

HEAD AND NECK CANCERS IN CALIFORNIA



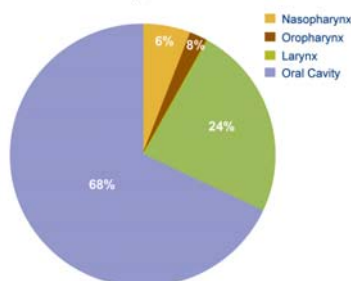
Head and neck cancer is a general term to describe cancers that occur in the oral cavity, oropharynx, nasopharynx, and larynx. In 2008, head and neck cancers comprised 3% of all cancer cases diagnosed in California. More than two-thirds of all head and neck cancers reported since 1988 have originated in the oral cavity (Figure 1).

From 1988 to 2008, the incidence rates of head and neck cancers have significantly declined for Californian males and females, 26.1% and 27.6% respectively. Males are two times more likely to be diagnosed with a cancer of the head and neck than females. Mortality rates during this time period have also significantly decreased among both males and females (Figure 2).

Head and neck cancers diagnosed in California are most common among non-Hispanic whites and non-Hispanic blacks (Figure 3). However, over the past 21 years, both the mortality and incidence rates among all racial/ethnic groups have significantly declined. The largest decrease in incidence has been among non-Hispanic blacks (37.8%), followed by Asian/Pacific Islanders (27.1%). The most notable reduction in mortality has also been among non-Hispanic blacks and Asian/Pacific Islanders.

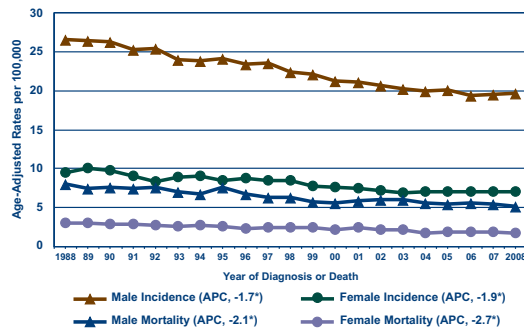
As seen in Figure 4 – head and neck cancers are more likely to be diagnosed among Californians at a localized or regional stage. However, non-Hispanic blacks are more likely to be diagnosed at regional or distant stage than the other groups.

Figure 1
Proportion of Head & Neck Cancers by Site, California, 1988-2008



Prepared by the California Department of Public Health, Cancer Surveillance Section.

Figure 2
Incidence and Mortality Rates of Head and Neck Cancers by Sex, California, 1988-2008



Source: California Cancer Registry, October 2008 (incidence) and June 2008 (mortality). Prepared by the California Department of Public Health, Cancer Surveillance Section. *The annual percent change (APC) is significantly different from zero ($p < 0.05$).

Figure 5

Five-Year Relative Survival of Head and Neck Cancers by Race/Ethnicity, California, 1999-2008

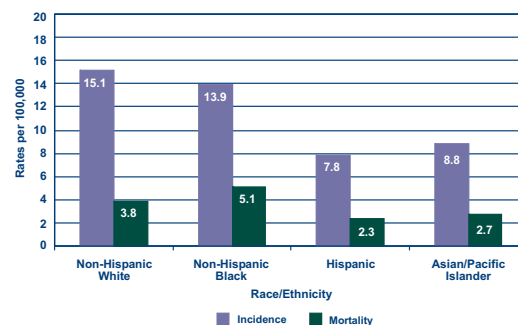
Race/Ethnicity	Nasopharynx	Oropharynx	Larynx	Oral Cavity
Non-Hispanic White	54.8%	47.1%	61.3%	64.4%
Non-Hispanic Black	54.2%	25.1%	52.8%	46.7%
Hispanic	57.8%	37.0%	61.7%	62.0%
Asian/Pacific Islander	66.4%	47.4%	74.5%	65.9%

Figure 4

Stage at Diagnosis Distribution by Race/Ethnicity, California, 1999-2008

Race/Ethnicity	Localized	Regional	Distant
Non-Hispanic White	45.2%	41.0%	13.8%
Non-Hispanic Black	34.4%	43.5%	22.1%
Hispanic	41.4%	39.6%	19.0%
Asian/Pacific Islander	36.3%	42.5%	21.2%

Figure 3
Five-Year, Age-Adjusted Rates of Head and Neck Cancers by Race/Ethnicity, California, 2004-2008



Source: California Cancer Registry October 2008 (incidence) and June 2008 (mortality). Prepared by the California Department of Public Health, Cancer Surveillance Section.

Relative survival estimates the probability that an individual will not die from a given cancer during the specified time following diagnosis. In California, the five-year relative survival for head and neck cancers varies by race/ethnicity. Asian/Pacific Islanders have the highest overall five-year relative survival compared to the other racial/ethnic groups (Figure 5).



Edmund G. Brown Jr., Governor
State of California
Diana S. Dooley, Secretary
California Health and Human Services Agency
Ron Chapman, MD, MPH, Director
California Department of Public Health