Esophagus

Summary	Male		Female	
	Utah 1996-2000	US 1996-99	Utah 1996-2000	US 1996-99
Average annual age-adjusted incidence rates*	5.1	8.1	1.0	2.1
Rank among cancer incidence rates	14	11	<20	<20
Average annual number of new cases	34	9,340	8	3,250
Percent of all new cancer cases	1.1 %	1.5 %	0.3 %	0.5 %
Lifetime risk of this cancer (00-79 years)	1 in 204	1 in 114	1 in 991	1 in 433
Average annual age-adjusted mortality rates*	4.7	7.6	0.8	1.8
Rank among cancer mortality rates	10	6	20	16
Average annual of deaths	31	8,729	7	2,819
Percent of all cancer deaths	2.6 %	3.1 %	0.6 %	1.1 %
* Rates per 100,000 and standardized to the 2000 U.S. population				

Incidence rates for esophageal cancer vary widely throughout the world. Among the highest rates are those reported in an area encompassing northern Iran, Turkmenistan, Kazakhstan, and Uzbekistan, and in Northern and Western China. The risk of this disease in these areas is as much as thirty times that experienced in the United States. These diverse geographic patterns, and a decrease in esophageal cancer rates in migrants who move from a high- to a low-risk area, suggest that environmental factors play an important role in the etiology of this disease.

Incidence rates for esophageal cancer increased in the United States during the period 1981-2000. This increase was more pronounced for males than females. Similar trends were observed in Utah, though the rates of disease were lower here than elsewhere. Much of the increase in men was in rates of adenocarcinomas. The reason for these changes is unknown.

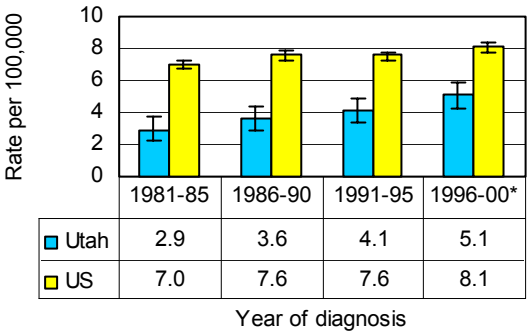
The relative importance of different risk factors for this disease varies by geographic region. Virtually all studies have found an inverse association between socioeconomic status and risk, and a relationship with malnutrition, notably deficiencies of riboflavin, zinc, and vitamins A and C. In the United States and other western countries, alcohol and cigarette consumption account for as much as 75 percent of all cases, but play a less prominent role in Asia, where nutritional and other factors are thought to be the most important determinants of this disease.

In the United States, the most important preventive measures are to limit alcohol consumption and to avoid the use of tobacco. Improving the nutritional status of the population, especially among those at increased risk for the disease, may further reduce risk. The efficacy of screening for this disease has not been established.

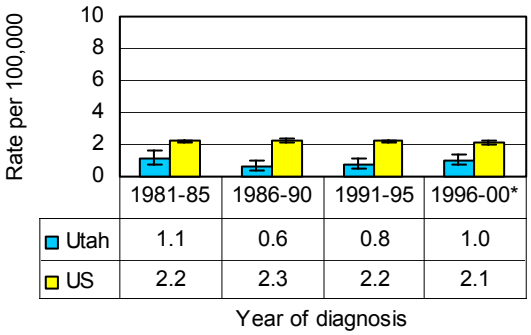
Esophagus — *Incidence*

Average annual age-adjusted incidence rates per 100,000 (US 2000 standard) by 5-year time period and sex, 1981-2000

Male

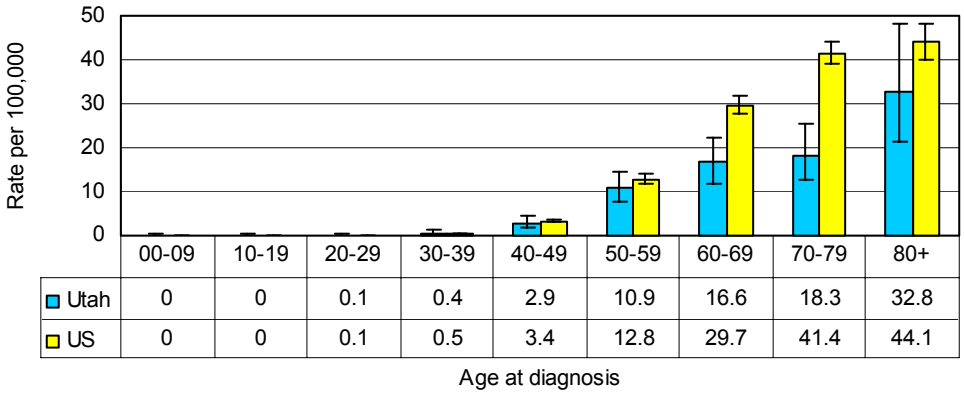


Female

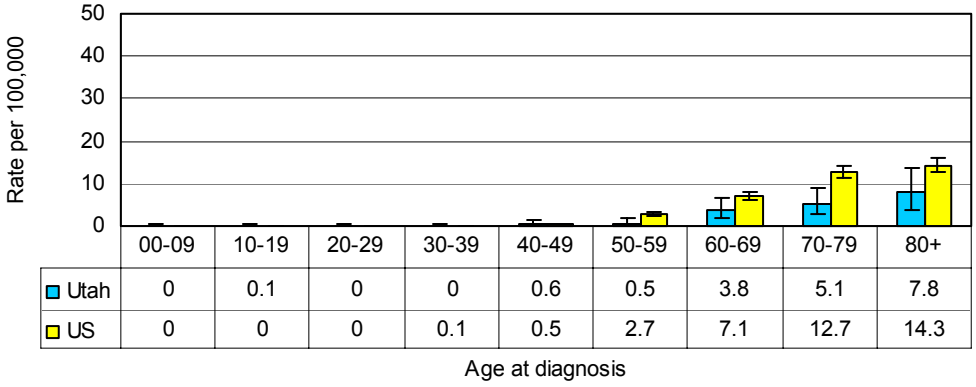


Average annual age-specific incidence rates per 100,000 by sex, 1996-2000

Male



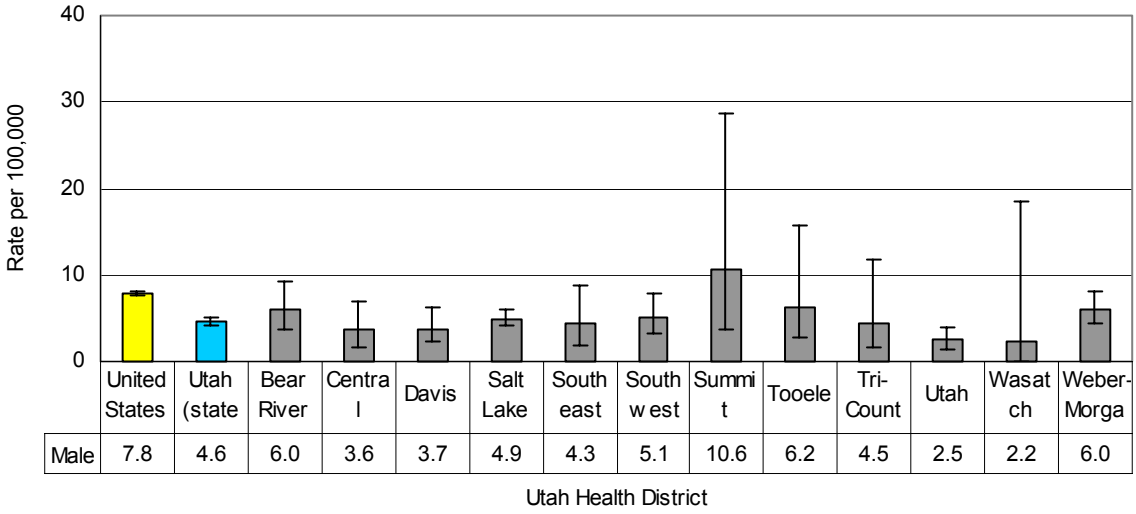
Female



Esophagus | *Incidence*

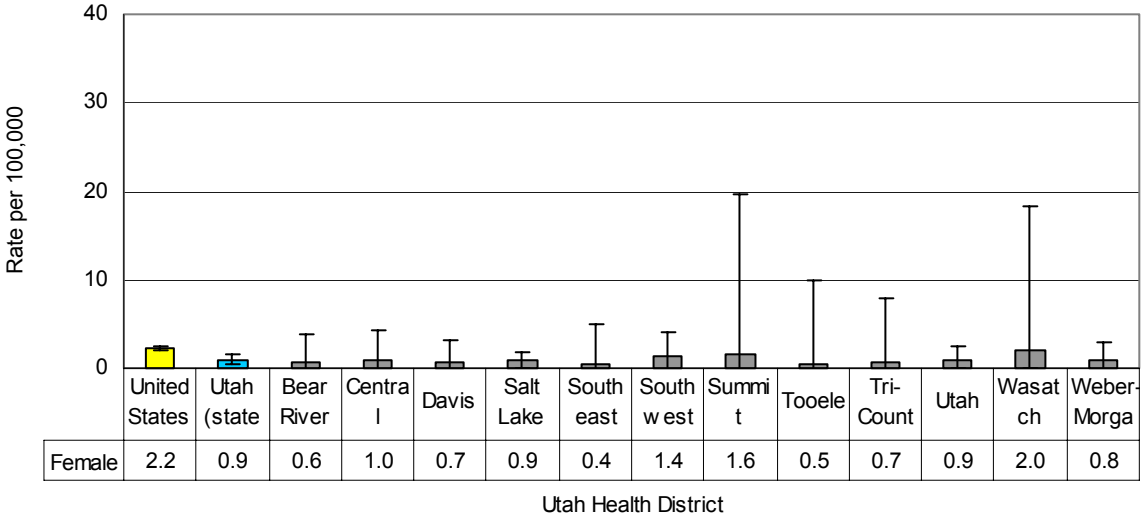
Average annual age-adjusted incidence rates per 100,000 (US 2000 standard) for twelve Utah Health Districts, by sex, for the time period 1991-2000, with rates from Utah (statewide) and the United States for comparison

Male



	United States	Utah (state	Bear River	Central	Davis	Salt Lake	South east	South west	Summit	Tooele	Tri-County	Utah	Wasatch	Weber-Morga
Male	7.8	4.6	6.0	3.6	3.7	4.9	4.3	5.1	10.6	6.2	4.5	2.5	2.2	6.0

Female

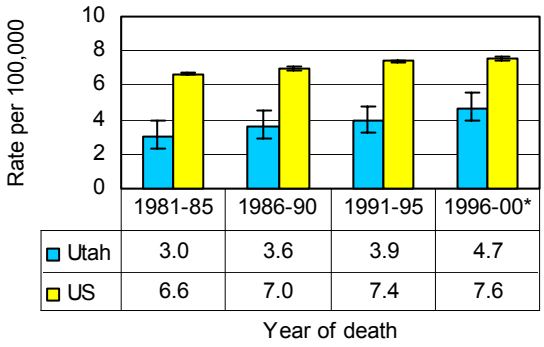


	United States	Utah (state	Bear River	Central	Davis	Salt Lake	South east	South west	Summit	Tooele	Tri-County	Utah	Wasatch	Weber-Morga
Female	2.2	0.9	0.6	1.0	0.7	0.9	0.4	1.4	1.6	0.5	0.7	0.9	2.0	0.8

Esophagus — *Mortality*

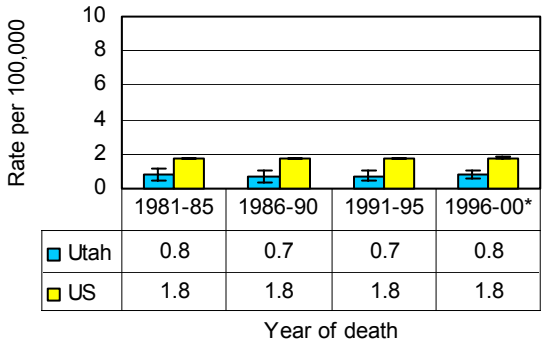
Average annual age-adjusted mortality rates per 100,000 (US 2000 standard) by 5-year time period and sex, 1981-2000

Male



	1981-85	1986-90	1991-95	1996-00*
Utah	3.0	3.6	3.9	4.7
US	6.6	7.0	7.4	7.6

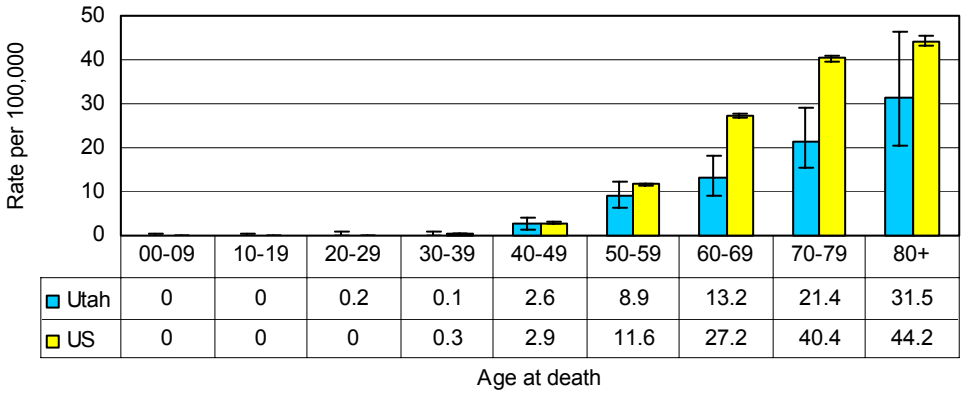
Female



	1981-85	1986-90	1991-95	1996-00*
Utah	0.8	0.7	0.7	0.8
US	1.8	1.8	1.8	1.8

Average annual age-specific mortality rates per 100,000 by sex, 1996-2000

Male



	00-09	10-19	20-29	30-39	40-49	50-59	60-69	70-79	80+
Utah	0	0	0.2	0.1	2.6	8.9	13.2	21.4	31.5
US	0	0	0	0.3	2.9	11.6	27.2	40.4	44.2

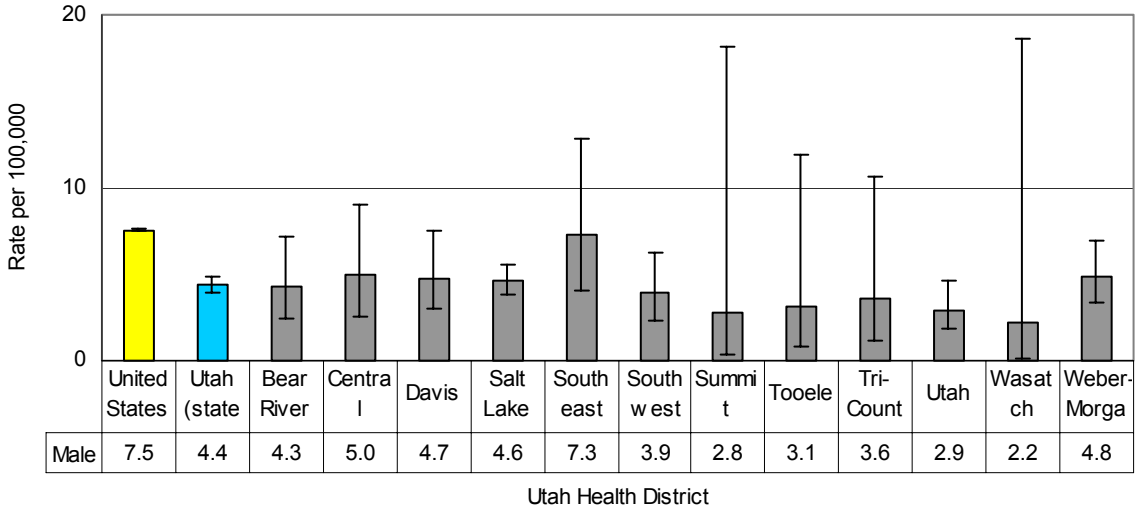
Female

	00-09	10-19	20-29	30-39	40-49	50-59	60-69	70-79	80+
Utah	0	0	0	0	0.5	1	2.4	3	8.5
US	0	0	0	0.1	0.4	2.1	5.8	10.1	15.2

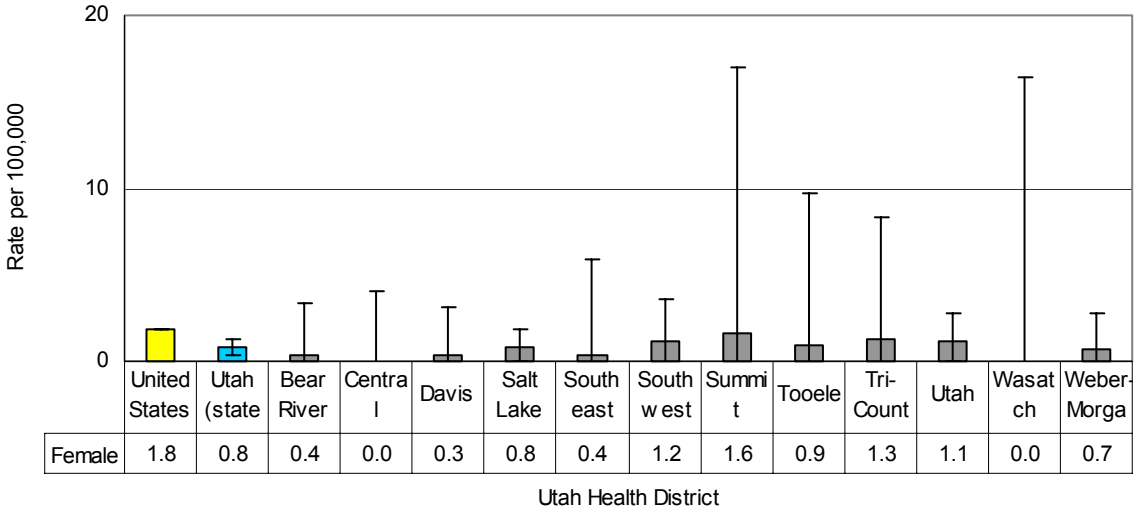
Esophagus — *Mortality*

Average annual age-adjusted mortality rates per 100,000 (US 2000 standard) for twelve Utah Health Districts, by sex, for the time period 1991-2000, with rates from Utah (statewide) and the United States for comparison

Male

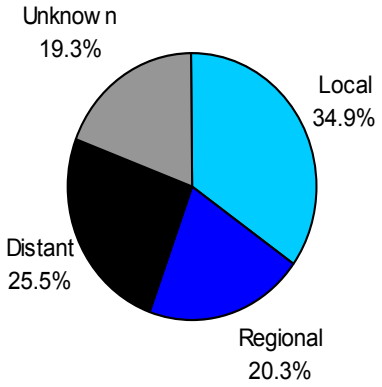


Female



Esophagus — *Stage and Survival*

Stage of disease at diagnosis:
Utah residents diagnosed 1996-2000



5-year relative survival by stage:
Utah residents diagnosed 1991-95