

New Data Reports Largest Ever 1-Year Drop in U.S. Cancer Deaths

BY PEGGY EASTMAN

New data from the American Cancer Society (ACS) show the largest 1-year drop in U.S. cancer mortality ever recorded—a 2.2 percent drop from 2016 to 2017. The new ACS statistical report also shows that the U.S. death rate from cancer declined by 29 percent from 1991 to 2017 (*CA Cancer J Clin* 2020; <https://doi.org/10.3322/caac.21590>). The new figures show that a drop in lung cancer deaths led the decline. But despite this progress, lung cancer—which accounts for nearly one-quarter of all cancer deaths—remains the leading cause of U.S. cancer mortality. Each year, the ACS compiles the most recent data on population-based cancer occurrence and estimates the number of new U.S. cancer cases and deaths.

The report notes that the decline in U.S. cancer mortality has been steady over the past 26 years, dropping by an average of 1.5 percent annually from 2008 to 2017. This translates to more than 2.9 million cancer deaths avoided since 1991, when mortality rates were at their highest. The steady decline is attributed to mortality drops in the four



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most common cancer types: lung, colorectal, breast, and prostate. In 2020, a total of 1,806,590 new cancer cases and 606,520 deaths are expected.

Lung cancer death rates declined by 51 percent from 1990 to 2017 among men and 26 percent from 2002 to 2017 among women, due largely to declines in smoking and advances in early detection and treatment. From 2013 to 2017, the rates of new lung cancer cases dropped by 5 percent annually in men and by 4 percent annually in women. In addition to the drop in lung cancer mortality, steep mortality declines occurred for melanoma of the skin, which the new ACS report calls “dramatic” and attributes in part to the immunotherapy drugs ipilimumab and vemurafenib, approved by the FDA in 2011. The overall melanoma mortality rate dropped by 7 percent per year during 2013-2017 in people aged 20-64, 1 percent annually in people aged 50-64, and 5-6 percent in people aged 65 and older. The report notes that the mortality drop in people aged 65 and older is especially significant, because rates prior to 2013 had been increasing.

“The accelerated drops in lung cancer mortality as well as in melanoma that we’re seeing are likely due at least in part to advances in cancer treatment over the past decade, such as immunotherapy,” said William G. Cance, MD, Chief Medical and Scientific Officer for the ACS, in a statement on the new data. “They are a profound reminder of how rapidly this area of research is expanding and now leading to real hope for cancer patients.”

“This record-breaking decline in U.S. cancer deaths reflects commitment from patients, providers, payers, policymakers, and com-

munities throughout the country,” commented Ali McBride, PharmD, MS, BCOP, President of the Association of Community Cancer Centers (ACCC) and Clinical Coordinator of Hematology/Oncology at the University of Arizona Cancer Center. McBride cited the ACCC’s Immuno-Oncology Institute, a resource that helps clinicians integrate cutting-edge new therapies into practice.

The accelerated decline in the rate of deaths from lung cancer is indeed good news, said longtime ACS staffer J. Leonard Lichtenfeld, MD, in a commentary on the newly released data. But he stated that

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lung cancer screening still remains “pitifully low” among those at high risk (current and former heavy smokers). Lichtenfeld, like Cance, also hailed the mortality drop in melanoma, which he called “a stunning reversal.”

“We are pleased to see the gains that GO2 Foundation has been working toward through its coordinated, patient-centered approach to lung cancer detection and treatment, reducing lung cancer deaths in the U.S.,” said Geoffrey Oxnard, MD, President of the GO2 Foundation’s scientific leadership board and Associate Professor of Medicine at the Dana-Farber Cancer Institute and Harvard Medical School.

The GO2 Foundation for Lung Cancer (formerly the Bonnie J. Addario Lung Cancer Foundation and Lung Cancer Alliance) was founded by patients and survivors. Oxnard said the foundation’s focus on identifying genetic changes in lung cancer is leading the way toward more targeted treatments and better patient outcomes, as shown by recent statistical reports on cancer.

Other news from the new ACS report shows that the 5-year relative survival rate for all cancers combined that were diagnosed during 2009 through 2015 was 67 percent overall—68 percent in whites and 62 percent in blacks. Breast cancer death rates declined by 40 percent from 1989 to 2017 among women; prostate cancer death rates declined by 52 percent from 1993 to 2017; and colorectal cancer death rates declined by 53 percent from 1980 to 2017 among men and by 57 percent from 1969 to 2017 among women.

The overall rate of new cancer cases in men remained about the same through 2016 after a notable drop from 2007 to 2014, caused by slowing declines for colorectal cancer and stabilizing rates for prostate cancer. The steep drop in prostate cancer diagnoses from 2007 to 2014 is attributed to decreased PSA testing after the U.S. Preventive Services Task Force recommended against routine use of the test be-

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cause of concerns that such routine use might lead to overdiagnosis and overtreatment.

The overall rate of new cancer cases in women has remained about the same over the past 20 years. While lung cancer cases have continued to decline, the drop in colorectal cancer cases has slowed and other common cancers in women have increased or stayed the same.

Breast cancer incidence rates have gone up slightly, by about 0.3 percent annually since 2004. This slight rise in incidence could be due in part to increased obesity rates and decreased fertility rates, suggests the ACS report.

Rates of new cancer cases continue to increase for cancers of the kidney, pancreas, liver and oral cavity and pharynx (among non-Hispanic whites), and melanoma skin cancer. According to statistics in the new report, liver cancer is increasing the most rapidly, by 2-3 percent annually during 2007 through 2016, although the pace of increase has slowed from previous years.

Each year, the ACS spotlights a selected issue of cancer research or care. This year's ACS report contains a special section highlighting cancer in adolescents and young adults (AYAs). Data in this section include the following:

- AYAs are more likely to be diagnosed at a late stage because of delays in diagnoses due to the rarity of cancers in this age group, higher uninsured rates, and higher rates of aggressive cancers.
- AYAs have a high risk of long-term and late effects, including infertility, sexual dysfunction, cardiac complications, and future cancers.
- Leukemia is the leading cause of cancer death in both males and females aged 15-29.
- Adolescents aged 15-19 have a mix of cancer types, including childhood cancers (such as acute lymphocytic leukemia), adult cancers (such as thyroid cancer and melanoma skin cancer), and a higher risk of lymphoma. As an example, Hodgkin lymphoma accounts for 13 percent of cancer cases in adolescents compared to 9 percent of those aged 20-29 and 3 percent in those aged 30-39.
- While cervical cancer is highly preventable through use of the HPV vaccine and screening, it is the second leading cause of cancer deaths among women aged 20-39.
- In adults aged 20-39, rates increased for cancers of the colorectum (3-6% per year), endometrium (3%), kidney (3%), and breast (0.2% to 2%), with more rapid increases among those in their twenties.
- In 2020, the most commonly diagnosed cancers are predicted to be thyroid, testicular, and melanoma skin cancer in those aged 20-29 and breast, thyroid, and melanoma in those aged 30-39.

In his commentary on the newly released ACS data, Lichtenfeld said that, while the new report brings good news, "there are also some notable areas of concern" that require a focus on action to make steady progress against cancer. In addition to low screening rates among those at high risk of lung cancer, he cited a low uptake of the HPV vaccine for cervical cancer, the need for a better early detection test for prostate cancer, and "substantial disparities" that exist in outcomes in the U.S., due in large part to differences in access to care.

"This report confirms that we continue to make progress against cancer," Lichtenfeld stated. "At the same time, imagine if we could focus not only on cutting-edge research to produce new effective treatments for cancer, but also remove the barriers and undertake initiatives that would improve the health of our country and reduce the risk of getting cancer in the first place." **OT**

Peggy Eastman is a contributing writer.

Online Resources

More information on the American Cancer Society report can be found in a companion report, "Cancer Facts & Figures 2020," available online at <https://cancerstatisticscenter.cancer.org>.

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Learning Objectives for This Month's Activity:

After participating in this activity, readers should be better able to: 1. Identify current trends in U.S. cancer deaths. 2. Analyze findings from the 2020 American Cancer Society report about new cases and survival rates for various cancers.

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