Cancer screening and early detection have contributed to a continuing decline in Delaware’s all-site cancer mortality rate over the past decade, say Delaware Public Health officials. From 1999-2003 to 2009-2013, Delaware’s cancer death rate decreased 15 percent, an improvement that was slightly higher than the decline seen nationally (14 percent), according to the latest cancer data announced by the Division of Public Health (DPH).

Delaware’s ranking of 16th among the states for highest all-site cancer mortality is two spots lower than the ranking of 14th highest in last year’s report, which looked at the 2008-2012 time period, and represents considerable continued progress since the 1990s, when the state ranked second.

DPH presented its new report, Cancer Incidence and Mortality in Delaware, 2009-2013 to the Delaware Cancer Consortium (DCC) following its meeting today in Dover. The annual report provides data for all cancer sites combined (all-site cancer), eight site-specific cancer types, risk factors, early detection and screening recommendations, and census tract maps.

Delaware’s all-site cancer mortality rate fell 18 percent among men, 14 percent among women, 24 percent among African Americans, and 13 percent among Caucasians over the last decade, according to the report. However, at 176.1 deaths per 100,000 people, the state’s mortality rate was still 5 percent higher than the U.S. rate of 168.5 for 2009-2013.

Regarding incidence, Delaware’s 2009-2013 all-site cancer incidence rate (507.3 diagnoses per 100,000) was 13 percent
higher than the comparable U.S. rate. Between the time periods of 1999-2003 and 2009-2013 though, Delaware’s all-site cancer incidence rate declined 1 percent, falling 4 percent among men but increasing by 2 percent in women. The all-site cancer incidence rate decreased by 9 percent among African Americans, but increased by 1 percent among Caucasians.

Among Hispanic Delawareans, the 2009-2013 all-site cancer incidence (441.1 cases per 100,000) and mortality (110.7 deaths per 100,000) rates were significantly lower than the state’s incidence rate (507.3 per 100,000) and mortality rate (176.1 per 100,000).

“Delaware is making great progress in battling the deadly disease of cancer in our state” said Governor John Carney. “This report shows our successes, but also shows us we have more work to do. I want to thank DHSS, the Cancer Consortium, and the Delaware Public Health Cancer team, and the strong network of cancer advocates in our state for the daily work they do to improve access to screening and treatment for all Delawareans.”

“I’m pleased that we are seeing some successes, particularly in the African-American and Hispanic communities,” said Department of Health and Social Services (DHSS) Secretary Dr. Kara Odom Walker. “However, there is still more we need to do to eliminate disparities for African Americans, particularly when it comes to earlier diagnosis of breast cancer. DHSS and DPH are committed to moving the needle forward, and improving the quality of life for those facing this difficult disease.”

**Breast Cancer**

- In terms of screening, Delaware maintained its national state ranking for having the third-highest prevalence of women ages 40 and over (80 percent) who had a mammogram within the past two years (2014 Behavioral Risk Factor Survey (BRFS).
- The proportion of breast cancer cases among Delaware women diagnosed in the local stage (the most treatable stage)
increased from 42 percent in 1980-1984 to 65 percent in 2009-2013.

• Breast cancer mortality in Delaware declined 19 percent over the last decade (1999-2003 to 2009-2013).

**Colorectal Cancer**

• Delaware ranked fifth highest in prevalence in the U.S. for colorectal cancer screening (2014 BRFS) with nearly 77 percent of Delawareans age 50 and older reported ever having a sigmoidoscopy or colonoscopy.

• From 1999-2003 to 2009-2013, Delaware’s colorectal cancer incidence rate decreased 33 percent, more than the comparable U.S. rate (23 percent).

• During the same period, Delaware’s colorectal cancer mortality rates declined 45 percent among African-American males, and 52 percent among African-American females, compared to 30 percent among Caucasian males and 34 percent among Caucasian females.

**Prostate Cancer**

• From 1980-1984 through 2009-2013, Delaware’s percentage of prostate cancer cases diagnosed at the local stage increased substantially from 50 percent to 81 percent.

• From 1999-2003 to 2009-2013, prostate cancer mortality declined 34 percent among African-American Delawareans, compared to 30 percent among Caucasian Delawareans.

• And while the incidence rate among African Americans declined 12 percent from 1999-2003 to 2009-2013, the prostate cancer incidence rate among African-American Delawareans 230.5 per 100,000 still continues to be significantly greater than the comparable rate for Caucasians 137.2 per 100,000.

“Delawareans are getting screened more frequently and finding cancer earlier, and there are many other things everyone can do to reduce their risk of cancer,” said DPH Director Dr. Karyl Rattay. “This includes scheduling regular physician visits, not smoking and quitting if you do, getting regular physical activity, eating a healthy diet and maintaining a
healthy weight. As we celebrate the next step in our work to fight cancer, I am grateful for the sustained, coordinated work of the Cancer Consortium, Screening for Life Program, the Nurse Navigation Programs at our hospitals, and the DPH Comprehensive Cancer Control Program in helping Delawareans to live longer fuller lives.”

Despite progress in many areas, DPH officials acknowledge there is more work to be done, particularly with respect to lung cancer. Lung cancer, the most frequently diagnosed cancer in the nation and in Delaware, accounted for 14 percent of all newly diagnosed cancer cases and 30 percent of all cancer deaths in Delaware from 2009-2013. Most lung cancer cases are diagnosed in the distant stage, when the cancer has spread to distant tissues, organs, or lymph nodes.

Lung cancer issues among Delaware women are of particular concern. In the 2009-2013 period, Delaware women ranked 11th highest in the nation for lung cancer mortality while Delaware men ranked 16th highest. Additionally, from 1999-2003 to 2009-2013, the lung cancer incidence rate for Delaware females decreased 1 percent, compared to a 5 percent decline in the female U.S. rate.


According to the U.S. Department of Health and Human Services, 85 percent to 90 percent of lung cancers are caused by tobacco use. Though cigarette smoking prevalence among Delaware adults was at an all-time low of 20 percent, according to the 2014 BRFS, it remains largely unchanged over the last four years. DPH continues to remind smokers of the dangers of secondhand smoke, both to children and other adults. Secondhand smoke can also aggravate the symptoms of asthma and COPD.
Additionally, while smoking among teens is also at an all-time low, DPH is aware of the increasing use of electronic vaporizing devices (e-cigarettes). Delaware public high school students reporting “current use” of e-cigarettes through the 2015 Youth Behavioral Risk Survey jumped from 2.1 percent in 2012 to 23.5 percent in 2015, and approximately 40.5 percent of Delaware public high school students said they have tried e-cigarettes. In 2014, Delaware banned the sale of e-cigarettes to minors and in 2015, Delaware’s Clean Indoor Air Act was expanded to include prohibiting the use of e-cigarettes and other electronic vapor devices in workplaces and indoor public places.

DPH reminds current and former smokers deemed at high risk for lung cancer to get screened with a low-dose CT scan. DPH’s Screening for Life Program covers lung cancer screenings for qualified uninsured or underinsured Delawareans who are not eligible for Medicaid or Delaware’s Health Insurance Marketplace and who are current or former smokers deemed at high risk for lung cancer:

• Current smokers or those who quit smoking within the last 15 years;
• Those who smoke or have smoked the equivalent of a pack a day for 30 or more years; and
• Those who are 55 to 80 years of age.

Those seeking lung cancer screenings should visit HealthyDelaware.org/lung or call 302-401-4212 to speak with a screening nurse navigator. Delaware tobacco users seeking help quitting can contact the Delaware Quitline, a free tobacco cessation counseling hotline for residents 18 and older, at 1-866-409-1858 or http://dhss.delaware.gov/dph/dpc/quitline.html.

To view Cancer Incidence and Mortality in Delaware, 2009-2013 and the 2017 Analysis of Delaware’s Census Tracts with Elevated Overall Cancer Rates in 2009-2013, visit DPH’s Cancer Prevention and Control Program website at
To learn more about the Delaware Cancer Consortium, visit https://www.healthydelaware.org/Consortium.

A person who is deaf, hard-of-hearing, deaf-blind or speech-disabled can call the DPH phone number above by using TTY services. Dial 7-1-1 or 800-232-5460 to type your conversation to a relay operator, who reads your conversation to a hearing person at DPH. The relay operator types the hearing person’s spoken words back to the TTY user. To learn more about TTY availability in Delaware, visit http://delawarerelay.com.

Delaware Health and Social Services is committed to improving the quality of the lives of Delaware’s citizens by promoting health and well-being, fostering self-sufficiency, and protecting vulnerable populations. DPH, a division of DHSS, urges Delawareans to make healthier choices with the 5-2-1 Almost None campaign: eat 5 or more fruits and vegetables each day, have no more than 2 hours of recreational screen time each day (includes TV, computer, gaming), get 1 or more hours of physical activity each day, and drink almost no sugary beverages.