

VII. Selected Sites

F. Prostate Cancer

Age is the most important risk factor for prostate cancer with 65% of the diagnoses in men age 65 and older. While screening and treatment of prostate cancer are available, the costs (in adverse events such as unnecessary surgery with side effects such as incontinence and impotence) versus benefits are still the subject of debate. Currently, there is no consensus for public health recommendations regarding prostate cancer screening except to encourage men to discuss options with their health care providers.

Prostate cancer is the most common cancer diagnosed and the 2nd leading cause of cancer-related death among Oregon men. Oregon's prostate cancer mortality rate of 31.3 for 2001 was 9% above the Healthy People 2010 target of 28.8 deaths per 100,000 men.

A brief overview of Oregon's prostate cancer data shows the following: (See Figure 69.)

1. In 2001, 2,657 Oregon men were diagnosed with prostate cancer—all of which were invasive. There were 434 Oregon men who died from prostate cancer.
2. Prostate cancer incidence in Oregon has increased 3% annually in the past five years. Nationally, there has been a 2% yearly increase. However, prostate cancer mortality rates have declined 4% per year during this period for both Oregon and the nation.
3. Oregon's age-adjusted 2001 incidence rate of 167.6 was 2% lower than the national rate of 170.6. The Oregon mortality rate, however, was 3% higher than the national rate.
4. Of the 41 states with central registries meeting national data quality standards in 2000, Oregon ranked 23rd for prostate cancer incidence. Of the 50 states, Oregon ranked 27th in prostate cancer mortality in 2000.
5. Prostate cancer is the leading cancer incidence site for males of all race/ethnic groups except American Indians/Alaskan Natives (AI/AN). Prostate cancer is the 2nd most common cancer site for AI/AN.
6. The majority, 84%, of prostate cancers were diagnosed at an early (*in situ* or localized) stage in 2001.

7. During 1997-2001, Oregon's M/I ratio for prostate cancer was 0.18, suggesting a relatively good prognosis for this disease. Prostate cancer is responsible for 188 YPLL each year among Oregon men.

Figure 69

Prostate Cancer Fast Facts
Oregon 2001**Male**

Cancer Incidence

All Cases Total	2,657
In situ	0
Localized	2,016
Regional	299
Distant	105
Unstaged	237

Invasive Rates

Oregon Crude	154.4
Oregon Age-adjusted	167.6
Oregon Annual Current Trend (5-Year)	+2.5
US Age-adjusted ¹	170.1
US Annual Trend ¹	*2.3

Cancer Mortality

Total Deaths	434
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Mortality Rates

Oregon Crude	25.2
Oregon Age-adjusted	31.3
Oregon Annual Current Trend (5-Year)	*-3.9
US Age-adjusted ²	30.4
US Annual Trend ¹	*-4.0

Prognosis & Burden³

Prognosis: M/I Ratio	0.18
Burden: YPLL before age 65	188

* Indicates a statistically significant trend

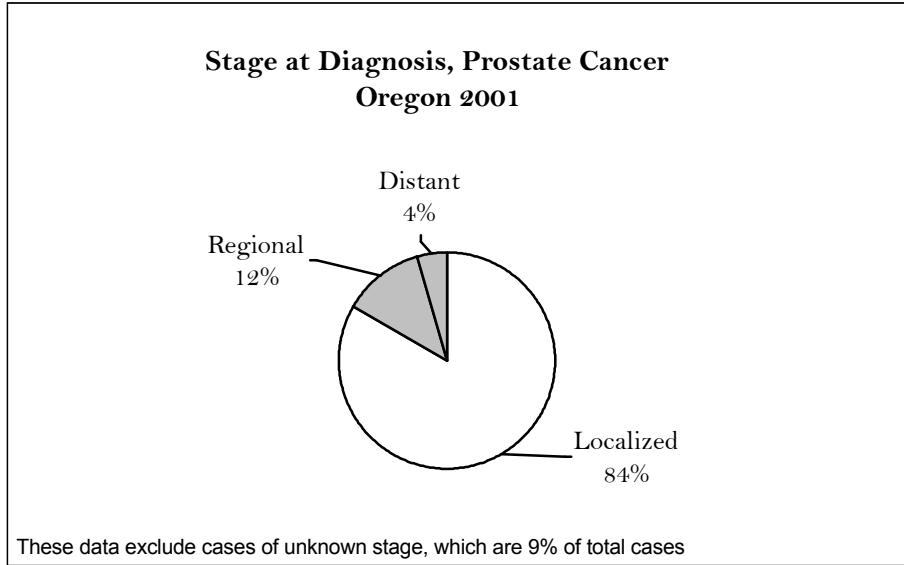
¹ Annual Report to Nation on Cancer; 2002, annual average age-adjusted rate 96-00² 2000 mortality rate calculated from CDC Wonder: <http://wonder.cdc.gov>³ Calculations based on combined years 1997 - 2001

M/I = Mortality-to-Incidence Ratio

YPLL = Years of Potential Life Lost

Stage at Diagnosis

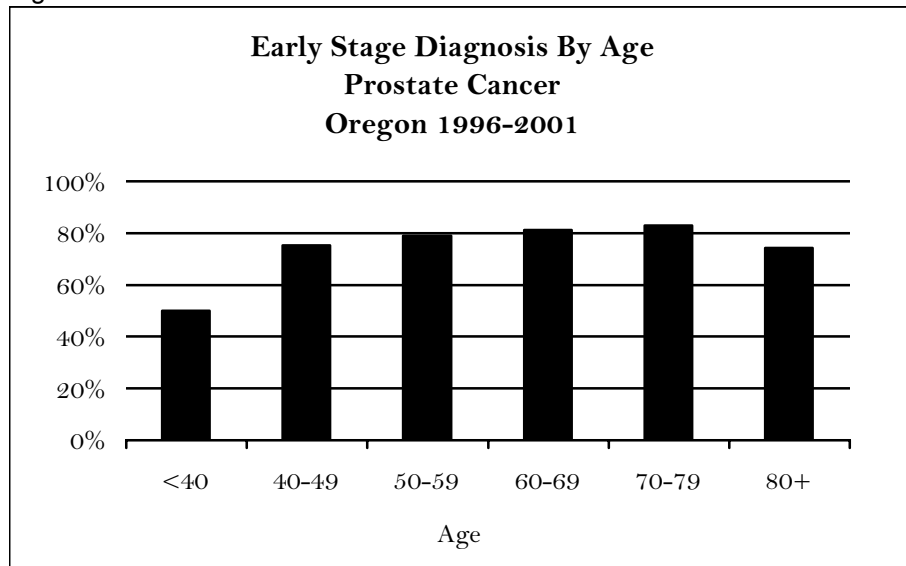
Figure 70



The vast majority of prostate cancer diagnoses in 2001 were made at an early stage. (See Figure 70.) This represents a 6% increase in the percentage diagnosed at an early stage since 1996.

Although there are no national screening recommendations for prostate cancer, in 2001, 38% of Oregon men over 40 reported having a PSA test within the last year.

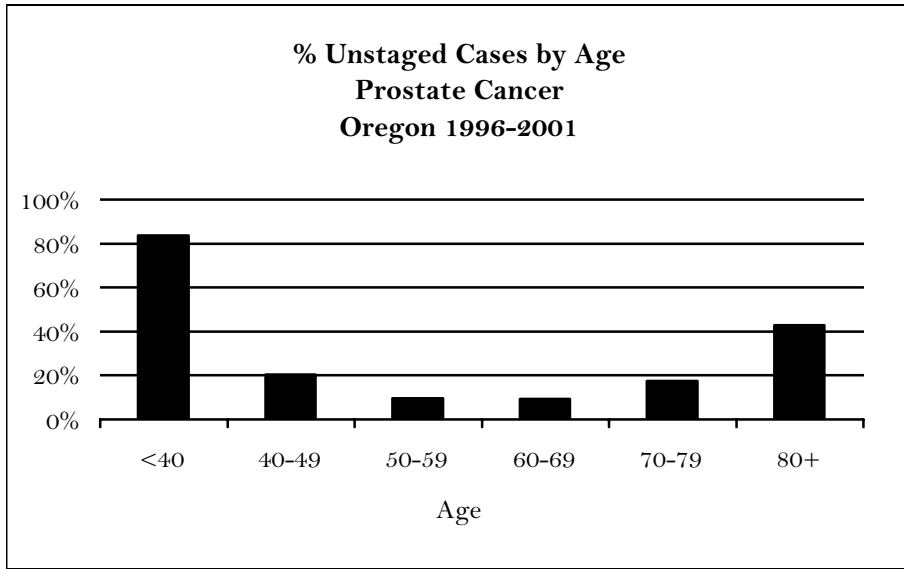
Figure 71



The percentage of prostate cases diagnosed at an early stage increases with age until the 80 and older group. (See Figure 71.)

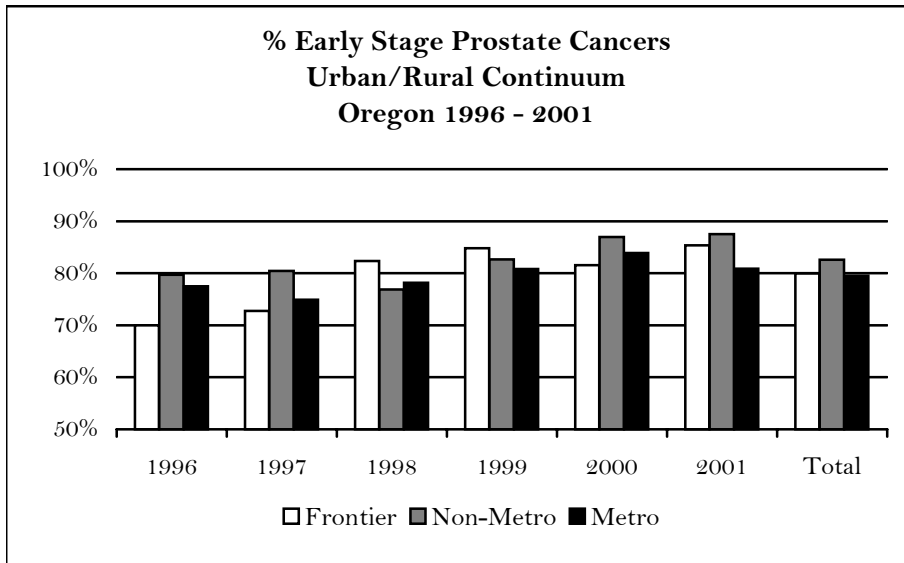
This decrease in early stage cases in the oldest age group is likely due to decisions by these patients and their health care providers to be less aggressive with surgical intervention.

Figure 72



Indeed, although there are high percentages of unstaged cases in men diagnosed under 40, from 50 onward the percentage of unstaged cases increased with age. (See Figure 72.)

Figure 73



There is no distinct pattern of early stage diagnosis along the urban/ rural continuum (See Figure 73.)

Figure 74

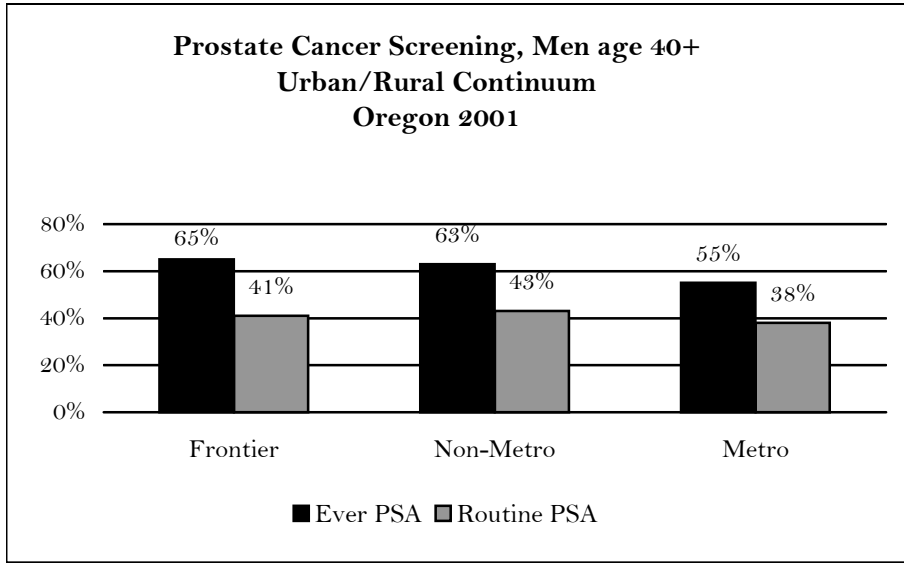
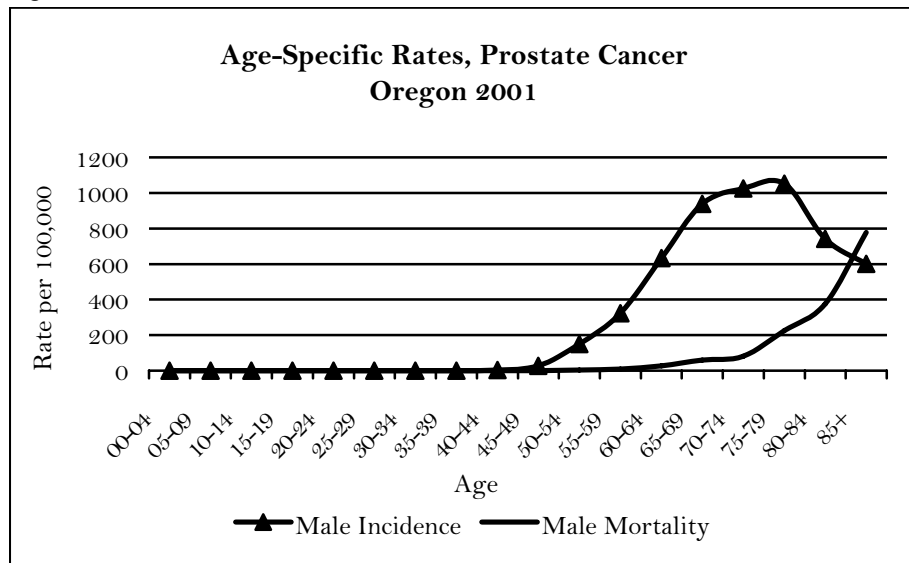


Figure 74 shows screening rates by population density. This figure compares the percentage of men aged 40 and older who have ever received a PSA test (Ever PSA) and the percentage that have received a PSA test within the past year (Routine PSA). Metro men and their providers are less likely to choose PSA screening than those in rural areas.

Age-Specific Incidence and Mortality

As with other types of cancer, the risk of developing prostate cancer increases with age. Figure 75 shows the age-specific incidence and mortality rates for prostate cancer. Oregon's age-specific incidence rates sharply increase at age 50 and peak in males aged 70-74. After age 75, the incidence begins to drop. Mortality rates increase sharply at age 70 and surpass incidence rates in the 85 and over age group.

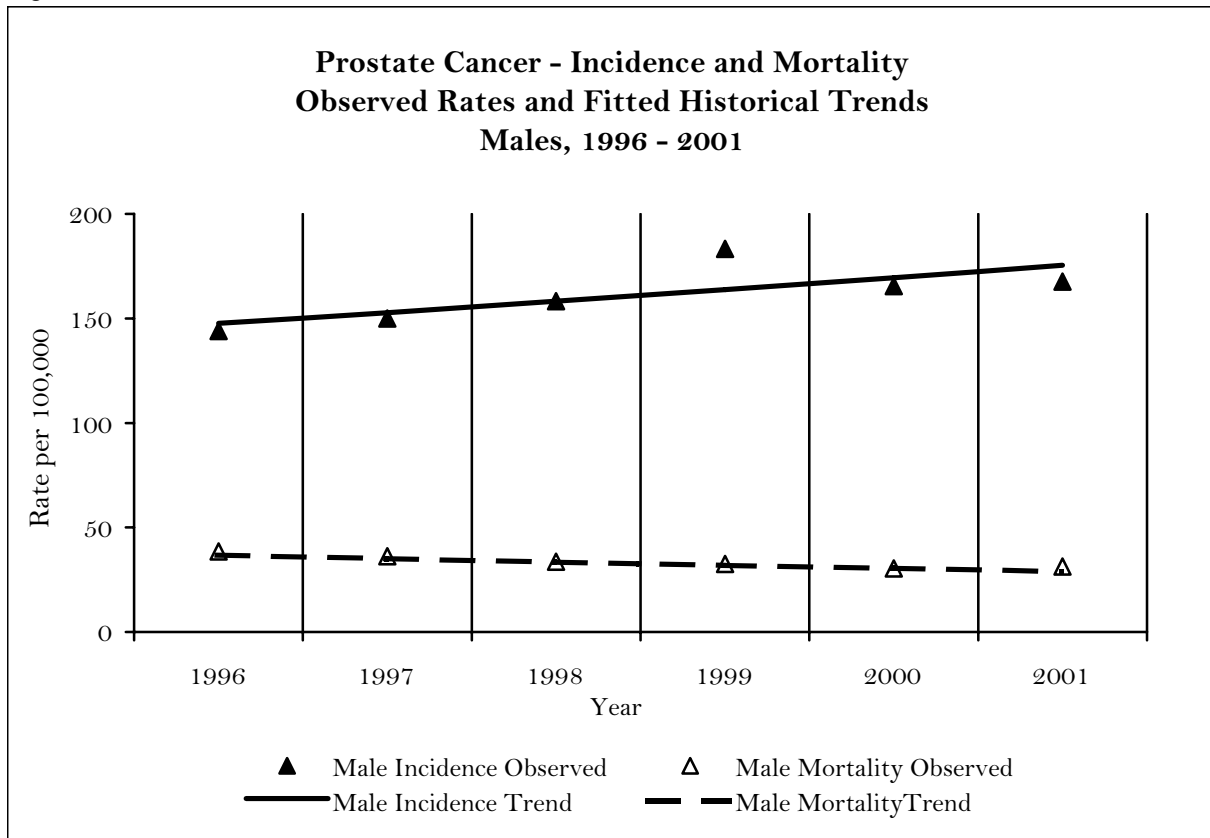
Figure 75



Historical Trends (1996-2001)

Prostate cancer incidence has been increasing 3% annually while prostate cancer mortality has been decreasing 5% annually. (See Figure 76.)

Figure 76



Regional Variation (Combined Five-Year Rates: 1997-2001)

Prostate cancer incidence is higher in the northeast and eastern portion of the state and the areas around Lincoln, Deschutes, and Wasco/Sherman counties. (See Figure 77.) Prostate cancer incidence is lower in the Portland and the Willamette Valley area, much of the coast, and sections of central Oregon. Prostate cancer incidence reporting rates vary throughout the state, which makes it difficult to interpret these incidence rates.

Prostate cancer mortality is higher in eastern and southern Oregon as well as the north coast area. (See Figure 78.) Prostate cancer mortality is lowest in Portland, the Willamette Valley, and much of central and north central Oregon.

Much of eastern Oregon has high prostate cancer incidence and mortality and may be a region of epidemiologic importance for risk factor research.

Figure 77 Prostate Cancer Incidence
1997 - 2001
Regional Variation

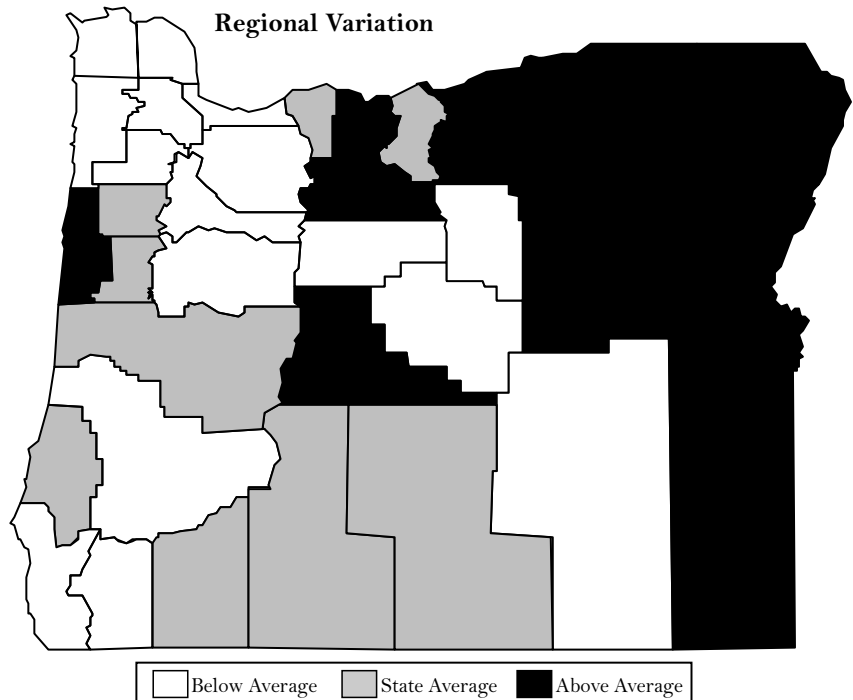


Figure 78 Prostate Cancer Mortality
1997 - 2001
Regional Variation

