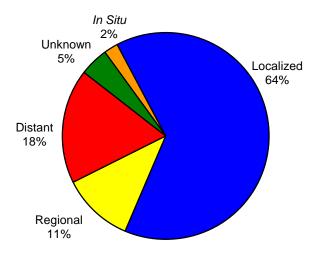
Table 17:	Kidney and Rena	al Pelvis Incidence	and Mortality	/ Summary, 2012
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Kidney & Benel Belvie Cancer			Incidence			Mortality		
Kidney & Renal Pelvis Cancer		Total	Male	Female	Total	Male	Female	
South Dakota	Total	# Cases / Deaths	131	88	43	50	32	18
		Age Adjusted Rate	14.0	19.4	9.0	5.2	7.1	3.5
	White	# Cases / Deaths	113	78	35	47	31	16
		Age Adjusted Rate	12.9	18.4	7.8	5.1	7.2	3.4
	American Indian	# Cases / Deaths	17	10	7	3	1	2
		Age Adjusted Rate	34.9	41.4	28.4	8.8	4.3	10.2
United States	Total	Age Adjusted Rate	* 15.2	* 20.7	* 10.5	* 3.9	* 5.7	* 2.5
	White	Age Adjusted Rate	* 15.6	* 21.1	* 10.9	* 4.0	* 5.9	* 2.6
	American Indian	Age Adjusted Rate	* 19.2	* 27.3	* 12.7	* 6.3	* 8.7	* 4.2

Rates per 100,000 age-adjusted to 2000 US standard population and 2012 SD estimated population.

Figure 35: Kidney and Renal Pelvis Cancer Stage at Diagnosis, South Dakota, 2012



Source: South Dakota Health Department

Descriptive Epidemiology

Stage at Diagnosis: As with all malignancies, early diagnosis is the key to better prognosis and possible cure. Sixty-four percent of the cases in 2012 were diagnosed at localized stage, with another 18% diagnosed at distant stage. Unfortunately, symptoms do not always reflect the stage of disease. Blood in the urine is one of the symptoms that frequently presents at diagnosis. As with other cancers, renal cancer can spread through the blood stream and/or lymphatic system. Survival rates associated with kidney cancer depend on how far the disease has progressed, the size of tumor, and whether or not it has metastasized. The latest five-year survival rate for localized stage kidney cancer is 91.8%. The survival rate for distant stage is 12.1%.

Incidence: In 2012 the American Cancer Society estimated there would be 64,770 new cases of kidney cancer in the United States. This accounts for 3.9% of all reported malignancies in the United States. In South Dakota there were 133 reported cases of kidney cancer in 2012 representing 3.1% of all cancer cases. Kidney cancer develops most often in people over 40. There is no known cause of this disease. Doctors can seldom explain why one person develops kidney cancer and another does not. The median age at diagnosis is 63 in South Dakota and 64 in the United States.

Mortality: This cancer was the eighth leading cause of cancer death for South Dakota in 2012. In the United States for 2006-2010 it was the thirteenth leading cause of death with a median age of death of 71 years. Death rates decreased by 0.9% per year from 2007 to 2011.

Risk and Associated Factors: Cigarette smoking increases the risk of developing kidney cancer. The risk seems to increase by the amount one smokes. Obesity is associated with risk, as are exposures to occupational substances such as aniline dyes, benzene, and naphthalene.

Prevention and Early Detection: The main preventive measure is to stop smoking and maintain a healthy weight. It is difficult to diagnose kidney cancer until it becomes symptomatic. There are no known screenings recommended at this time.

^{*} US Mortality rates are from 2011, the 2012 rate is not available at this time. US rates www.seer.cancer.gov Source: South Dakota Department of Health

South Dakota, 2012 30 Deaths -Cases 20 Count 10 35-39 55-59 5-19 25-29 62-69 75-79 20-24 30-34 50-54 60-64 70-74 85+

Age Group

Figure 36: Kidney and Renal Pelvis Cancer Number of Cases and Deaths by Age,

Source: South Dakota Department of Health

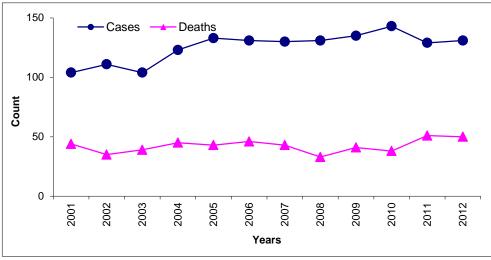


Figure 37: Kidney and Renal Pelvis Cancer Cases and Deaths by Year, South Dakota, 2001 -2012

The incidence peak for kidney and renal pelvis cancer occurred in 2010.

Source: South Dakota Department of Health

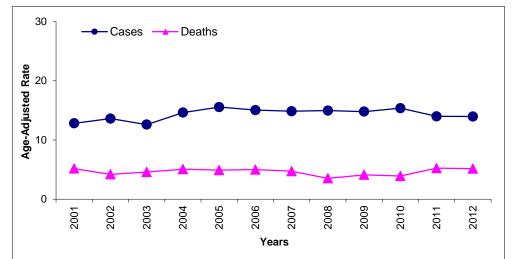


Figure 38: Kidney and Renal Pelvis Cancer Age-Adjusted Rates, Cases, and Deaths by Year, South Dakota, 2001 - 2012

Rates per 100,000 age-adjusted to 2000 US standard population and SD estimated populations. Source: South Dakota Department of Health