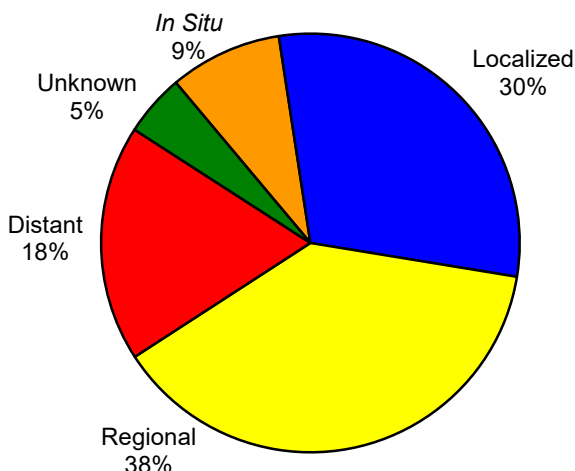


Table 15: Colorectal Incidence and Mortality Summary, 2017

Colorectal Cancer			Incidence			Mortality		
			Total	Male	Female	Total	Male	Female
South Dakota	Total	# Cases / Deaths Age-Adjusted Rate	420 39.9	225 45.6	195 34.4	158 14.1	85 17.0	73 11.8
	White	# Cases / Deaths Age-Adjusted Rate	383 39.0	203 44.1	180 34.1	140 13.2	80 16.9	60 10.3
	American Indian	# Cases / Deaths Age-Adjusted Rate	31 66.0	18 82.9	13 51.2	15 33.4	4 13.9	11 47.0
United States	Total	Age-Adjusted Rate	36.6	41.6	32.4	13.5	16.0	11.4
	White	Age-Adjusted Rate	36.2	40.9	32.1	13.2	15.6	11.2
	American Indian	Age-Adjusted Rate	35.5	34.5	35.9	15.7	17.7	13.6

Rates per 100,000 age-adjusted to 2000 US standard population and 2017 SD estimated population. US rates www.seer.cancer.gov Source: South Dakota Department of Health

Figure 27: Colorectal Cancer Stage at Diagnosis, South Dakota, 2017



Source: South Dakota Department of Health

Descriptive Epidemiology

Stage at Diagnosis: The prognosis of the patient is greatly influenced by the stage of disease at diagnosis. In 2017, 30% (138) of the cases of colorectal cancer were diagnosed at a localized stage. Localized is defined as when the disease is still confined to the colon. The remaining 260 invasive cases (57%) were diagnosed after the disease had spread beyond the colon. Of those 260 cases, 84 were diagnosed at a distant stage when the disease had spread further involving other organs. The SEER National Cancer Institute website states that the five-year survival rate for those who have a distant stage at diagnosis is 14.3% for the 2010-2016 time period.

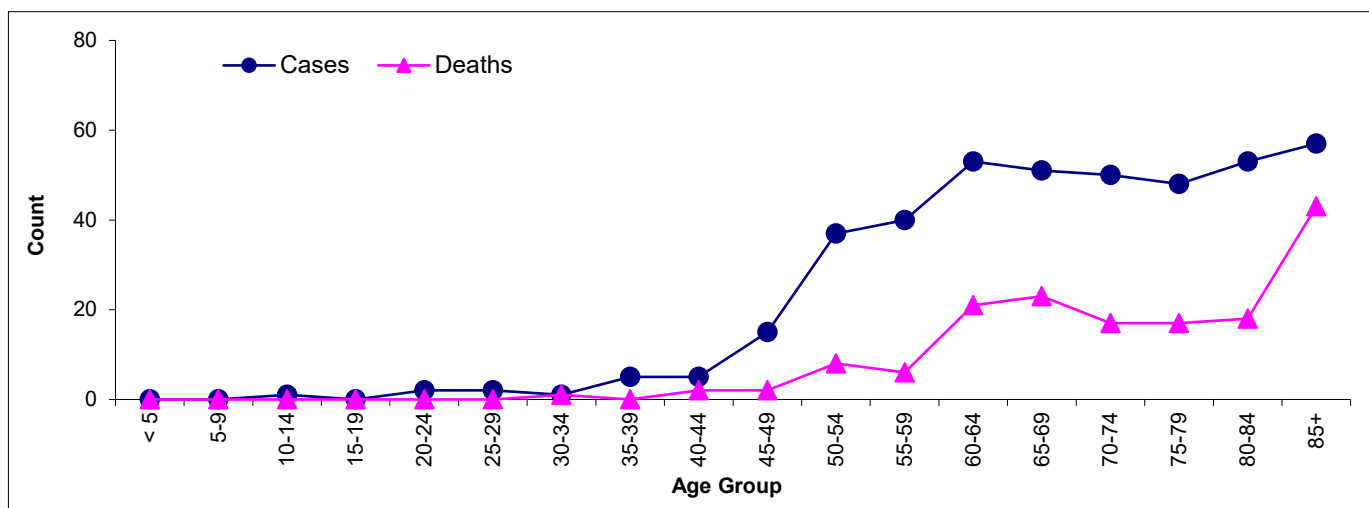
Incidence: Colorectal cancer accounted for 8.9% of all cases reported in South Dakota in 2017. The median age at diagnosis was 69. There were 225 men and 195 women diagnosed with colorectal cancer in 2017 in South Dakota. Overall, colorectal cancer was the fourth most diagnosed cancer. When reviewed by gender, it was the third most diagnosed cancer with 9.1% of the cancers reported in males and 8.6% of the cancers reported in females.

Mortality: Overall incidence and mortality rates for colorectal cancer are decreasing. The overall five-year survival rate for 2010-2016 from SEER was 64.6% for men and women. In 2017, there were a total of 158 deaths that were attributed to colorectal cancer in South Dakota; about 15 more men than women. Of that number, 140 were white and fifteen were American Indian. The median age at death was 74. The SEER National Cancer Institute website states that the United States mortality rate was 13.5.

Risk and Associated Factors: Risk for colorectal cancer increases with age. Over 90% of cases occur in people who are 50 years old or older. Lifestyle factors that may contribute to an increased risk include lack of regular physical activity, a diet low in fruit and vegetables, a low-fiber and high-fat diet, overweight and obesity, alcohol consumption, and tobacco use.

Prevention and Early Detection: The USPSTF recommends screening for colorectal cancer starting at age 50 and continuing until age 75. Recommended screening methods include high-sensitivity fecal occult blood test (FOBT), fecal immunochemical test (FIT), FIT-DNA, colonoscopy, CT colonography, & flexible sigmoidoscopy. The risks and benefits of these screening methods vary.

Figure 28: Colorectal Cancer Number of Cases and Deaths by Age, South Dakota, 2017



Source: South Dakota Department of Health

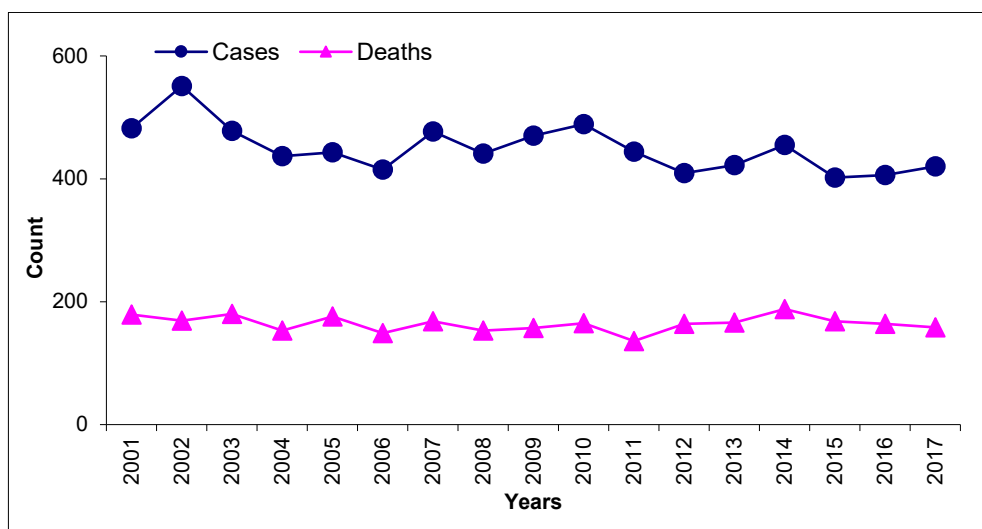


Figure 29: Colorectal Cancer Cases and Deaths by Year, South Dakota, 2001 – 2017

The incidence peak for colorectal cancer occurred in 2002. Incidences of colorectal cancer appear to escalate after age 50.

Source: South Dakota Department of Health

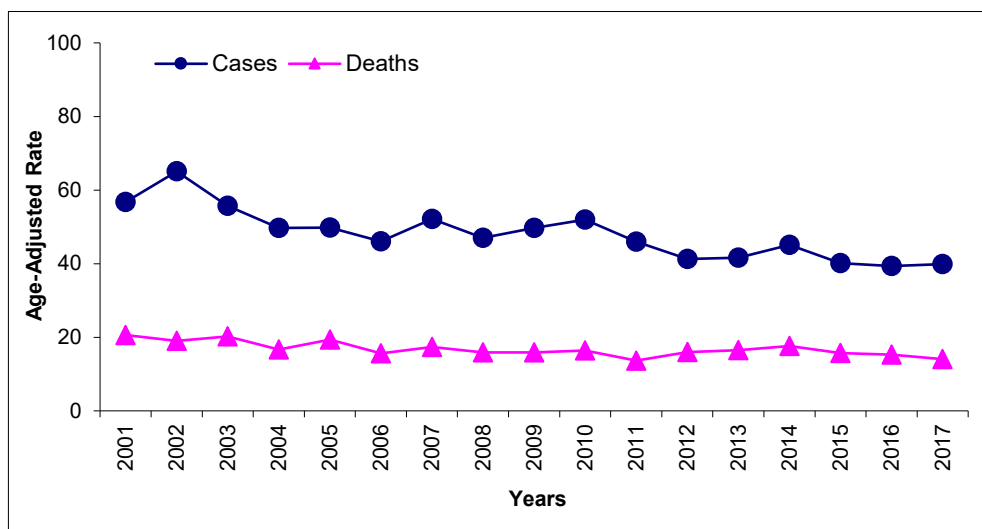


Figure 30: Colorectal Cancer Age-Adjusted Rates, Cases, and Deaths by Year, South Dakota, 2001 - 2017

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