Get Screened to Reduce the Risk of Cancer

n 2007, more than 13,000 New Yorkers died from cancer. Twenty-one percent of these deaths were from breast, colon and cervical cancers. Some of these deaths could have been prevented if the cancer had been detected at an earlier stage. Cancer screening tests can reduce the risk of cancer-related deaths. For this reason, the NYC Health Department recommends that New Yorkers get screened regularly.

There are three major cancer screening tests: colonoscopy for colon cancer, mammogram for breast cancer, and Pap test for cervical cancer. This report examines cancer screening utilization trends among NYC adults by various factors.

Cancer screening utilization among various groups can be an indicator of who is getting recommended timely preventive care.

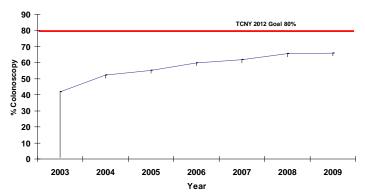
Colon Cancer Screening: Colonoscopy

More than 1,300 New Yorkers died from colorectal cancer in 2007, and still 34% of eligible New Yorkers are not being screened. It is important that New Yorkers get screened to catch cancer early when it is easier to treat or prevent.

A colonoscopy is an exam where a tube is inserted into the rectum to view the bowel for signs of cancer or other health problems. It is the only test that can both screen for and prevent cancer. During the procedure, pre-cancerous polyps can actually be removed. It is advised that everyone ages 50 and older get screened every 10 years.

This section looks at trends from 2003 to 2008 among New Yorkers ages 50 years and older who reported receiving a colonoscopy within the past 10 years overall and by subgroups.

Colonoscopy within the Last 10 Years among New Yorkers Ages 50 Years and Older, 2003 -2009



Source: NYC Community Health Survey (CHS) 2002-2009. CHS has included adults with landline phones since 2002 and, starting in 2009, also has included adults who can be reached only by cell-phone. Percents are age-adjusted. Black vertical lines represent the 95%CI: 95%CI are a measure of estimate precision. The wider the interval, the more imprecise the estimate.

Survey Question: When was your most recent colonoscopy performed?

• In 2009, 66% of New Yorkers ages 50 years and older reported receiving a colonoscopy within the past 10 years, an increase of 24% from 2003.

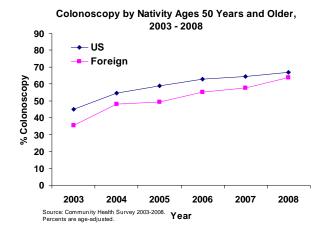
DESCRIBING TRENDS: DEFINITION OF TERMS USED IN THIS REPORT

Screening: This refers to cancer screening tests that are performed for the purpose of detecting early colorectal, cervical, and female breast cancers, when they are most curable. Screening cancer rate is measured as the percent of NYC residents of the appropriate age and sex who report having had the recommended screening.

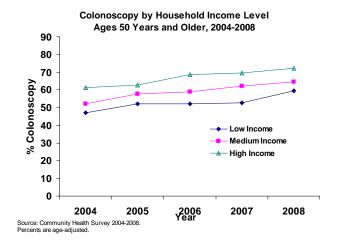
Sexual Behaviors are grouped into three categories: **MSM**, **WSW**, **Non-WSW/MSM**. **MSM** is defined as men who had sex with at least one man in the past year. **WSW** refers to women who had sex with at least one woman in the past year. **Non-WSW/MSM** is classified as men or women who did not have sex with someone of the same sex in the past year.

Sexual Identity: Refers to a person's self-defined identity within these three groups: heterosexual, homosexual and bisexual.

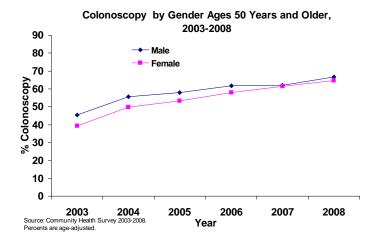
Household Income Levels are based upon the federal poverty level (FPL). Low-income households are defined as being <200% of the FPL, medium-income households 200-400% of the FPL and high income households 400+% of the FPL.



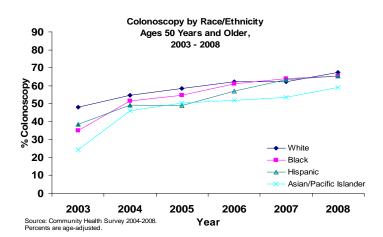
- Foreign-born colonoscopy rates increased by 28% from 2003 to 2008 and US Born rates by 22%.
- From 2003 to 2007, US-born New Yorkers had slightly higher colonoscopy reporting rates than foreign-born New Yorkers. However, in 2008 there was no difference in reporting rates between these two groups.



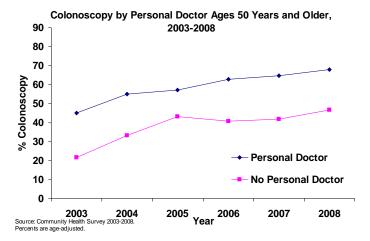
 Colonoscopy rates for all household income levels increased from 2004 to 2008, but higher-income New Yorkers are consistently more likely to get screened for colon cancer.

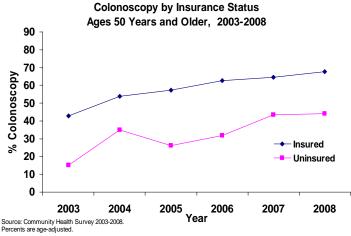


- Colonoscopy rates for men and women have increased from 2003 to 2008, and since 2007 there has been no difference in screening rates by sex.
- Colonoscopy screening rates among women have increased 25% from 2003 to 2008 (39% vs. 65%).
 Rates among men increased from 45% in 2003 to 67% in 2008.



 Colonoscopy rates increased for all racial/ethnic groups from 2003 to 2008. Although Asian New Yorkers experienced the highest increase in screening (35% increase from 2003 to 2008), they still have the lowest colonoscopy rates compared to whites.





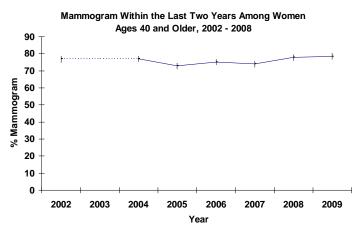
- Colonoscopy rates among those having one person they think of as their personal doctor or health care provider increased by 23% from 2003 to 2008.
- Colonoscopy rates among those without a personal doctor also increased by 25%, but still remain lower than rates among New Yorkers with one.
- Colonoscopy rates have increased among both the insured and uninsured. Rates among the insured increased by 25% and among the uninsured by 29% from 2002 to 2008.
- Insured New Yorkers are more likely to get a colonoscopy than uninsured New Yorkers.

Breast Cancer Screening: Mammogram

Approximately 1,108 New Yorkers die every year from breast cancer, yet 23% of women ages 40 and over have not had a recent mammogram. Mammogram screening tests can help identify potential cancers in the breast.

A screening mammogram is an X-ray of the breast that detects tumors that cannot be felt. Early detection has been shown to reduce deaths from breast cancer by identifying potential cancers at an earlier stage. The NYC Department of Health recommends that women ages 40 and older get a screening mammogram every 1 to 2 years. Women with a family history of breast cancer should consult with a healthcare provider about mammogram screening before the age of 40.

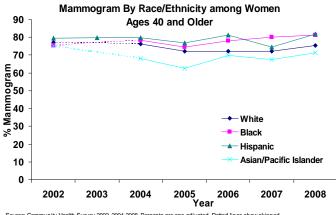
This section looks at trends from 2002 to 2008 among women ages 40 years and older in NYC who reported receiving a mammogram within the past two years by various factors, such as race/ethnicity and education.



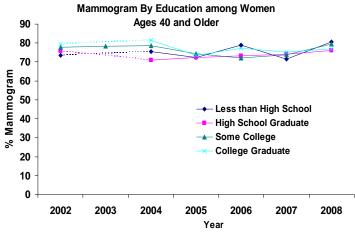
Source: NYC Community Health Survey (CHS) 2002-2009. CHS has included adults with landline phones since 2002 and, starting in 2009, als has included adults who can be reached only by cell-phone. Black vertical lines represent the 95%CI: 95%CI are a measure of estimate

Survey Question: How long has it been since you had your last mammogram?

- Overall mammography screening rates have remained steady from 2002 to 2009.
- In 2002, 77% of NYC women reported having had a mammogram in the last two years. In 2009, this number remained almost the same at 79%.

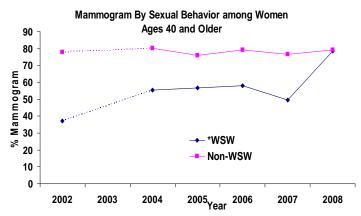


Source: Community Health Survey 2002, 2004-2008. Percents are age-adjusted. Dotted lines show skipped years of data

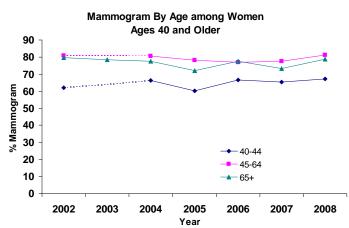


Source: Community Health Survey 2002, 2004-2008. Percents are age-adjusted. Dotted lines show skipped years of data

- Black and Hispanic women are more likely to be screened for breast cancer than any other racial/ethnic group. Rates among black women in NYC have increased from 76% in 2002 to 81% in 2008.
- Mammography rates among whites, Hispanics, and Asian/Pacific Islander women have not changed since 2002.
- The only significant increase in mammogram rates was among New Yorkers with less than a high school education. This group significantly increased their utilization rates from 74% in 2002 to 81% in 2008
- The other education levels remained steady from 2003 to 2008.



Source: Community Health Survey 2002, 2004-2008. Percents are age-adjusted. Dotted lines show skipped years of data. Analyses limited women who had sex in the past year.* Estimate should be interpreted with caution. Estimate's Relative Standard Error (a measure of estimate precision) is greater than 30% or the sample size is less than 50, making the estimate potentially unreliable.



Source: Community Health Survey 2002, 2004-2008. Dotted lines show skipped years of data.

- From 2002-2006 there was a steady increase in mammogram rates among WSW. After a decrease in 2007, there was a 29% increase in 2008, bringing WSW rates to the same level as non-WSW.
- Rates remained steady among non-WSW from 2002-2008.

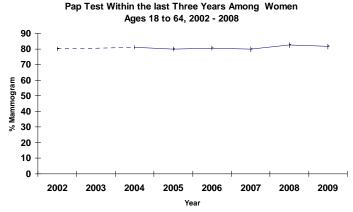
 Mammography rates among the three age groups have remained steady from 2002 to 2008.

Cervical Cancer Screening: Pap Test

There were 157 cervical cancer deaths among NYC women in 2007, with more than 70% occurring among women ages 50 or older. In order to reduce or prevent future deaths, it is important for NYC women to get a regular Pap test.

A Pap test is a simple procedure where a sample of cells is taken from a woman's cervix, and examined for abnormalities. If done routinely, this test can help prevent cancer of the cervix by identifying abnormal cells before they become cancerous.

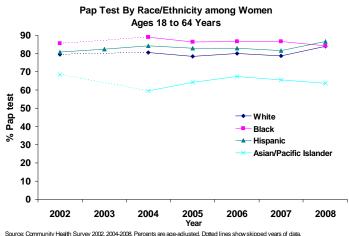
The NYC Health Department recommends that women 21 and older get screened with a Pap test every 1 to 3 years. This section looks at trends from 2002 to 2008 among NYC women ages 18 to 64 years who reported receiving a Pap test within the past three years by various factors such as race/ethnicity and age.



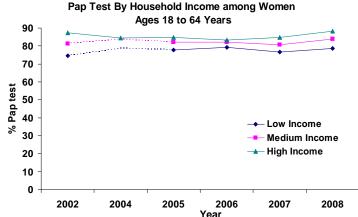
Source: NYC Community Health Survey (CHS) 2002-2009. CHS has included adults with landline phones since 2002 and, starting in 2009, also has included adults who can be reached only by cell-phone. Percents are age-adjusted. Black vertical lines represent the 59% CH59% CI are a measure of estimate precision. The wider the interval, the more imprecise the estimate. Dotted lines show skipped years of data.

Survey Question: How long has it been since your last Pap smear?

 Pap test screening rates among NYC women have remained steady over time at approximately 80%.



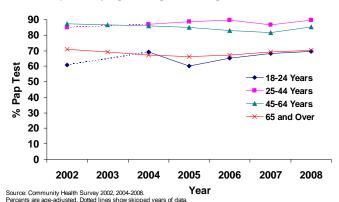
- White and Hispanic women report increased rates of pap testing from 2002 to 2008. White women increased from 79% in 2002 to 83% in 2008. Hispanic women increased from 81% in 2002 to 87% in 2008.
- Rates among blacks and Asian/Pacific Islanders have remained unchanged since 2002.



Source: Community Health Survey 2002, 2004-2008. Percents are age-adjusted. Dotted lines show skipped years of data.

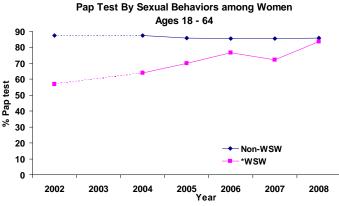
 Pap test rates have only increased among low-income New Yorkers from 2002 to 2008 (75% vs. 79%).
Rates among other income groups have remained the same.

Pap Test By Age among Women Ages 18 to 64 Years



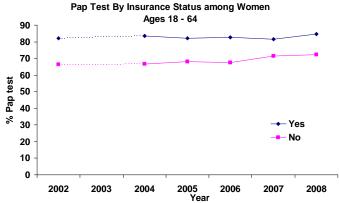
Only New Yorkers ages 25 to 44 years have increased their Pap test rates from 2002-2008 (85% vs. 90%). Rates among the other age groups have remained

unchanged.



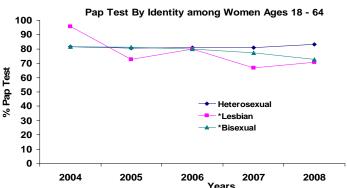
Source: Community Health Survey 2002, 2004-2008. Percents are age-adjusted. Dotted lines show skipped years of data. Analyses limited to women who reported having sex in the past year.* Estimate should be interpreted with caution. Estimate's ure of estimate precision) is greater than 30% or the sample size is less than 50, making the

Mammogram rates among WSW have increased from 2002 to 2008 (57% vs. 84%), meeting the rate among non-WSW which have remained constant.



ource: Community Health Survey 2002, 2004-2008 ercents are age-adjusted. Dotted lines show skinn

Pap test rates among insured women have increased slightly from 82% in 2002 to 84% in 2008. Rates have remained the same among NYC women without insurance.



- Among women who identify as gay or lesbian, Pap test rates significantly decreased from 96% in 2004 to 71% in 2008.
- Rates among heterosexual and bisexual women have not changed since 2004.

RECOMMENDATIONS AIMED AT IMPROVING HEALTH OUTCOMES:

COLORECTAL CANCER

- Men and women ages 50 and older should get a colonoscopy every 10 years.
 - For more information visit: http://www.nyc.gov/html/doh/downloads/pdf/public/dohmhnews7-05.pdf

BREAST CANCER

- Women 40 and older should get a mammogram every 1 to 2 years. Women with a family history of breast cancer should consult with a healthcare provider about mammogram screening before the age of 40.
 - For more information visit: http://www.nyc.gov/html/doh/html/cancer/cancerbreast.shtml

CERVICAL CANCER

- Women 21 and older should get a Pap smear at least every 1 to 3 years.
 - For more information visit: http://www.nyc.gov/html/doh/html/ms/wh18.shtml

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> For more Community Health Survey (CHS) Reports, visit http://nyc.gov/html/doh/html/survey/chsrpts.shtml. For more information on the CHS, including methodology, visit <u>nyc.gov/health/survey.</u>