



Cervical Cancer in the Greater San Francisco Bay Area

1988-2000

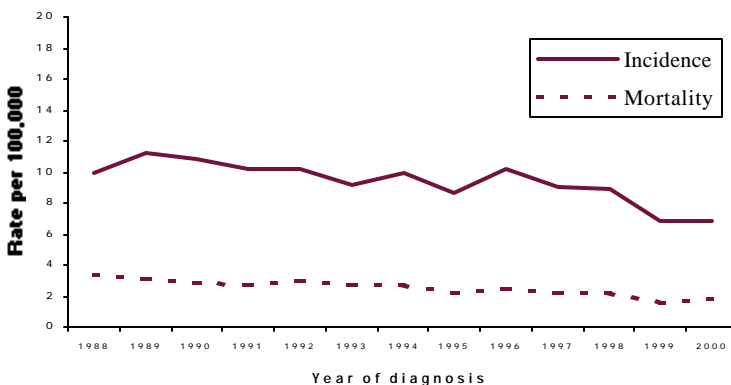
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Cervical cancer incidence and mortality have declined more than 40% in the last few decades, in part due to the wide use of Papanicolaou screening test for early detection. In the US, cervical cancer is one of the most common cancers among women, particularly in black, Hispanic, and Vietnamese women.

INCIDENCE AND MORTALITY TRENDS

The most recent statistics show that 236 people were diagnosed and 65 died from invasive cervical cancer during 2000 in the Greater San Francisco Bay Area. Cervical cancer incidence and mortality rates in our region have declined during the period 1988 and 2000 (below, Figure 1).

Figure 1. Age-adjusted incidence and mortality rates for cervical cancer by year of diagnosis, Greater San Francisco Bay Area, 1988-2000



RISK FACTORS

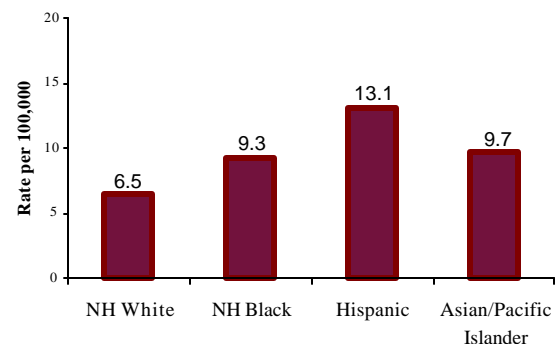
In addition to age and race/ethnicity, other factors associated with increased risk of cervical cancer include:

- infection with certain types of human papilloma virus (HPV), a common sexually transmitted virus
- factors related to sexual behavior, including intercourse at early age, having many sexual partners, and having unprotected sex at any age
- cigarette smoking
- lower socioeconomic status, which may contribute to lack of cancer screening

RACIAL/ETHNIC PATTERNS

Cervical cancer incidence varies substantially for racial/ethnic groups in the Greater Bay Area (right, Figure 2). The highest rate is seen in Hispanics, followed closely by Asians/Pacific Islanders and non-Hispanic Blacks. Non-Hispanic whites have the lowest incidence of cervical cancer.

Figure 2. Age-adjusted cervical cancer incidence by race/ethnicity, Greater San Francisco Bay Area, 1988-2000





INCIDENCE BY AGE

Cervical cancer occurs at younger ages than other cancers. It is rare before age 25, but rates climb steadily with age, peaking in females in their 60's (right, Figure 3).

Figure 3. Cervical cancer incidence by age group at diagnosis, Greater San Francisco Bay Area, 1988-2000

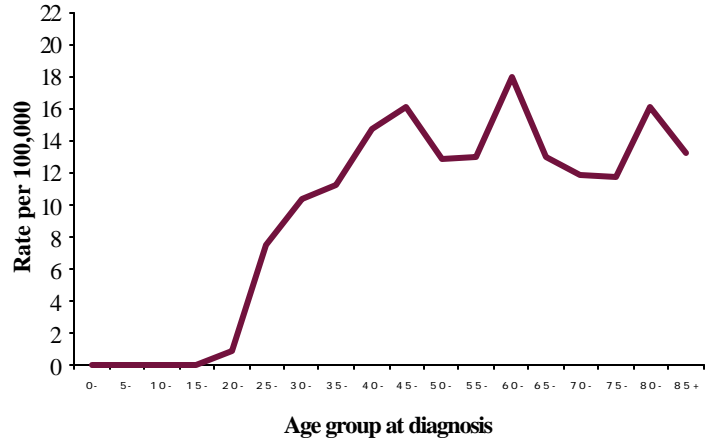
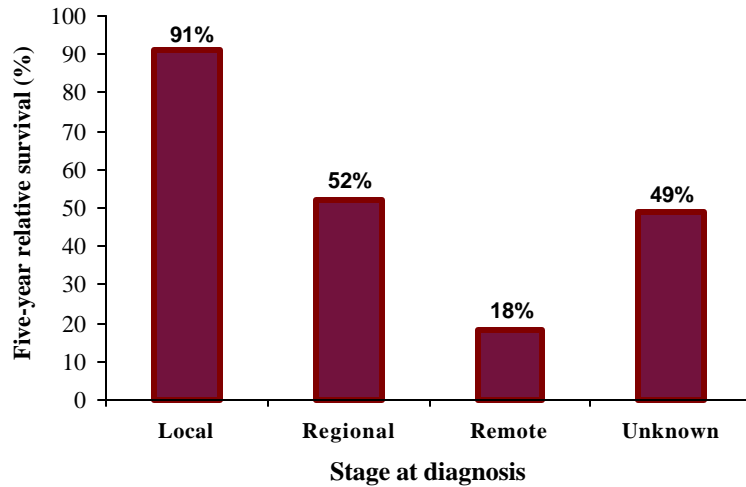


Figure 4. Five-year relative survival (%) from cervical cancer by stage at diagnosis, Greater San Francisco Bay Area, 1988-2000



SURVIVAL

Survival from cervical cancer varies by stage at diagnosis. Patients diagnosed with cancer localized to the cervix generally have higher probability of five-year survival (approximately 91%) than patients diagnosed with late stage (approximately 18%) (left, Figure 4).

Technical Notes: Because age distributions vary by population, a standard statistical procedure called "age-adjustment" was used so that we can examine differences in cancer incidence and mortality rates due to factors other than age. Rates are age-adjusted (using the Year 2000 population standard) unless noted to be age-specific. Race/ethnicity was categorized as four mutually-exclusive racial/ethnic groups: non-Hispanic whites (whites), non-Hispanic blacks (blacks), Hispanics, and non-Hispanic Asians/Pacific Islanders (Asians/Pacific Islanders).

About the data: Cancer data have been collected in Alameda, Contra Costa, Marin, San Francisco, and San Mateo counties since 1973, and in Monterey, San Benito, Santa Clara, and Santa Cruz counties since 1988, forming two parts (Regions 1 and 8) of the California Cancer Registry. These counties, referred to as the Greater San Francisco Bay Area are also part of the National Cancer Institute's Surveillance, Epidemiology, and End Results (SEER) registry program.

Founded in 1974, the mission of the **Northern California Cancer Center** is to reduce the burden of cancer through surveillance, epidemiology, prevention research and education. Essential to this mission is collaboration with partners in cancer research, education and the community.