

Cancer in Utah

Larynx

<i>Summary</i>	Male		Female	
	Utah 1996-2000	US 1996-99	Utah 1996-2000	US 1996-99
Average annual age-adjusted incidence rates*	3.6	7.1	0.9	1.7
Rank among cancer incidence rates	<20	13	<20	<20
Average annual number of new cases	24	8,370	7	2,460
Percent of all new cancer cases	0.7 %	1.3 %	0.2 %	0.4 %
Lifetime risk of cancer (00-79 years)	1 in 268	1 in 123	1 in 1,011	1 in 524
Average annual age-adjusted mortality rates*	1.0	2.7	0.2	0.6
Rank among cancer mortality rates	20	16	<20	<20
Average annual of deaths in Utah	6	3,026	2	826
Percent of all cancer deaths in Utah	0.5 %	1.1 %	0.2 %	0.3 %
* Rates per 100,000 and standardized to the 2000 U.S. population				

Virtually all tumors of the larynx are squamous cell carcinomas. Most of these tumors occur in the glottis and supraglottal region, while relatively few arise in the subglottal portion of the larynx. Because tobacco causes both lung and laryngeal tumors, the incidence rates for these two sites tend to follow similar patterns.

Males are at greater risk of laryngeal cancer than females. For both sexes, incidence rates increase with age after age 30 years, then decline after reaching their peak in the eighth decade of life. There was a slight decline in laryngeal cancer incidence rates among men during the period 1981-2000, while rates were relatively stable among women.

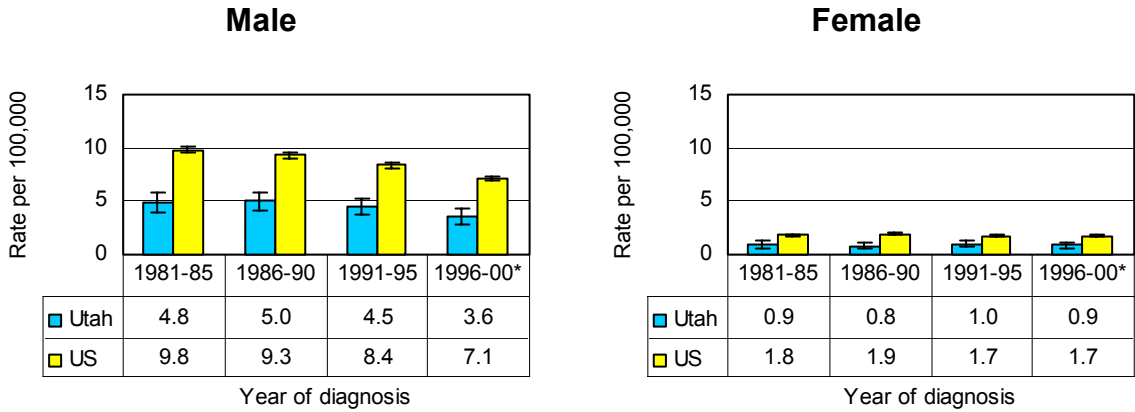
Tobacco and alcohol are the two primary risk factors that have been established for laryngeal cancer. As with oral and esophageal tumors, tobacco and alcohol act synergistically to increase the risk of this disease beyond simply adding the separate risks from each of these exposures. Some occupations have been associated with an increased risk, including those that involve exposure to asbestos, nickel, wood dust, formaldehyde, mustard gas, and alcohol. However, these occupational exposures are relatively rare and probably account for only a small percentage of all cases of laryngeal cancer. Recent studies suggest that consumption of fruits and vegetables may reduce the risk of laryngeal tumors.

Avoidance of tobacco products and drinking alcohol in moderation are the two most important measures to prevent this disease. Increasing one's dietary

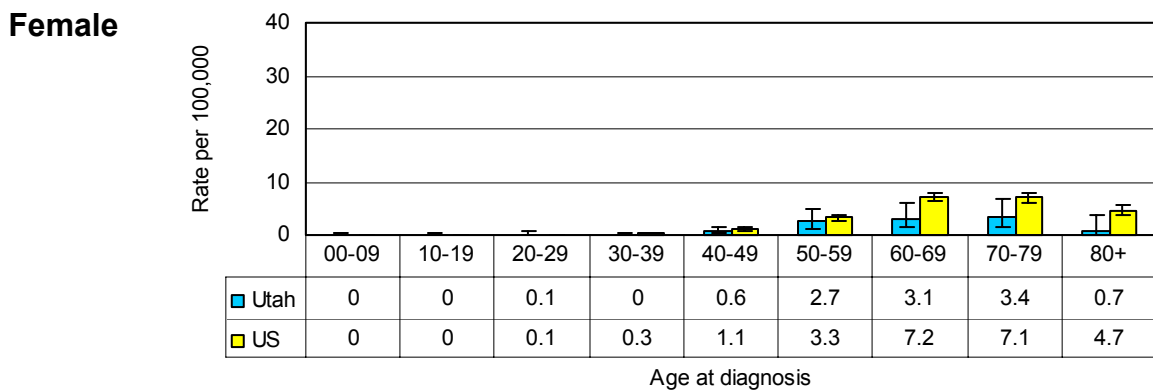
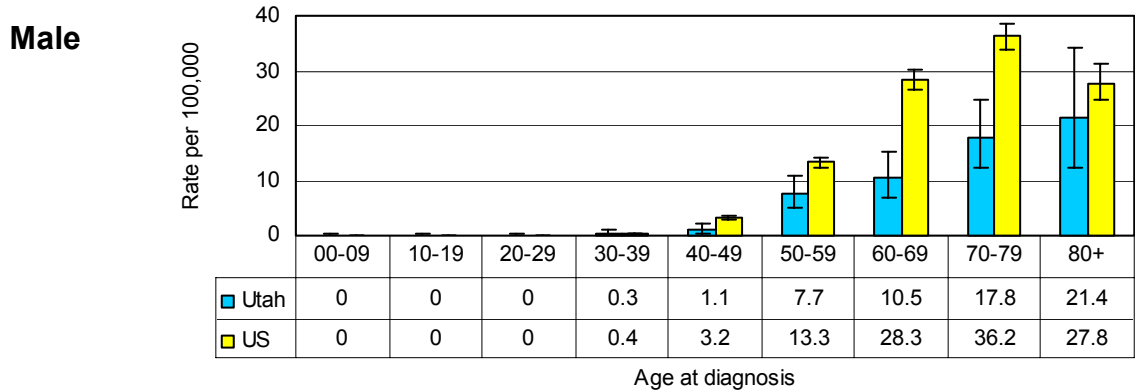
Cancer in Utah

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



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

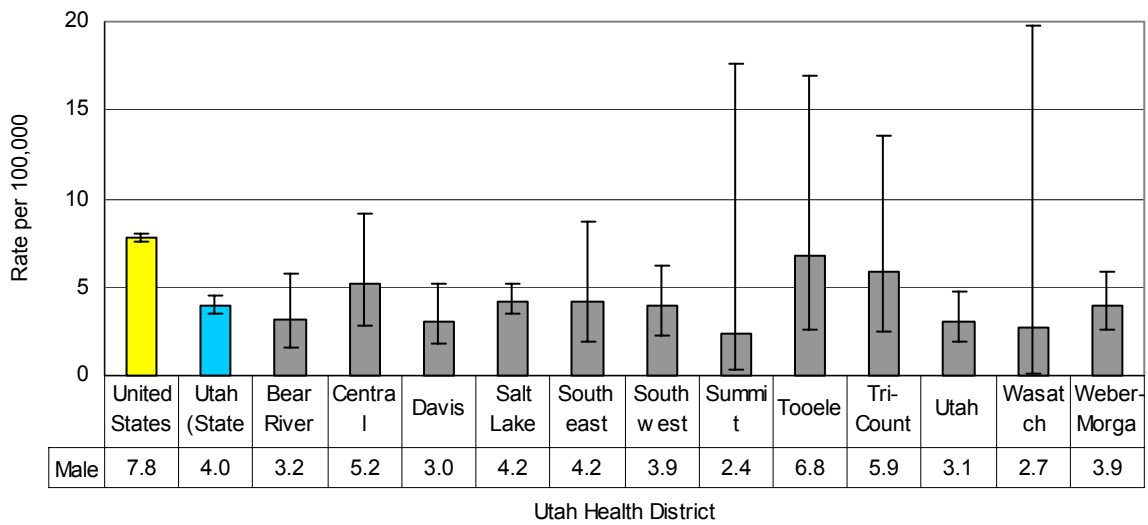


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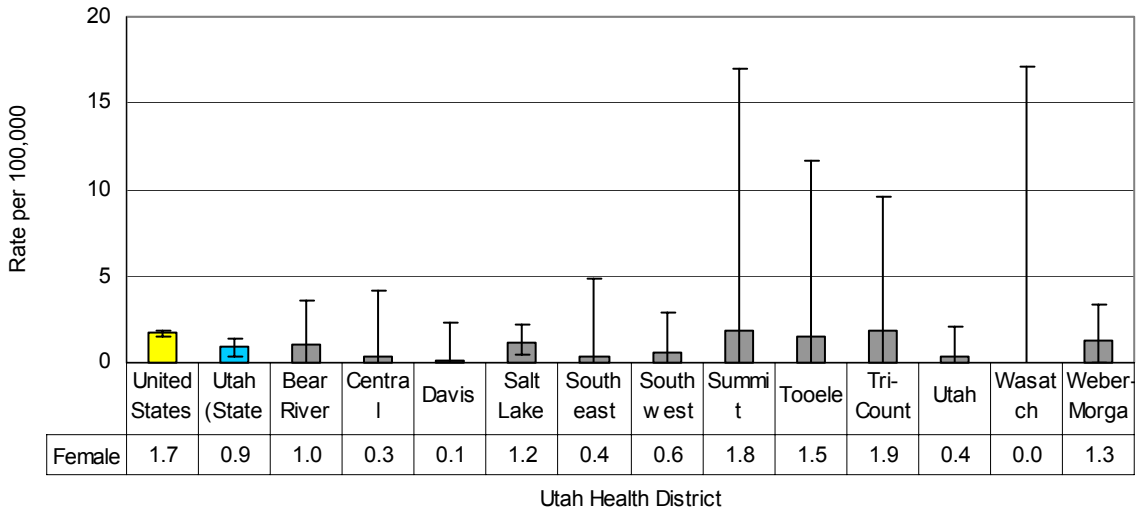
Larynx	Incidence
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Average annual age-adjusted incidence rates per 100,000 (US 2000 standard) for twelve Utah Health Districts, by sex, for the time period 1991-2000, with rates from Utah (statewide) and the United States for comparison

Male



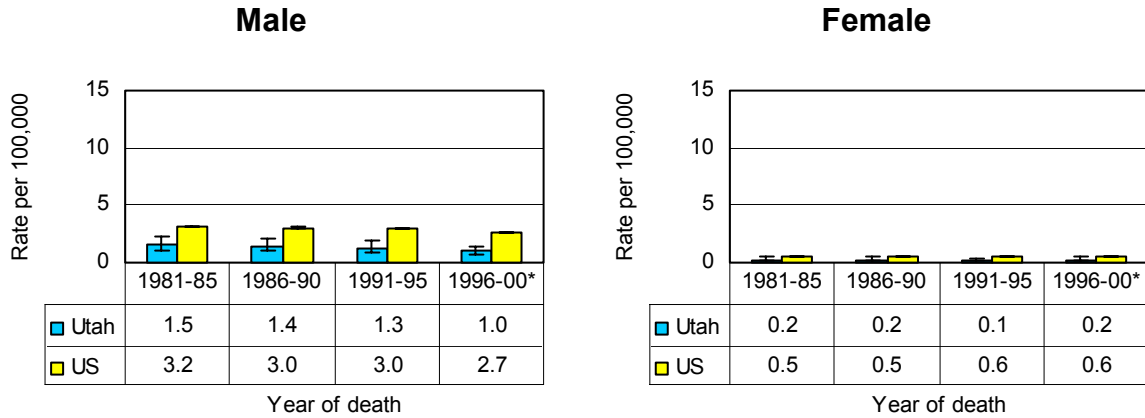
Female



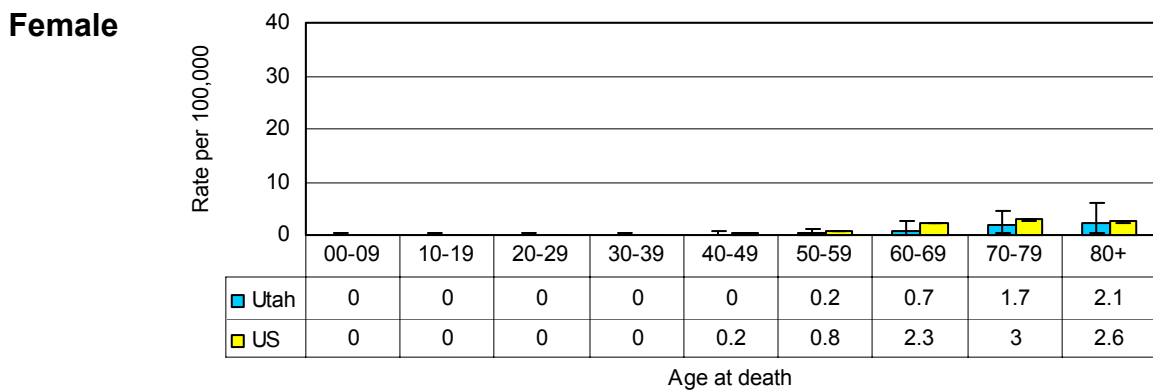
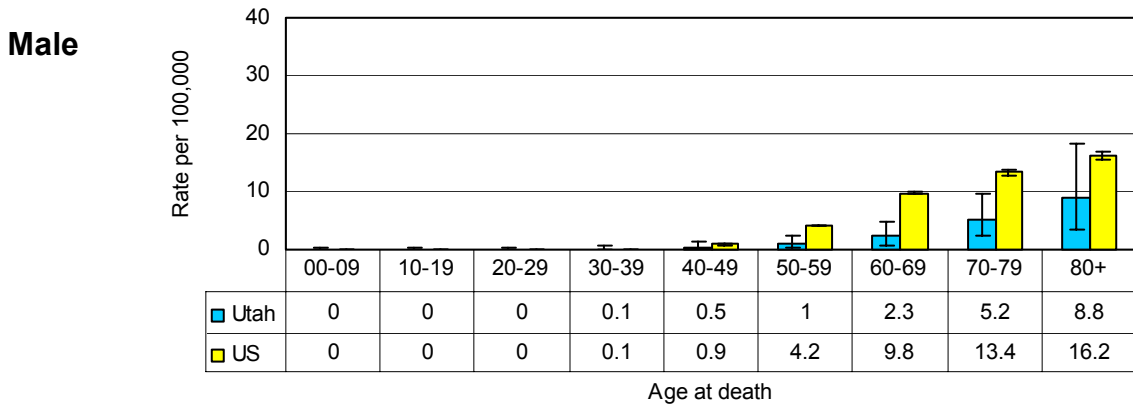
Cancer in Utah

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



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

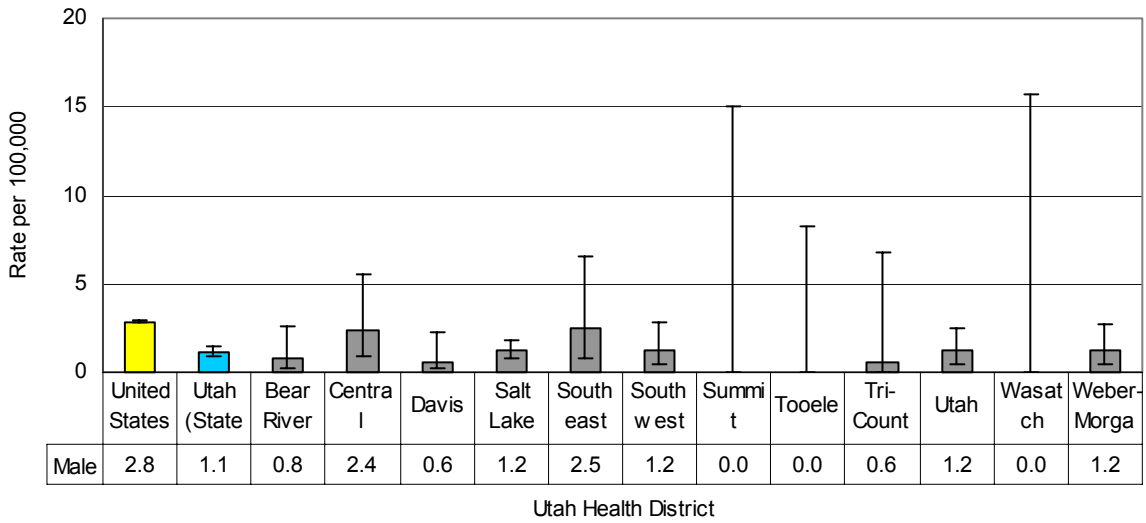


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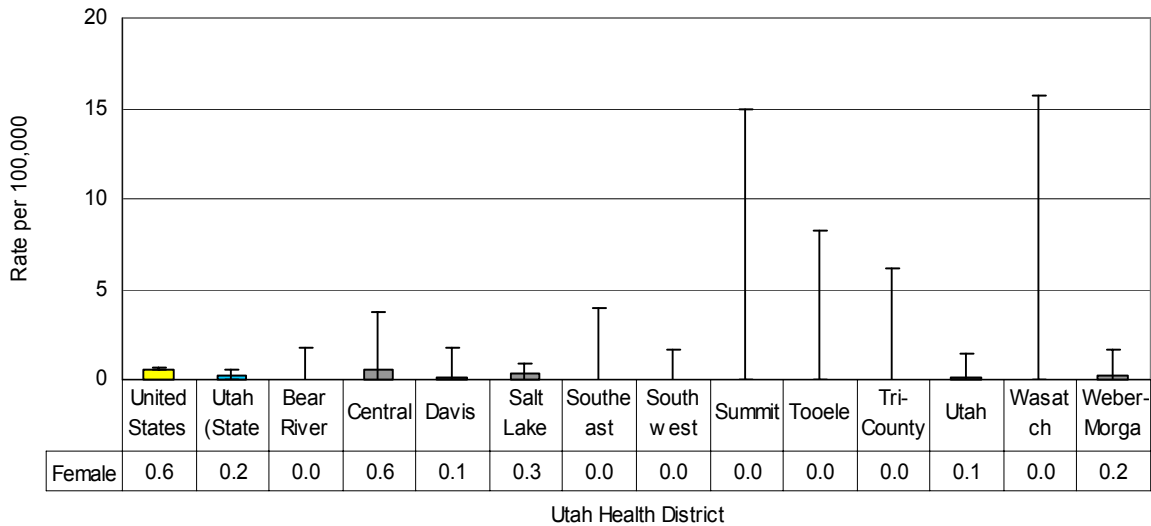
Larynx	Mortality
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Average annual age-adjusted mortality rates per 100,000 (US 2000 standard) for twelve Utah Health Districts, by sex, for the time period 1991-2000, with rates from Utah (statewide) and the United States for comparison

Male



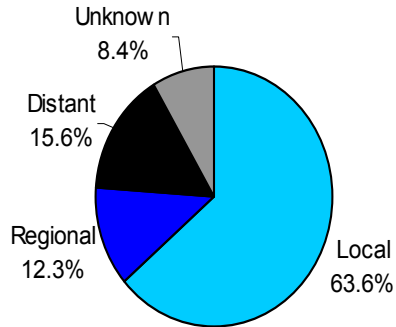
Female



Cancer in Utah

Larynx *Stage and Survival*

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



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

