44	0.82	0.22		0.36	0.30	0.37	0.32		
White Male	0.41	0.77	0.16		0.33	0.18	0.27	0.47	0.19	

## Age Group

- Cancer deaths-to-cases ratios become progressively higher with increasing age. The highest ratios were in the 75 and older age group for all cancers combined and for all major cancer sites. The only exception was lung cancer in non-Whites, which had a higher ratio in the 20 to 44 age group than in the 45 to 64 age group. In non-White females, the 20 to 44 age group had a deaths-to-cases ratio higher than both the 45 to 64 and the 65 to 74 age groups.
- Non-Whites had higher age-specific deaths-to-cases ratios than Whites for all cancers combined and for all major cancer sites.
- Non-White females in the 19 and younger age group had a deaths-to-cases ratio for all cancers combined about three times that of White females. Non-White males in the same age group had a deaths-to-cases ratio 53 percent higher than White males in that age group.
- For lung cancer, non-Whites had much higher deaths-to-cases ratios than Whites in the 20 to 44 and the 65 to 74 age groups.
- For prostate cancer, non-Whites had a deaths-to-cases ratio about 78 percent higher than Whites in the 75 and older age group. Among younger age groups, a similar pattern was seen.
- Breast cancer deaths-to-cases ratios for non-White females were almost double those of White females for all age groups under 75 and 55 percent higher in the 75 and older age group.
- For colorectal cancer, non-Whites in the 75 and older age group had a deaths-to-cases ratio about 28 percent higher than their White counterparts. Non-White females had the highest deaths-to-cases ratios of all sex-race groups, and in all age groups, except 75 and older.
- Bladder cancer ratios in non-Whites were between two and three times as high in all age groups as those found in Whites.
- Deaths-to-cases ratios for non-Hodgkin's lymphoma were much higher for non-Whites than Whites age 65 and older. Non-White females in the 20 to 44 age group had the highest deaths-to-cases ratio of all sex-race groups.
- Non-Whites had higher deaths-to-cases ratios for cervical cancer than Whites in all age groups under 65, and in the 75 and older age group.

**Table 18. Deaths-to-Cases Ratios by Sex, Race, and Age Group, Florida, 2000**

	All Cancers	Lung & Bronchus	Prostate	Breast	Colorectal	Bladder	Head & Neck	Non- Hodgkins	Melanoma	Cervix
<b>Florida Total</b>	<b>0.40</b>	<b>0.74</b>	<b>0.16</b>	<b>0.21</b>	<b>0.33</b>	<b>0.20</b>	<b>0.27</b>	<b>0.44</b>	<b>0.17</b>	<b>0.32</b>
0-19	0.19	^	^	^	^	^	^	^	^	^
20-44	0.20	0.59	^	0.14	0.24	^	0.12	0.20	0.11	0.20
45-64	0.32	0.67	0.04	0.17	0.27	0.13	0.23	0.32	0.15	0.38
65-74	0.37	0.70	0.08	0.18	0.28	0.14	0.29	0.42	0.16	0.43
75+	0.55	0.85	0.39	0.31	0.40	0.26	0.37	0.63	0.22	0.55
<b>Female</b>										
0-19	0.18	^		^	^	^	^	^	^	^
20-44	0.17	0.52		0.14	0.23	^	^	0.20	0.11	0.20
45-64	0.30	0.60		0.17	0.26	0.15	0.19	0.29	0.11	0.38
65-74	0.39	0.68		0.19	0.28	0.13	0.29	0.36	0.14	0.43
75+	0.55	0.82		0.32	0.40	0.33	0.35	0.62	0.19	0.55
<b>Male</b>										
0-19	0.19	^	^		^	^	^	^	^	^
20-44	0.24	0.65	^		0.25	^	0.15	0.20	0.12	
45-64	0.34	0.71	0.04		0.29	0.12	0.25	0.33	0.18	
65-74	0.35	0.72	0.08		0.28	0.15	0.28	0.48	0.17	
75+	0.55	0.87	0.39		0.41	0.24	0.39	0.65	0.24	
<b>Non-White</b>										
0-19	0.33	^	^	^	^	^	^	^		^
20-44	0.30	0.78	^	0.25	0.29	^	^	0.23		0.32
45-64	0.38	0.66	0.07	0.30	0.34	0.36	0.35	0.34		0.51
65-74	0.43	0.81	0.16	0.30	0.32	0.27	0.43	0.52		0.41
75+	0.69	0.87	0.66	0.48	0.51	0.49	0.42	0.73		0.92
<b>White</b>										
0-19	0.15	^	^	^	^	^	^	^	^	^
20-44	0.18	0.55	^	0.11	0.23	^	0.11	0.20	0.12	0.18
45-64	0.31	0.67	0.04	0.15	0.27	0.12	0.22	0.32	0.16	0.34
65-74	0.36	0.70	0.07	0.18	0.28	0.14	0.28	0.41	0.16	0.44
75+	0.55	0.85	0.37	0.31	0.40	0.26	0.37	0.63	0.23	0.50
<b>NW Female</b>										
0-19	0.43	^		^	^	^	^	^		^
20-44	0.28	0.73		0.25	0.37	^	^	0.28		0.32
45-64	0.40	0.56		0.30	0.37	^	0.29	0.32		0.51
65-74	0.48	0.68		0.32	0.36	^	^	0.52		0.41
75+	0.67	0.77		0.50	0.46	0.57	^	0.86		0.92
<b>W Female</b>										
0-19	0.14	^		^	^	^	^	^	^	^
20-44	0.15	0.47		0.12	0.19	^	^	0.18	0.11	0.18
45-64	0.28	0.60		0.15	0.25	0.11	0.18	0.29	0.12	0.34
65-74	0.39	0.68		0.18	0.27	0.12	0.28	0.35	0.15	0.44
75+	0.55	0.82		0.31	0.40	0.32	0.35	0.62	0.20	0.50
<b>NW Male</b>										
0-19	0.26	^	^		^	^	^	^		
20-44	0.35	0.82	^		^	^	^	0.20		
45-64	0.37	0.71	0.07		0.31	^	0.37	0.36		
65-74	0.40	0.88	0.16		0.28	^	0.39	0.52		
75+	0.72	0.93	0.66		0.59	0.44	^	^		
<b>W Male</b>										
0-19	0.17	^	^		^	^	^	^	^	^
20-44	0.22	0.61	^		0.26	^	0.14	0.21	0.12	
45-64	0.34	0.72	0.04		0.28	0.12	0.23	0.33	0.18	
65-74	0.35	0.71	0.07		0.29	0.14	0.28	0.48	0.17	
75+	0.55	0.87	0.37		0.40	0.24	0.39	0.65	0.25	

^ Statistics are not displayed for fewer than 10 deaths.

NW = Non-White / W = White

## County

- For all cancers combined, deaths-to-cases ratios in Florida counties ranged from a high of 1.22 in Glades County to a low of 0.33 in Collier County.
- Deaths-to-cases ratios for cancer of the lung and bronchus ranged from a high of 3.0 in Glades County to a low of 0.50 in Hardee County.
- The highest deaths-to-cases ratio for prostate cancer was 0.52 in Jackson County, more than twice the second highest ratio of 0.25 in Leon County, and over five times the lowest ratio of 0.09 in Lake County.
- Deaths-to-cases ratios for breast cancer were highest at 0.30 in Bay, Leon, and Pasco counties and lowest at 0.10 in Saint Johns County.
- The deaths-to-cases ratios for colorectal cancer ranged from 0.58 in Sumter County to 0.24 in Citrus County.
- Deaths-to-cases ratios for bladder cancer were highest in Alachua County at 0.35 and lowest in Manatee County at 0.09.
- Deaths-to-cases ratios for head and neck cancer ranged from 0.55 in Putnam County to 0.22 in Martin County.
- The highest deaths-to-cases ratio for non-Hodgkin's lymphoma was 1.71 in Sumter County; the lowest is 0.18 in Collier County.
- Melanoma deaths-to-cases ratios were highest in Saint Lucie County at 0.33 and lowest in Lee County at 0.09.
- The highest deaths-to-cases ratio for cervical cancer was 1.10 in Saint Lucie County; the lowest was 0.24 in Pinellas County.
- Saint Johns County appeared among the five highest ranked counties for deaths-to-cases ratios by site for head and neck cancer, non-Hodgkin's lymphoma, and melanoma.

**Table 19. Deaths-to-Cases Ratios by County, Florida, 2000**

	All Cancers	Lung & Bronchus	Prostate	Breast	Colorectal	Bladder	Head & Neck	Non- Hodgkins	Melanoma	Cervix
<b>Florida</b>	<b>0.40</b>	<b>0.74</b>	<b>0.16</b>	<b>0.21</b>	<b>0.33</b>	<b>0.20</b>	<b>0.27</b>	<b>0.44</b>	<b>0.17</b>	<b>0.32</b>
Alachua	0.41	0.88	0.20	0.22	0.31	0.35	^	0.66	^	^
Baker	0.44	^	^	^	^	^	^	^	^	^
Bay	0.43	0.82	0.20	0.30	0.30	^	^	0.38	^	^
Bradford	0.53	1.05	^	^	^	^	^	^	^	^
Brevard	0.44	0.81	0.14	0.22	0.37	0.16	0.51	0.64	0.16	^
Broward	0.39	0.70	0.17	0.22	0.32	0.22	0.23	0.39	0.13	0.26
Calhoun	0.43	^	^	^	^	^	^	^	^	^
Charlotte	0.41	0.75	0.15	0.21	0.28	0.23	^	0.53	^	^
Citrus	0.47	0.85	0.20	0.22	0.24	0.26	^	0.50	^	^
Clay	0.45	0.77	0.23	0.26	0.33	^	^	0.50	^	^
Collier	0.33	0.69	0.01	0.17	0.29	0.11	0.28	0.18	^	^
Columbia	0.55	0.92	^	^	0.29	^	^	^	^	^
Miami-Dade	0.37	0.74	0.18	0.21	0.28	0.27	0.23	0.41	0.16	0.28
DeSoto	0.46	0.56	^	^	^	^	^	^	^	^
Dixie	0.44	0.58	^	^	^	^	^	^	^	^
Duval	0.43	0.82	0.17	0.22	0.40	0.23	0.32	0.37	0.21	0.44
Escambia	0.44	0.80	0.14	0.19	0.30	0.25	0.25	0.42	^	^
Flagler	0.35	0.51	0.19	0.19	0.48	^	^	0.42	^	^
Franklin	0.39	^	^	^	^	^	^	^	^	^
Gadsden	0.58	1.15	^	^	^	^	^	^	^	^
Gilchrist	0.43	0.71	^	^	^	^	^	^	^	^
Glades	1.22	3.00	^	^	^	^	^	^	^	^
Gulf	0.47	1.16	^	^	^	^	^	^	^	^
Hamilton	0.66	1.50	^	^	^	^	^	^	^	^
Hardee	0.34	0.50	^	^	^	^	^	^	^	^
Hendry	0.38	0.81	^	^	^	^	^	^	^	^
Hernando	0.39	0.81	0.12	0.21	0.33	0.15	^	0.47	^	^
Highlands	0.34	0.55	0.12	0.16	0.27	^	^	0.46	^	^
Hillsborough	0.40	0.76	0.15	0.21	0.34	0.21	0.30	0.36	0.15	0.27
Holmes	0.51	0.56	^	^	^	^	^	^	^	^
Indian River	0.40	0.73	0.20	0.18	0.35	^	^	0.34	^	^
Jackson	0.59	0.84	0.52	^	0.46	^	^	^	^	^
Jefferson	0.51	0.87	^	^	^	^	^	^	^	^
Lafayette	0.74	^	^	^	^	^	^	^	^	^
Lake	0.36	0.65	0.09	0.20	0.34	0.13	0.28	0.53	^	^
Lee	0.37	0.75	0.12	0.17	0.35	0.15	0.26	0.47	0.09	^
Leon	0.46	0.69	0.25	0.30	0.44	^	0.41	0.38	^	^
Levy	0.43	0.60	^	^	0.52	^	^	^	^	^
Liberty	0.73	^	^	^	^	^	^	^	^	^
Madison	0.58	^	^	^	^	^	^	^	^	^
Manatee	0.42	0.77	0.20	0.22	0.41	0.09	0.23	0.42	0.17	^
Marion	0.39	0.66	0.14	0.15	0.40	0.12	0.29	0.49	^	0.38
Martin	0.37	0.66	0.12	0.19	0.30	0.15	0.22	0.24	^	^
Monroe	0.38	0.73	^	^	0.29	^	^	0.86	^	^
Nassau	0.43	0.71	^	^	0.48	^	^	^	^	^
Okaloosa	0.45	0.94	0.17	0.20	0.30	0.22	0.50	^	^	^
Okeechobee	0.38	0.74	^	^	^	^	^	^	^	^
Orange	0.39	0.71	0.14	0.18	0.41	0.19	0.26	0.41	0.16	^
Osceola	0.36	0.69	0.14	0.20	0.30	^	0.25	0.39	^	^
Palm Beach	0.37	0.69	0.18	0.17	0.32	0.15	0.27	0.39	0.11	0.38
Pasco	0.42	0.76	0.11	0.30	0.34	0.14	0.29	0.56	0.18	^
Pinellas	0.40	0.73	0.17	0.20	0.31	0.23	0.25	0.42	0.22	0.24
Polk	0.45	0.80	0.23	0.22	0.41	0.18	0.27	0.38	0.21	0.34
Putnam	0.54	0.75	^	0.27	0.27	^	0.55	^	^	^
Saint Johns	0.43	0.86	0.11	0.01	0.45	^	^	0.65	^	^
Saint Lucie	0.49	0.81	0.18	0.21	0.42	0.24	0.49	0.65	0.33	1.10
Santa Rosa	0.39	0.75	^	0.28	0.28	^	0.36	0.91	^	^
Sarasota	0.41	0.69	0.23	0.19	0.30	0.19	0.26	0.56	0.16	^
Seminole	0.46	0.83	0.16	0.29	0.46	0.28	0.36	0.48	^	^
Sumter	0.57	0.92	^	^	0.58	^	^	1.71	^	^
Suwannee	0.52	1.03	^	^	0.52	^	^	^	^	^
Taylor	0.60	0.77	^	^	^	^	^	^	^	^
Union	0.32	0.80	^	^	^	^	^	^	^	^
Volusia	0.43	0.71	0.21	0.24	0.33	0.24	0.27	0.48	0.29	0.37
Wakulla	0.39	0.52	^	^	^	^	^	^	^	^
Walton	0.71	1.03	^	^	^	^	^	^	^	^
Washington	0.65	0.64	^	^	^	^	^	^	^	^

^ Statistics are not displayed for fewer than 10 deaths.



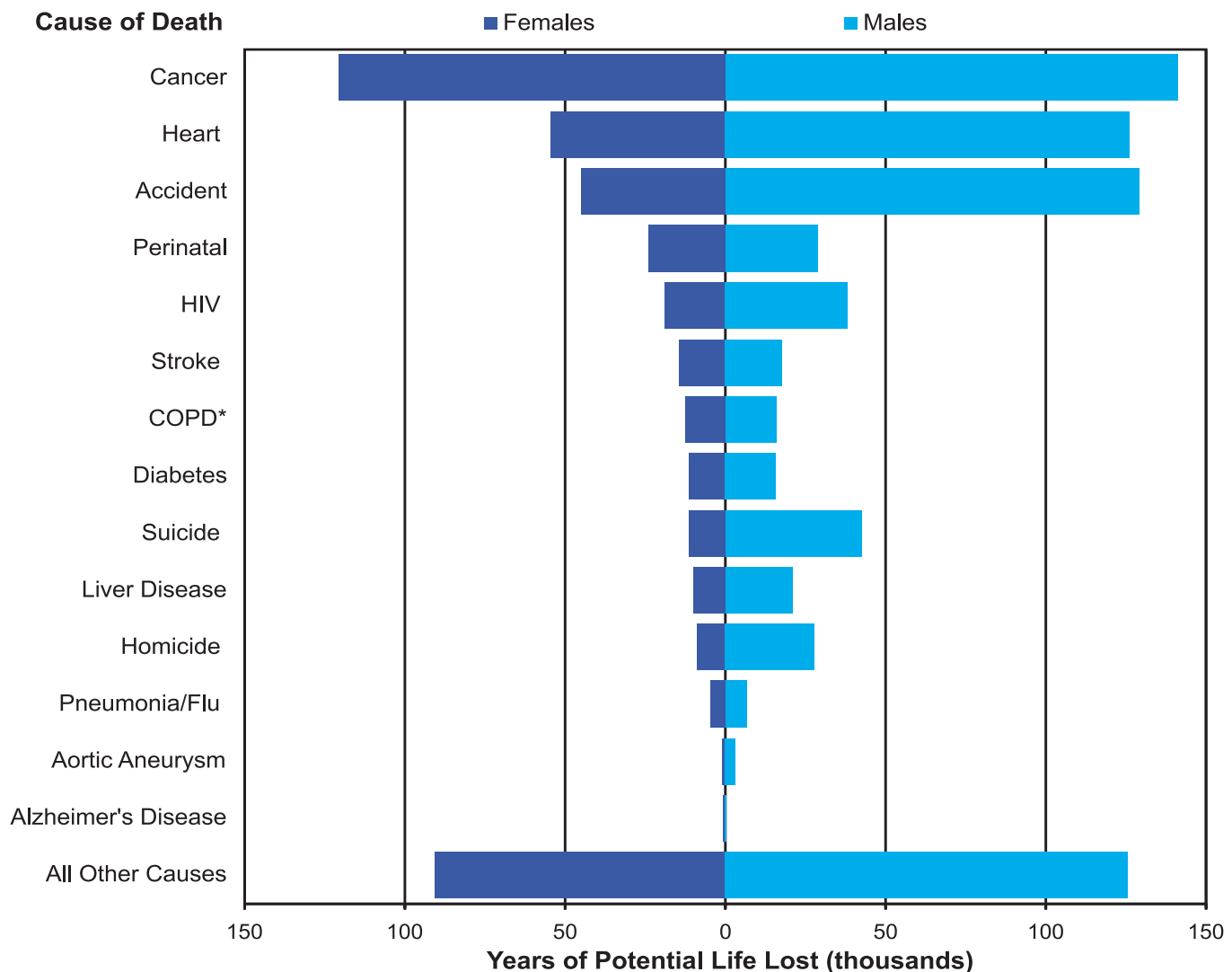
## YEARS OF POTENTIAL LIFE LOST

Years of potential life lost (YPLL) quantifies the burden of premature death and emphasizes those causes of premature death that affect many people, particularly at younger ages. The YPLL was calculated by subtracting each individual's age at death from 75, the approximate average life expectancy, and summing the years of life lost for each specific cause of death. Data used to calculate the YPLL were derived from death certificate information provided by the Florida Department of Health, Office of Vital Statistics.

### ALL CAUSES OF DEATH

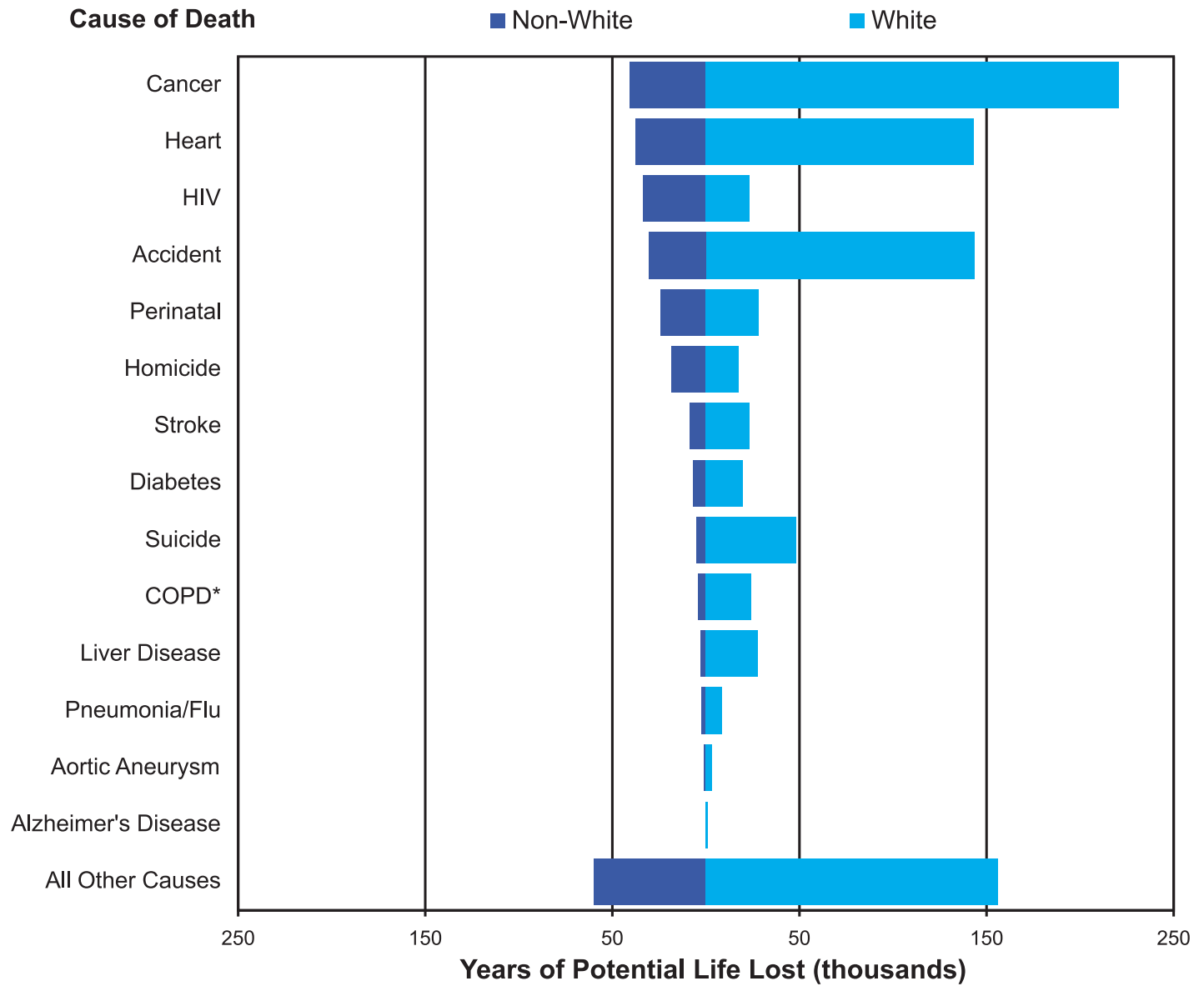
- In 2000, all causes of death yield about 1.17 million YPLL. Cancer was responsible for approximately 262,000 years, or 23 percent of the YPLL from all causes.
- In 2000, cancer was the leading cause of YPLL in Florida, followed by heart disease, accident, suicide, and human immunodeficiency virus (HIV). In children less than 15-years-old, cancer was the sixth leading cause of YPLL.

**Figure 18.1 Years of Potential Life Lost to Age 75 by Sex, Florida, 2000**



\*Chronic Obstructive Pulmonary Disease

**Figure 18.2 Years of Potential Life Lost to Age 75  
by Race, Florida, 2000**



\*Chronic Obstructive Pulmonary Disease

## CANCER DEATHS

### Sex

- Consistent with higher cancer mortality rates among males at most ages, deaths among males contributed more to the total YPLL than deaths among females for all cancers combined, as well as for each specific cancer.
- The cancers that contributed most to the YPLL in 2000 have predominated since 1995: lung and bronchus, breast, colon and rectum, and non-Hodgkin's lymphoma. More than 50 percent of the YPLL from cancer in Florida resulted from deaths due to these four types of cancer.
- Cancer of the lung and bronchus contributed the most YPLL among all cancers in 2000. More than 75,000 years, or 28.6 percent of the total years of life lost to cancer, were due to deaths from cancer of the lung and bronchus.
- Deaths from head and neck cancer accounted for 5 percent of the YPLL in males and 1.6 percent of the YPLL in females.
- The number of years of life lost due to breast cancer was almost five times higher than the YPLL for prostate cancer, because deaths from breast cancer occur in females at much younger ages than deaths from prostate cancer in males. Breast cancer comprised almost 21 percent of the cancer YPLL in females, while prostate cancer contributed less than 4 percent to the cancer YPLL in males.

**Table 20.1 Years of Potential Life Lost Due to All Causes and Selected Cancers by Sex, Florida, 2000**

	Total		Females		Males	
	Years	Percent	Years	Percent	Years	Percent
All Causes of Death	1,171,694	--	428,868	--	742,826	--
All Cancers	262,099	100.0	120,710	100.0	141,389	100.0
Childhood Cancers (1)	5,127	2.0	2,407	2.0	2,720	1.9
Cancer Site						
Lung & Bronchus	75,054	28.6	29,428	24.4	45,626	32.3
Prostate	4,846	1.8			4,846	3.4
Breast	25,026	9.5	25,026	20.7		
Colorectal	21,406	8.2	8,900	7.4	12,506	8.8
Bladder	3,386	1.3	810	0.7	2,576	1.8
Head & Neck	9,136	3.5	1,963	1.6	7,173	5.1
Non-Hodgkins	10,724	4.1	3,981	3.3	6,743	4.8
Melanoma	5,717	2.2	2,194	1.8	3,523	2.6
Cervix	5,606	2.1	5,606	4.6		
All Other Cancers	100,891	38.5	42,796	35.5	58,095	41.1

(1) Years lost to childhood cancers are included in totals for specific cancer sites.

## Race

- The YPLL from all causes by race shown in Figure 18.2 reflects the differences in proportion of both population and deaths between the two race groups. Non-Whites, who make up 22 percent of Florida's population, accounted for 9.6 percent of the deaths in 2000, and had approximately 24 percent of the total Florida YPLL for the year.
- Consistent with higher age-specific death rates in the younger age groups of non-Whites, as well as the age distribution of deaths in the two race groups, the percentages of YPLL from prostate, breast, and cervical cancers, and non-Hodgkin's lymphoma were higher for non-Whites than for Whites.

**Table 20.2 Years of Potential Life Lost Due to All Causes and Selected Cancers by Race, Florida, 2000**

	Total		Non-White		White	
	Years	Percent	Years	Percent	Years	Percent
All Causes	1,171,694	--	277,576	--	894,118	--
All Cancers	262,099	100.0	40,890	100.0	221,209	100.0
Childhood Cancers (1)	5,127	2.0	1,564	3.8	3,563	1.6
Cancer Site						
Lung & Bronchus	75,054	28.6	8,174	20.0	66,880	30.2
Prostate	4,846	1.8	1,242	3.0	3,604	1.6
Breast	25,026	9.6	5,389	13.3	19,637	8.9
Colorectal	21,406	8.2	3,402	8.3	18,004	8.1
Bladder	3,386	1.3	331	0.8	3,055	1.4
Head & Neck	9,136	3.5	1,428	3.5	7,708	3.5
Non-Hodgkins	10,724	4.1	1,879	4.6	8,845	4.0
Melanoma	5,717	2.2			5,717	2.6
Cervix	5,606	2.1	1,523	3.7	4,083	1.8
All Other Cancers	100,891	38.5	17,476	42.8	83,531	37.8

(1) Years lost from childhood cancers are also included in totals for specific cancer sites.

## Sex and Race

- White females had the highest YPLL from cancer of all sex-race groups at 32 percent; non-White males had the lowest YPLL at 13 percent.
- Non-White females had a higher percentage of YPLL due to breast cancer, cervical cancer, and non-Hodgkin's lymphoma than White females.
- Twenty-seven percent of the total YPLL in White females was due to cancer of the lung and bronchus, compared to 12 percent for non-White females.
- Non-White males had twice the percentage of YPLL due to prostate cancer of White males.

**Table 20.3 Years of Potential Life Lost Due to All Causes and Selected Cancers by Sex and Race, Florida, 2000**

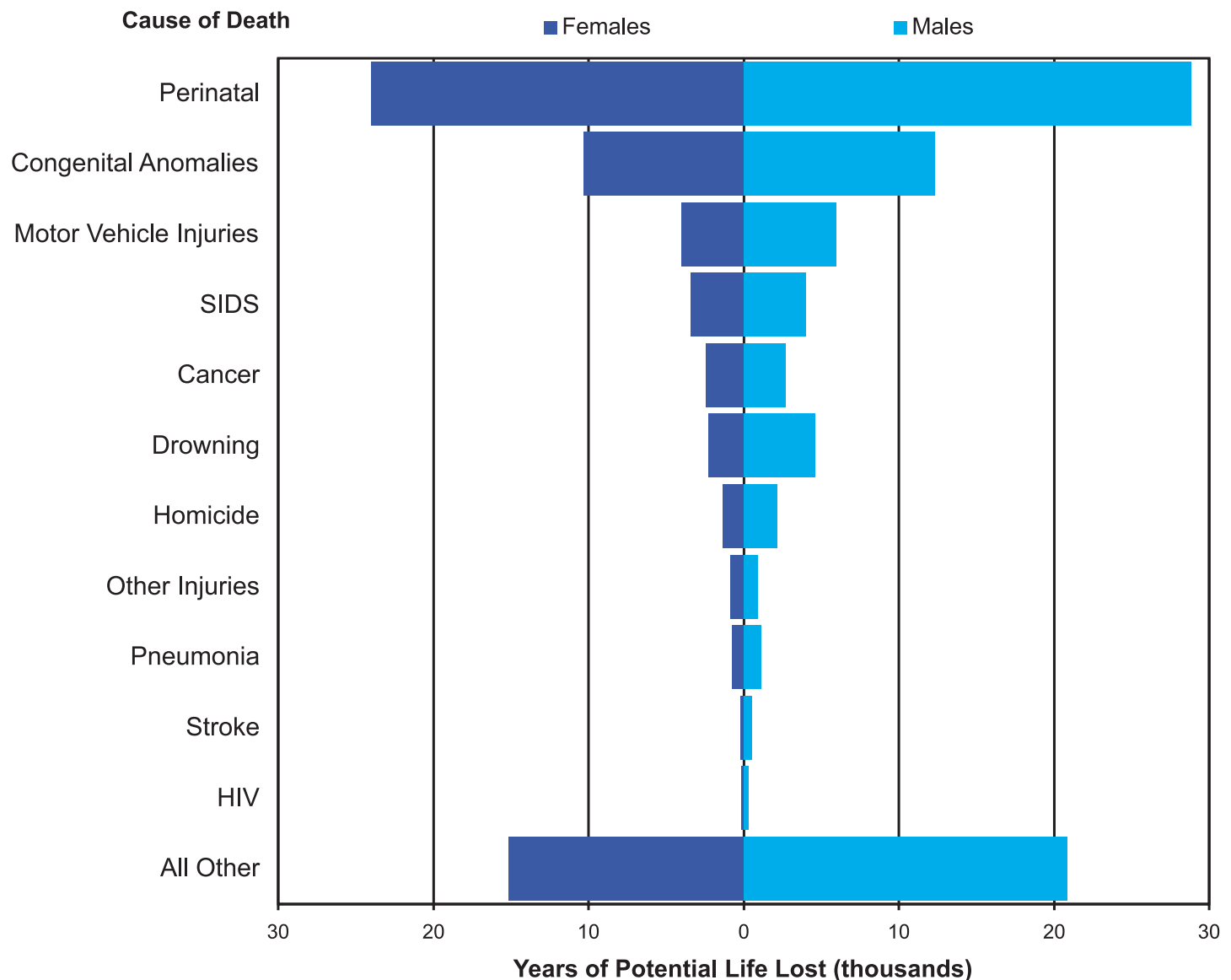
	Females				Males			
	Non-White		White		Non-White		White	
	Years	Percent	Years	Percent	Years	Percent	Years	Percent
All Causes of Death	114,444	--	314,424	--	163,132	--	579,694	--
All Cancers	20,178	100.0	100,532	100.0	20,712	100.0	120,677	100.0
Childhood Cancers (1)	1,086	5.4	1,321	1.3	478	2.3	2,242	1.9
Cancer Site								
Lung & Bronchus	2,499	12.4	26,929	26.8	5,675	27.4	39,951	33.1
Prostate					1,242	6.0	3,604	3.0
Breast	5,389	26.7	19,637	19.5				
Colorectal	1,760	8.7	7,140	7.1	1,642	7.9	10,864	9.0
Bladder	148	0.7	662	0.7	183	0.9	2,393	2.0
Head & Neck	348	1.7	1,615	1.6	1,080	5.2	6,093	5.1
Non-Hodgkins	819	4.1	3,162	3.1	1,060	5.1	5,683	4.7
Melanoma			2,194	2.2			3,523	2.9
Cervix	1,523	7.5	4,083	4.1				
All Other Cancers	7,680	38.1	35,116	34.9	9,680	46.7	48,415	40.1

(1) Years lost from childhood cancers are also included in totals for specific cancer sites.

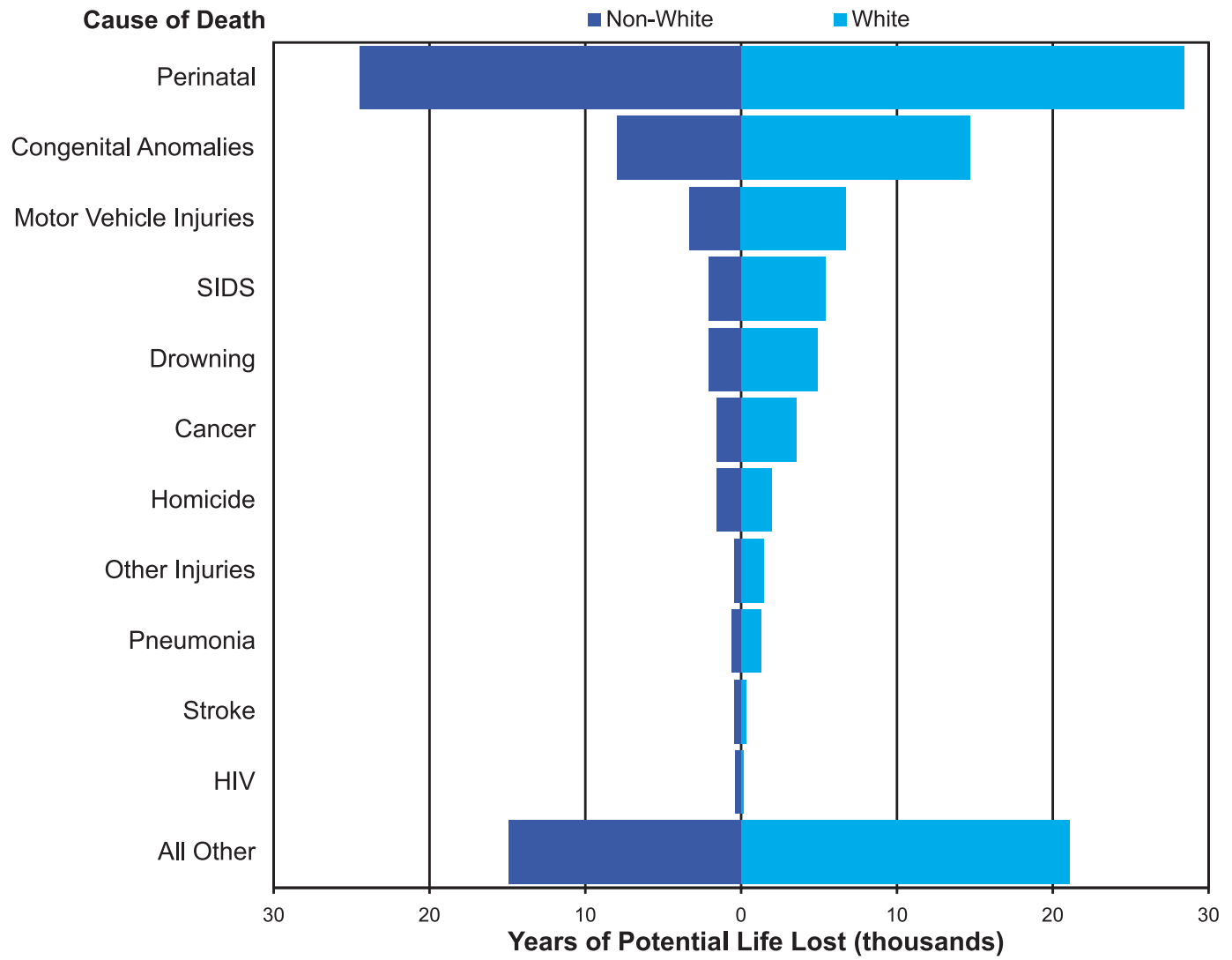
## Children

- Childhood cancer YPLL was highest for non-White females at 5.4 percent and lowest for White females at 1.3 percent.
- Cancer deaths in non-White children contributed 3.8 percent to the total YPLL of non-Whites, twice the percentage of cancer YPLL for White children (1.6 percent).
- The cancer YPLL in non-White children was about half the cancer YPLL in White children.
- Non-White female children had more than twice the number of years of life lost due to cancer as non-White male children; White females under age 15 had about 60 percent of the YPLL of White males.

**Figure 19.1 Years of Potential Life Lost, Children Age 0-14 by Sex, Florida, 2000**



**Figure 19.2 Years of Potential Life Lost, Children Age 0-14 by Race, Florida, 2000**



## TOBACCO-RELATED CANCERS

Tobacco-related cancer sites include lung and bronchus, esophagus, pancreas, cervix, bladder, kidney, and head and neck.

Approximately 70 percent of deaths due to these cancers are attributable to tobacco use, according to the 1997 and 1998 Smoking Attributable Mortality Report. If tobacco use were eliminated, about 70 percent of deaths due to these cancers would also be eliminated. In 2000, 30,520 cancers were diagnosed in sites related to tobacco use, and 17,414 deaths occurred from cancer in these sites. About 21,364, or 22.5 percent of the new cancer cases, and 12,190, or 31.9 percent of all cancer deaths in Florida, can be attributed to tobacco.

### INCIDENCE

- Among males, age-adjusted incidence rates for Whites and non-Whites were similar until 1993. Since then, non-White incidence rates have declined by 34 percent, from 211 per 100,000 to 140 per 100,000 in 2000. During the same time, incidence rates for Whites decreased less than 4 percent.
- In non-White females, age-adjusted incidence rates decreased by 17 percent from 1981 to 2000 and increased by 34 percent in White females.

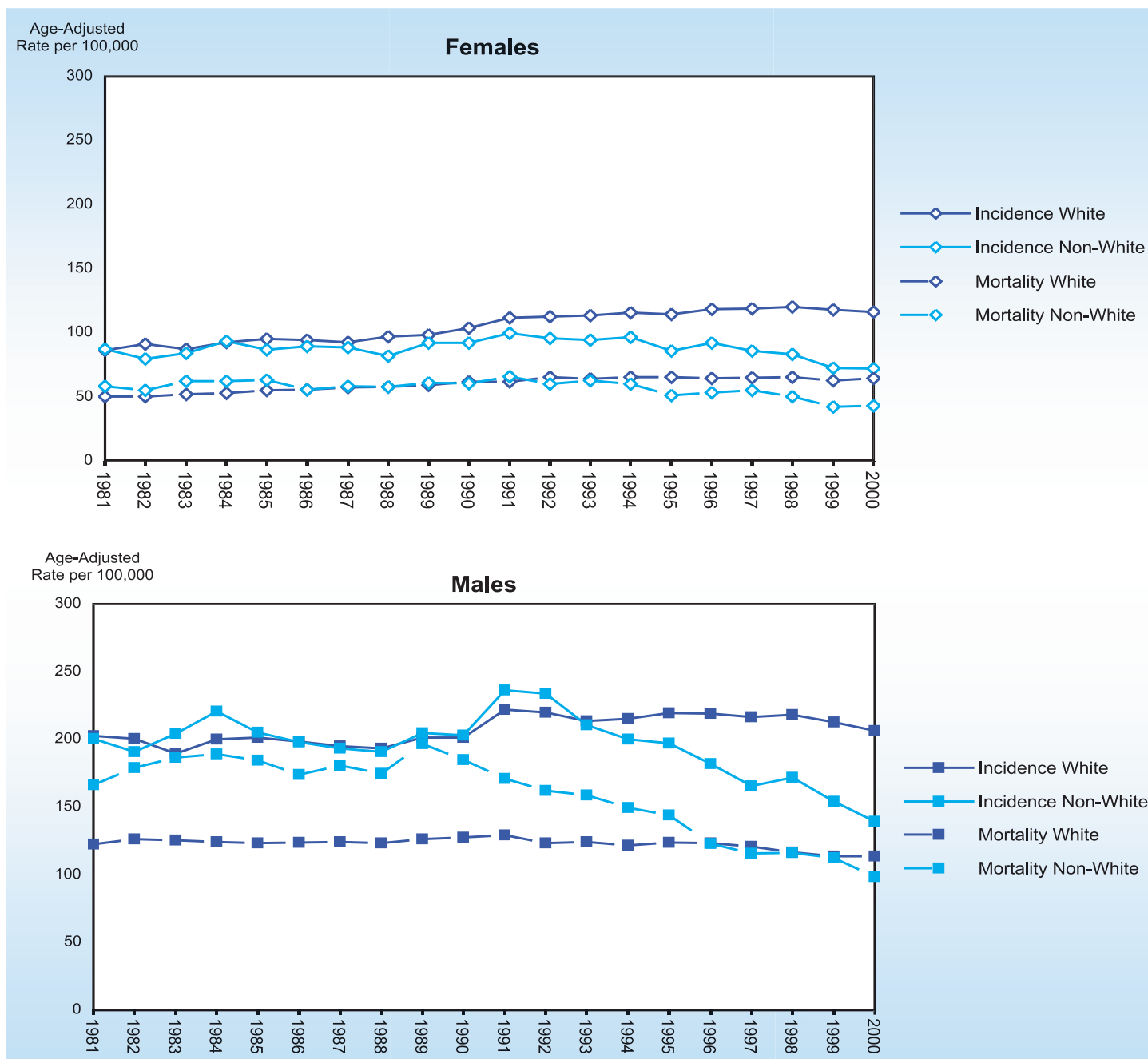
### MORTALITY

Mortality rates for tobacco-related cancers are influenced by incidence rates, the stage of cancer at diagnosis, and the timing and quality of medical intervention and treatment. Over the decade of the 1980s, non-Whites had higher mortality rates from tobacco-related cancers, despite incidence rates for tobacco-related cancers similar to Whites. Since the peaks in the years from 1989 to 1991, both incidence rates and mortality rates for tobacco-related cancers in non-Whites have decreased. The previous disadvantage of non-White Floridians compared to Whites, in terms of the stage at diagnosis and quality of intervention and treatment for tobacco-related cancers, appears to be diminishing.

- Mortality rates for tobacco-related cancers have decreased 26 percent in non-White females since 1981 and by 41 percent in non-White males. Mortality rates from these cancers decreased only 7 percent in White males and increased 28 percent in White females.
- Mortality rates for tobacco-related cancers in non-White males were higher than in White males until 1995; at which point non-White rates became lower than White rates. A similar, though less pronounced change, occurred in females with the turning point in 1987.



**Figure 20. Age-Adjusted Incidence and Mortality Rates for Tobacco-Related Cancers (1) by Sex and Race, Florida 1981-2000**



(1) Tobacco-related cancers are: lung and bronchus, pancreas, esophagus, bladder, kidney, head and neck, and cervix.

## APPENDICES

### Appendix A.1 Population by Sex, Race, and Age Group, Florida, 2000

	Total	Female	Male
Florida Total	16,075,747	8,230,514	7,845,233
0-19	4,087,957	1,991,010	2,096,947
20-44	5,513,425	2,739,338	2,774,087
45-64	3,664,495	1,909,460	1,755,035
65-74	1,452,901	783,338	669,563
75+	1,356,969	807,368	549,601
NW Total	3,548,668	1,818,609	1,730,059
0-19	1,278,944	628,428	650,516
20-44	1,413,589	718,869	694,720
45-64	619,415	330,192	289,223
65-74	143,518	81,469	62,049
75+	93,202	59,651	33,551
W Total	12,527,079	6,411,905	6,115,174
0-19	2,809,013	1,362,582	1,446,431
20-44	4,099,836	2,020,469	2,079,367
45-64	3,045,080	1,579,268	1,465,812
65-74	1,309,383	701,869	607,514
75+	1,263,767	747,717	516,050

NW = Non-White / W = White

## Appendix A.2 Population by County, Florida, 2000

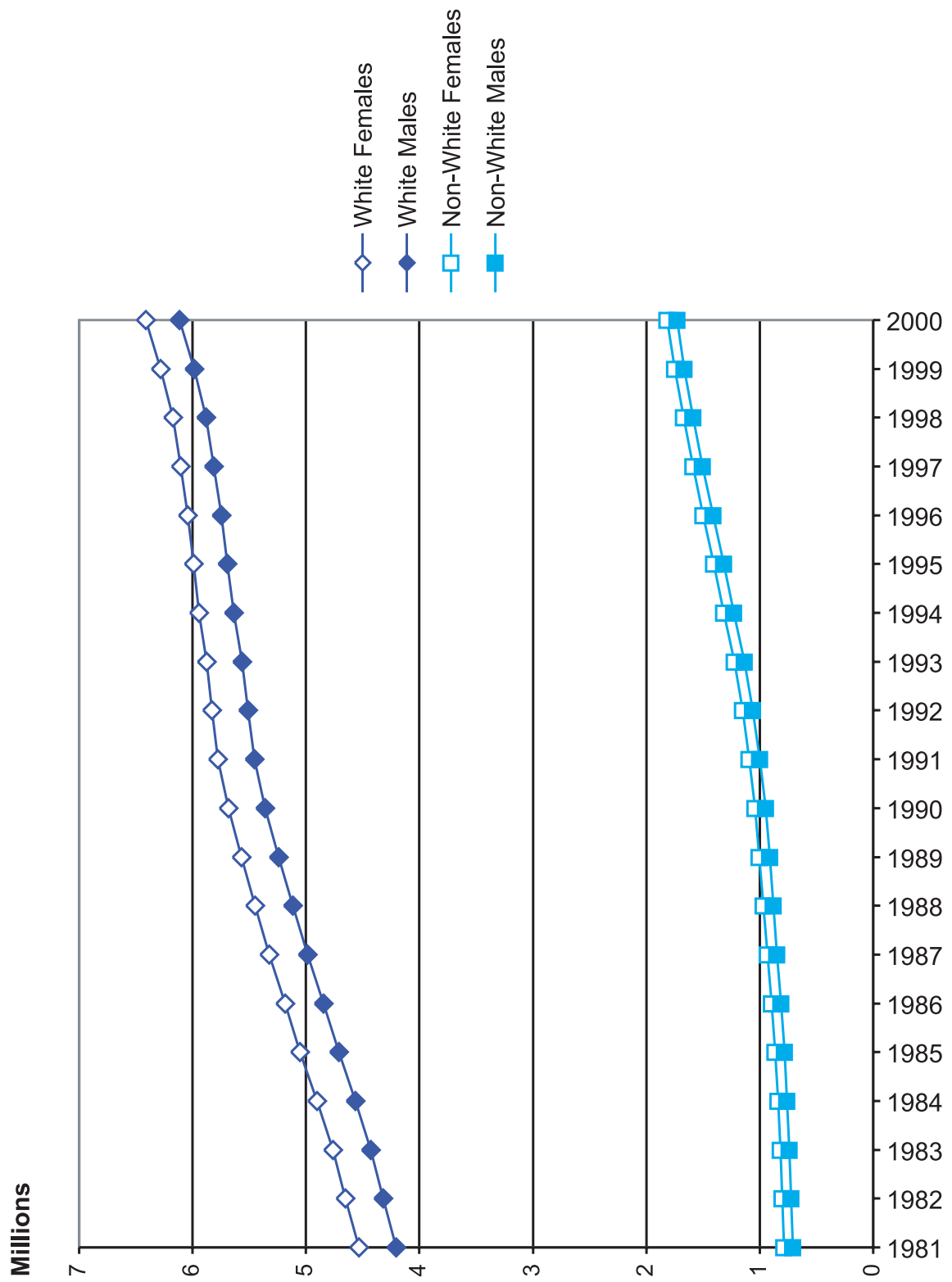
<b>County</b>	<b>Population</b>	<b>County</b>	<b>Population</b>
Florida	16,075,747	Lafayette	7,071
Alachua	219,359	Lake	212,951
Baker	22,399	Lee	444,427
Bay	148,674	Leon	240,565
Bradford	26,117	Levy	34,635
Brevard	478,503	Liberty	7,043
Broward	1,631,096	Madison	18,772
Calhoun	13,049	Manatee	265,701
Charlotte	142,401	Marion	260,415
Citrus	118,691	Martin	127,275
Clay	141,537	Monroe	79,727
Collier	254,609	Nassau	58,144
Columbia	56,715	Okaloosa	171,287
Miami-Dade	2,262,674	Okeechobee	35,998
DeSoto	32,375	Orange	905,986
Dixie	13,896	Osceola	174,357
Duval	782,790	Palm Beach	1,137,763
Escambia	294,899	Pasco	346,911
Flagler	50,650	Pinellas	923,180
Franklin	11,102	Polk	486,991
Gadsden	45,080	Putnam	70,528
Gilchrist	14,532	Saint Johns	124,639
Glades	10,592	Saint Lucie	194,018
Gulf	13,713	Santa Rosa	118,602
Hamilton	13,462	Sarasota	328,052
Hardee	26,973	Seminole	368,224
Hendry	36,268	Sumter	54,310
Hernando	131,346	Suwannee	35,054
Highlands	87,655	Taylor	19,289
Hillsborough	1,006,150	Union	13,461
Holmes	18,608	Volusia	445,621
Indian River	113,744	Wakulla	23,130
Jackson	46,974	Walton	41,062
Jefferson	12,864	Washington	21,061

**Appendix A.3**  
**2000 United States Standard Million Population By Age Group**

<b>Age Group</b>	<b>Population</b>	<b>Age Group</b>	<b>Population</b>
0-4	69,135	5-9	72,533
10-14	73,032	15-19	72,169
20-24	66,478	25-29	64,529
30-34	71,044	35-39	80,762
40-44	81,851	45-59	72,118
50-54	62,716	55-59	48,454
60-64	38,793	65-69	34,264
70-74	31,773	75-79	26,999
80-84	17,842	85 and older	15,508

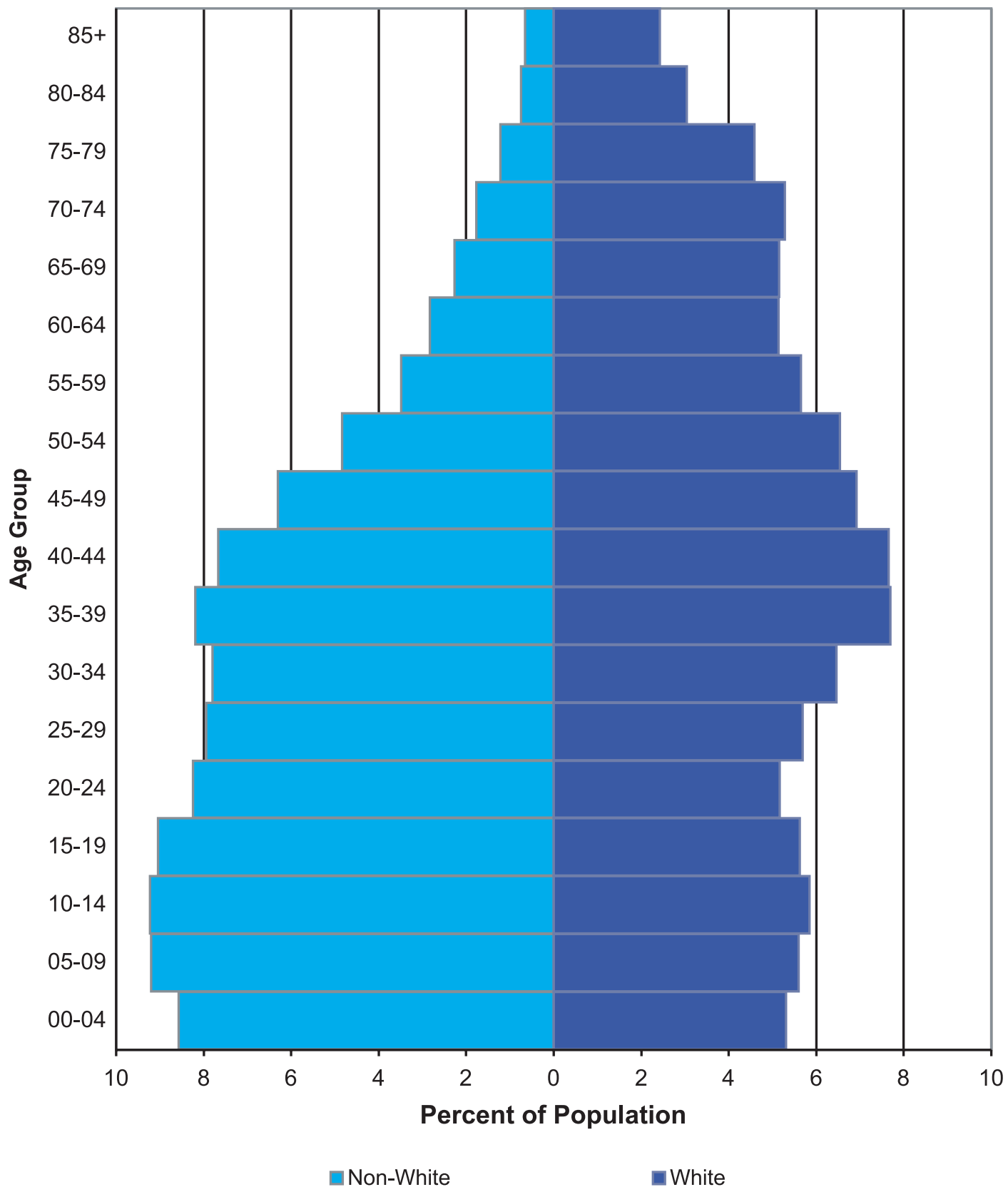
## Appendix B

### Population by Sex and Race, Florida, 1981-2000



## Appendix C

Percentage of Total Population for Races by Age Group  
Florida, 2000



## Appendix D Incidence and Mortality Codes for Cancer Sites

FCDS Site Number	Primary Site	Incidence ICD-O-3 Codes	Mortality ICD-10 Codes
<b>HEAD AND NECK</b>			
1	Lip	C00.0 - C00.9	C00.0 - C00.9
2	Tongue	C01.9 - C02.9	C01.9 - C02.9
3	Salivary Glands	C07.9 - C08.9	C07.9 - C08.9
4	Floor of Mouth	C04.0 - C04.9	C04.0 - C04.9
5	Gum and Other Mouth	C03.0 - C03.9, C05.0 - C05.9, C06.0 - C06.9	C03.0 - C03.9, C05.0 - C05.9 C06.0 - C06.9, C46.4
6	Nasopharynx	C11.0 - C11.9	C11.0 - C11.9
7	Tonsil	C09.0 - C09.9	C09.0 - C09.9
8	Oropharynx	C10.0 - C10.9	C10.0 - C10.9
9	Hypopharynx	C12.9, C13.0 - C13.9	C12.9, C13.0 - C13.9
10	Other Buccal Cavity and Pharynx	C14.0, C14.2 - C14.8	C14.0, C14.2, C14.8
34	Nasal Cavities, Middle Ear and Accessory Sinuses	C30.0 - C30.1, C31.0 - C31.9	C30.0 - C30.1, C31.0 - C31.9
35	Larynx	C32.0 - C32.9	C32.0 - C32.9
<b>COLORECTAL</b>			
14	Cecum	C18.0	C18.0
15	Appendix	C18.1	C18.1
16	Ascending Colon	C18.2	C18.2
17	Hepatic Flexure	C18.3	C18.3
18	Transverse Colon	C18.4	C18.4
19	Splenic Flexure	C18.5	C18.5
20	Descending Colon	C18.6	C18.6
21	Sigmoid Colon	C18.7	C18.7
22	Large Intestine, NOS	C18.8 - C18.9, C26.0	C18.8 - C18.9
23	Rectosigmoid Junction	C19.9	C19.9
24	Rectum	C20.9	C20.9

## Appendix D Incidence and Mortality Codes for Cancer Sites

FCDS Site Number	Primary Site	Incidence ICD-O-3 Codes	Mortality ICD-10 Codes
<b>LUNG &amp; BRONCHUS</b>			
36	Lung and Bronchus	C34.0 - C34.9	C34.0 - C34.9
<b>MELANOMA</b>			
41	Melanoma of the Skin	C44.0 - C44.9 Histology 8720-8790	C43.0 - C43.9
<b>BREAST</b>			
43	Breast	C50.0 - C50.9	C50.0 - C50.9
<b>CERVIX</b>			
44	Cervix Uteri	C53.0 - C53.9	C53.0 - C53.9
<b>PROSTATE</b>			
51	Prostate Gland	C61.9	C61.9
<b>BLADDER</b>			
55	Urinary Bladder	C67.0 - C67.9	C67.0 - C67.9, D09.0
<b>NON-HODGKIN'S LYMPHOMA</b>			
66	NHL Nodal	Histology 9590-9596, 9678-9680, 9684, 9687, 9689-9691, 9695, 9698-9702, 9705, 9708-9709, 9714-9719, 9727-9729, 9823, 9827 For Sites C02.4, C09.8, C09.9, C11.1, C14.2, C37.9, C42.2, C77.0 - C77.9	C82.0 - C85.9, B21.1, B21.2
67	NHL Extra-nodal	Histology 9590-9596, 9670-9671, 9673, 9675, 9678-9680, 9684, 9687, 9689-9691, 9695, 9698-9702, 9705, 9708-9709, 9714-9719, 9727-9729 For Sites C000-C023, C025-C097, C100-C110, C380-C421, C423-C769, C780-C999	Not Available



## Appendix D Incidence and Mortality Codes for Cancer Sites

FCDS Site Number	Primary Site	Incidence ICD-O-3 Codes	Mortality ICD-10 Codes
<b>OTHER SITES</b> (Figures 1 and 11)			
11	Esophagus	C15.0 - C15.9	C15.0 - C15.9
12	Stomach	C16.0 - C16.9	C16.0 - C16.9
26	Liver	C22.0	C22.0 - C22.9
30	Pancreas	C25.0 - C25.9	C25.0 - C25.9
45	Corpus Uteri	C54.0 - C54.9	C54.0 - C54.9
47	Ovary	C56.9	C56.9
56	Kidney and Renal Pelvis	C64.9, C65.9	C64.9, C65.9
62	Thyroid Gland	C73.9	C73.9
68	Multiple Myeloma	Histology 9731-9732, 9734	C90.0, C90.2
<b>BRAIN AND NERVOUS SYSTEM</b> (Figures 1 and 11)			
60	Brain	C71.0 - C71.9 Histology: 8000-9049, 9056-9139, 9141-9529, 9540-9589	C71.0 - C71.9
61	Other Nervous System	a) C71.0 - C71.9 Histology 9530-9539 b) C70.0- C70.9, C72.0-C72.9 Histology 8000-9049, 9056-9139, 9141-9589	C70.0 - C70.9, C72.0 - C72.9
<b>LEUKEMIA</b> (Figures 1 and 11)			
69	Acute Lymphocytic	Histology 9826, 9835-9837	C91.0
70	Chronic Lymphocytic	Histology 9823 For Sites C42.0, C42.1, C42.4	C91.1
71	Other Lymphocytic	Histology 9820, 9832-9834, 9940	C91.2, C91.3, C91.7, C91.9
72	Acute Myeloid	Histology 9840, 9861, 9866, 9867, 9871-9874, 9895-9897, 9910, 9920	C92.0, C92.5
73	Chronic Myeloid	Histology 9863, 9875, 9876, 9945, 9946	C92.1
74	Other Myeloid/Monocytic	Histology 9860, 9930	C92.2, C92.4, C92.7,

## Appendix D Incidence and Mortality Codes for Cancer Sites

FCDS Site Number	Primary Site	Incidence ICD-O-3 Codes	Mortality ICD-10 Codes
75	Acute Monocytic	Histology 9891	C93.0
76	Other Acute	Histology 9801, 9805, 9931	C93.1
77	Aleukemic, Subleukemic and NOS	a) Histology 9733, 9742, 9800, 9831, 9870, 9948, 9963, 9964 b) Histology 9827 For Site C420, C421, C424	C93.2, C93.7, C93.9
<b>ALL OTHER CANCERS</b> (Figures 1 and 11)			
13	Small Intestine	C17.0 - C17.9	C17.0 - C17.9
25	Anus, Anal Canal and Anorectum	C21.0 - C21.2, C21.8	C21.0, C21.1, C21.8
27	Intrahepatic Bile Duct	C22.1	C22.1
28	Gall Bladder	C23.9	C23.9
29	Other Biliary	C24.0 - C24.9	C24.0 - C24.9
31	Retroperitoneum	C48.0	C48.0
32	Peritoneum, Omentum and Mesentery	C48.1 - C48.2	C48.1 - C48.2
33	Other Digestive Organs	C26.8 - C26.9, C48.8	C26.0 - C26.9, C48.8
37	Pleura	C38.4	C38.4
38	Trachea, Mediastinum and Other Respiratory Organs	C33.9, C38.1 - C38.3, C38.8, C39.0, C39.8, C39.9	C33.9, C38.1 - C38.3, C38.8, C39.0, C39.9, C45.7, C45.9
39	Bones and Joints	C40.0 - C41.9	C40.0 - C41.9
40	Soft Tissue (Including Heart)	C38.0, C47.0 - C47.9, C49.0 - C49.9	C38.0, C45.2, C46.1, C47.0 - C47.9, C49.0 - C49.9
46	Uterus, NOS	C55.9	C55.9
48	Vagina	C52.9	C52.9
49	Vulva	C51.0 - C51.9	C51.0 - C51.9
50	Other Female Genital Organs	C57.0 - C58.9	C57.0 - C58.9
52	Testes	C62.0 - C62.9	C62.0 - C62.9

## Appendix D Incidence and Mortality Codes for Cancer Sites

FCDS Site Number	Primary Site	Incidence ICD-O-3 Codes	Mortality ICD-10 Codes
53	Penis	C60.0 - C60.9	C60.0 - C60.9
54	Other Male Genital Organs	C63.0 - C63.9	C63.0 - C63.9
57	Ureter	C66.9	C66.9
58	Other Urinary Organs	C68.0 - C68.9	C68.0 - C68.9
59	Eye and Orbit	C69.0 - C69.9	C69.0 - C69.9
63	Other Endocrine (Including Thymus)	C37.9, C74.0 - C74.9, C75.0 - C75.9	C37.9, C74.0 - C74.9, C75.0 - C75.9
64	Hodgkin's Lymphoma Nodal	Histology 9650-9667 For Sites C02.4, C09.8, C09.9, C11.1, C14.2, C37.9, C42.2, C77.0 - C77.9	C81.0 - C81.9
65	Hodgkin's Extra-nodal	Histology 9650-9667 For Sites C000-C023, C025-C097, C100-C110, C112-C141, C143-C378, C380-C421, C423-C769, C780-C999	Not Available
78	Mesothelioma	Histology 9150-9055	C94.0 , C95.0
79	Kaposi Sarcoma	Histology 9140	C94.1 , C95.1
80	Miscellaneous	All other	All other

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