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## Glossary

*African American* – The race rates for African Americans include all cases classified as African American regardless of ethnicity (Hispanic origin).

*Age* – The age of the patient is in completed years (rounded) at the time of diagnosis or death.

*Age-Adjusted Rate* – Since cancer rates tend to vary with age, and since populations vary with respect to their age distribution, incidence and mortality rates are age-adjusted to allow comparison of rates between different populations with different age distributions. In this report, age-adjusted rates are calculated by the direct method, using the age distribution of the 2000 United States standard population. All age-adjusted rates are expressed per 100,000 individuals per year and include rates of invasive cancer only.

*Age-Specific Incidence Rate* – The number of new cases diagnosed per 100,000 individuals over a specified time period for a specified age group. Age-specific rates show the variation in cancer incidence by age group and are presented for males, females, and for the total population. Age groups are divided into five-year age groupings.

*American Indian/Alaskan Native* – The race rates for American Indian/Alaskan Natives include all cases classified as American Indian/Alaskan Native regardless of ethnicity (Hispanic origin).

*APC (Trend)* – Average Annual Percent Change, or trend, is the average percent change in the annual rate among years for time period analyzed.

*Asian/Pacific Islander* – The race rates for Asian/Pacific Islander include all cases classified as Asian or Pacific Islander regardless of ethnicity (Hispanic origin).

*Benign* – A tumor that has abnormal growth without cancerous behavior is considered benign.

*Cancer Site* – The human organ or system in which the malignancy originates; the anatomical site.

*Carcinogen* – A substance scientifically proven to cause cancer.

*CDC* – Centers for Disease Control and Prevention is a federal agency that develops and applies disease prevention and control, environmental health, health promotion and education activities to improve the health of the people of the United States.

*Childhood Cancer* – Cancer occurring in an individual between the ages of 0 and 14 is classified as a childhood cancer.

*Crude Rate* – The number of new cases of cancer, or cancer deaths, during the year expressed as a rate per 100,000 persons in the population, without regard to the age distribution of the population.

*Current Trend* – Trend based on the latest five-years of available data.

*Ethnicity* – Rates based on ethnicity are of Hispanic origin only.

*Fecal Occult Blood Test (FOBT)* – A chemical test to detect blood in stool, which is a sign of possible colorectal cancer.

*Frontier County* – Frontier counties are rural counties with a population of < 6 people per square mile.

*Healthy People 2010* – Healthy People 2010 is the prevention agenda for the United States. It is a statement of national health objectives designed to identify the most significant preventable threats to health and to establish national goals to reduce these threats.

*Hispanic* – An ethnic category that is not mutually exclusive from whites or other racial groups.

*Histology* – Also known as morphology, this describes the cell type of the tumor, its structure, and biologic activity.

*Historical Trend* – Trend based on all available years of data.

*ICCC* – The International Classification of Childhood Cancer (ICCC) is based on tumor morphology rather than, as for adults, the site of the tumor for children aged 0-14.

*ICD-9* – The Ninth Revision of the International Classification of Diseases. Mortality data for years 1996-1998 are recorded using ICD-9. This classification system is not directly compatible with the ICD-O classification system used for cancer reporting.

*ICD-10* – The 10th Revision of the International Classification of Diseases. Mortality data recording converted to ICD-10 with death year 1999. This classification system mirrors the ICD-O system used for cancer reporting.

*ICD-O-3* – The Third Edition of the International Classification of Diseases for Oncology. A further classification of the ICD system designed for use specifically for cancer. Cancer incidence is reported to the Registry using the ICD-O system. The ICD-10 cancer site classifications are based on this system.

*Incidence* – The number of new cases of a given type of cancer diagnosed during a specified time period. Cancer incidence is not the same as the number of Oregonians diagnosed with cancer since one person could be diagnosed with more than one cancer.

*In Situ Cancer* – An *in situ* cancer is a tumor that fulfills all microscopic criteria for malignancy but does not invade or penetrate surrounding tissue. *In situ* cancers are not included in the calculation of incidence rates and thus are not presented in incidence tables, with the exception of *in situ* bladder cancer. However, *in situ* cancers are classified as early stage and are included in the sections presenting stage at diagnosis.

*Invasive Cancer* – A malignant tumor that has penetrated surrounding tissue. These are cancers diagnosed in the local, regional, or metastatic stages – no *in situ* diagnoses with the exception of urinary bladder cancers.

*Localized* – A cancer of localized staged cancer is a tumor that is invasive but remains restricted to the site of origin. Localized cancers are classified as early stage cancers.

*Leukemias* – Cancers that develop in blood-forming tissue.

*Lymphomas* – Cancers that develop from cells in the lymphatic system

*Malignant* – A tumor made up of cancer cells of the type that can spread to other parts of the body is considered malignant.

*Mammography* – The use of x-rays to create a picture of the breast (mammogram) that can show signs of breast cancer before it can be felt.

*Metastatic/Distant* – The most advanced stage of disease in which cells from the original tumor break away, travel to other parts of the body, and continue to grow. Although the cancer has spread to an additional site or sites, it is still named after the original site of the tumor. These cancers are classified as late stage cancers.

*Metro County* – A county with at least one major city (50,000 people or more) or an urbanized area with a population of at least 100,000. Counties that experience a high degree of social and economic “attachment” to a metropolitan area are also considered part of that metropolitan area.

*Morbidity* – The incidence or prevalence (i.e., the number of people living with cancer) of a disease in a population.

*Mortality* – The number of deaths with cancer as the underlying cause of death during a specified time period.

*M/I Ratio* – The M/I (mortality-to-incidence) ratio provides a measure of disease severity. The M/I ratio is the number of deaths divided by the number of invasive cases (for a particular cancer). The closer a value is to 1.0, the poorer the prognosis for that cancer.

*NAACCR (North American Association of Central Cancer Registries)* – NAACCR is a professional organization that develops and promotes uniform data standards for cancer registration; provides education and training; certifies population-based registries; aggregates and publishes data from central cancer registries; and promotes the use of cancer surveillance data and systems for cancer control and epidemiologic research, public health programs, and patient care to reduce the burden of cancer in North America.

*Non-Metro County* – A county without a major city (50,000 people or more), not in an urbanized area with a population of at least 100,000, and with a population density > 6 persons per square mile.

*NPCR (National Program of Cancer Registries)* – NPCR was established by the Centers for Disease Control and Prevention (with the passage of Public Law 102-515). NPCR collects information on cancer cases from registries covering 96% of the nation’s population.

*Papanicolaou (Pap) Smear* – The collection of cells from the cervix (the lower, narrow end of the uterus that forms a canal between the uterus and vagina) and their examination under microscope.

*Race* – There are four race categories used in this report: White, Non-Hispanic, African American, American Indian/Alaskan Native, and Asian/Pacific Islander.

*Regional* – An invasive malignant tumor that has spread by direct extension to adjacent organs or tissues and/or has spread to regional lymph nodes, but appears to have spread no further. Regional cancers are classified as late stage cancers.

*Routine Cancer Screening* – For purposes of analysis, routine cancer screening is defined as follows:

*Breast Cancer Screening* - Routine mammography is defined as women, ages 52-64, who received a mammogram within the past two years. A minimum age of 52 is used to allow women age 50 and 51 one or two years to receive their first routine mammogram.

*Cervical Cancer Screening* - Routine cervical cancer screening is defined as all women 18-64 who have a cervix and have received a Pap test within the past three years.

*Colorectal Cancer Screening* - Routine colorectal screening is defined as persons age 50 and older who have 1) received FOBT within the last year and sigmoidoscopy within the last five years (the preferred screening method of the American Cancer Society), or 2) who have received FOBT within the last year and/or sigmoidoscopy within the last five years.

*SEER (Surveillance, Epidemiology, and End Results)* – A program of the National Cancer Institute, SEER is an authoritative source of information on cancer incidence and survival in the United States.

*Sigmoidoscopy/Proctosigmoidoscopy* – An exam of the rectum and the lower part of the colon with a thin, flexible, lighted scope to find polyps, abnormal areas, and tumors.

*Stage at Diagnosis* – The degree to which a tumor has spread from its site of origin at the time of diagnosis. Cancer stage is often related to survival and is used to select appropriate treatment. Patients with early stage disease have better long-term survival. Detecting cancers at an early stage may lead to a reduction in mortality. The cancer stages, in order of increasing spread, are *in situ*, localized, regional, and distant. *In situ* and localized tumors are referred to as early stage tumors; regional and distant tumors are referred to as late stage tumors. A number of cancers are also reported as unstaged (unknown stage at diagnosis).

*Unstaged/Unknown* – Insufficient information is available to determine the stage of disease at the time of diagnosis, or the case was reported with missing stage data. Cancer cases are often unstaged because the patient's current medical situation contraindicates clinical workup required to stage the case (often due to advanced age or comorbid conditions) or because the patient decides to forgo standard treatment or procedures. Unstaged/unknown cases are sometimes classified as late stage diagnoses, but they are removed from the stage at diagnoses analysis for this report.

*White, Hispanic* – The race rates for White, Hispanic include only those cases classified as of Hispanic origin that are also classified as white.

*White, Non-Hispanic* – The race rates for White, Non-Hispanic include only those cases classified as White that are also classified as non Hispanic origin.