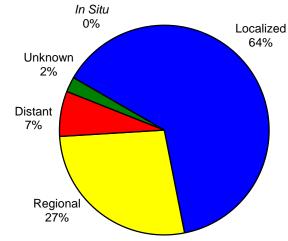
Table 27: Thyroid Incidence and Mortali	ty Summary, 2016
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Thursid Consor			Incidence			Mortality		
Thyroid Cancer		Total	Male	Female	Total	Male	Female	
South Dakota	Total	# Cases / Deaths	130	38	92	8	3	5
		Age-Adjusted Rate	15.1	8.4	22.0	8.0	0.8	0.9
	White	# Cases / Deaths	121	34	87	7	3	4
		Age-Adjusted Rate	16.0	8.6	23.9	8.0	0.8	0.7
	American Indian	# Cases / Deaths	7	2	5	1	0	1
	American indian	Age-Adjusted Rate	15.0	5.4	22.3	3.6	0.0	6.3
United States	Total	Age-Adjusted Rate	15.1	7.8	22.3	0.5	0.5	0.5
	White	Age-Adjusted Rate	15.8	8.2	23.5	0.5	0.6	0.5
	American Indian	Age-Adjusted Rate	9.0	4.0	13.7	*	*	*

Rates per 100,000 age-adjusted to 2000 US standard population and 2016 SD estimated population. US rates <a href="https://www.seer.cancer.gov">www.seer.cancer.gov</a> \*=rate suppressed. Source: South Dakota Department of Health

Figure 73: Thyroid Cancer Stage at Diagnosis, South Dakota, 2016



Source: South Dakota Department of Health

## **Descriptive Epidemiology**

Stage at Diagnosis: In 2016, data demonstrates that 83 (64%) of cases were diagnosed at a localized stage. When a patient is diagnosed at an early stage, the prognosis is much better for a cure. There were 35 (27%) cases diagnosed at a regional stage. Nine cases (7%) were diagnosed at a distant stage.

Incidence: The American Cancer Society estimated 64,300 thyroid cancer cases would be diagnosed in the United States in 2016. Thyroid cancer continues to account for approximately 2.8% of all cancers in South Dakota. Of the 130 cases diagnosed in 2016, 38 were male and 92 were female. The median age at diagnosis was 52 for South Dakota and 51 for the United States. Thyroid cancer is

found more commonly in people between the ages of 45 and 70 years of age, with 78% diagnosed before age 65. It is predominately a disease of females as the statistics for South Dakota confirm.

**Mortality:** South Dakota had only eight deaths attributed to thyroid cancer in 2016. Nationally, the five-year relative survival rates were 99.9% for localized, 98.2% for regional, and 89.1% for the unknown stage.

**Risk and Associated Factors:** Thyroid cancer accounted for only 2.8% of the cancer cases in South Dakota in 2016. Risk factors include being exposed to radiation to the head and neck in childhood. Other risk factors for the development of thyroid cancer include a history of goiter, family history of thyroid disease, and Asian race.

Early Detection and Prevention: Early detection of cancer of the thyroid is extremely important. There are currently no tests or screenings for early detection of thyroid cancer. Physical examinations may reveal a lump on the side of neck, hoarseness of the voice, and difficulty swallowing. Most cancerous thyroid tumors are slow growing and curable. Prompt attention to signs and symptoms is the best approach to early diagnosis of most thyroid cancers. Signs or symptoms include:

- A lump in the neck, sometimes growing rapidly
- Pain in the neck, sometimes going up to the ears
- Hoarseness
- Trouble swallowing
- Breathing problems (feeling as if one were breathing through a straw)
- A cough that persists and is not due to a cold

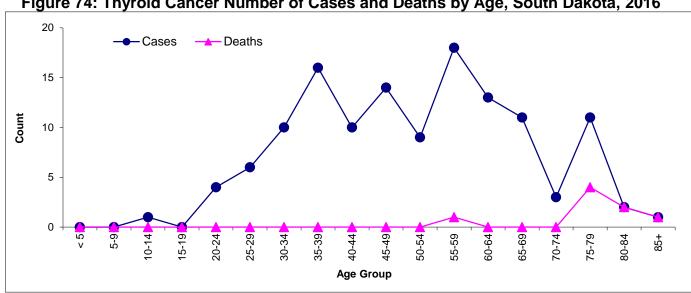


Figure 74: Thyroid Cancer Number of Cases and Deaths by Age, South Dakota, 2016

Source: South Dakota Department of Health

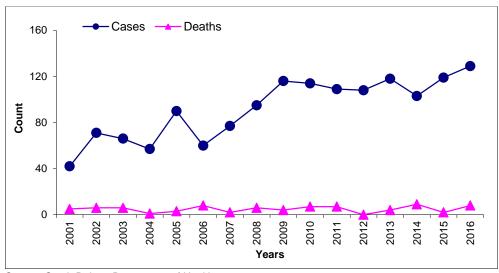


Figure 75: Thyroid **Cancer Cases and** Deaths by Year, South Dakota, 2001 - 2016

The incidence count for thyroid cancers peaked in 2016.

Source: South Dakota Department of Health

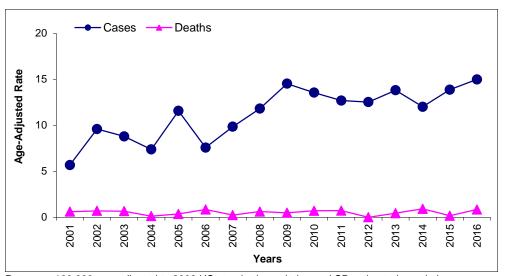


Figure 76: Thyroid Cancer Age-Adjusted Rates, Cases, and Deaths by Year, South Dakota, 2001 - 2016

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