Colorectal Cancer Predictors and Colorectal Cancer Screening Among Adults Aged 50 to 64 Years, 2007-2011, Georgia

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Background

- Colorectal cancer (CRC) is among the leading causes of cancer incidence and mortality among Georgians. Colorectal cancers develop slowly over a period of several years. Screening can prevent CRC by finding and removing polyps before they turn cancerous. Colorectal cancer affects both men and women and most often occurs in people over 50 years of age. Managing risk factors and targeting screening messages to adults ages 50-64 years can decrease incidence and mortality rates.

Methods

- CRC incidence data were obtained from the Georgia Comprehensive Cancer Registry (GCCR) for 2007-2011. Risk factor and screening prevalence data were obtained from the Georgia Behavioral Risk Factor Surveillance System (BRFSS) for 2011.

Results

- Males were 41% more likely than females to be diagnosed with CRC (age-adjusted rate 96/100,000 vs. 68/100,000) and 58% more likely to die from CRC (age-adjusted rate 96/100,000 vs. 68/100,000) and 58% more likely to be current smokers (Table 1).

- Adults who had health insurance were nearly twice as likely to meet the recommendation for CRC screening and were half as likely to be current smokers (Table 1).

- Georgia’s Southwest Public Health District (8-2) had the highest percentage (77%) of adults aged 50-64 years who met the recommendation for CRC screening, while the North Georgia Public Health District (1-2) had the lowest percentage (32%), (Figure 2).

Figure 1. Age-Adjusted *Colorectal Cancer Incidence Rates for Adults Ages 50-64 Years by Sex and Race/Ethnicity, Georgia, 2007-2011

<table>
<thead>
<tr>
<th>Sex</th>
<th>Obese</th>
<th>Current Smoker</th>
<th>Physically Inactive</th>
<th>Diabetes</th>
<th>Colonoscopy Screening</th>
</tr>
</thead>
<tbody>
<tr>
<td>Male</td>
<td>34</td>
<td>24</td>
<td>28</td>
<td>18</td>
<td>54</td>
</tr>
<tr>
<td>Female</td>
<td>35</td>
<td>19</td>
<td>30</td>
<td>16</td>
<td>61</td>
</tr>
</tbody>
</table>

Table 1. Prevalence (%) of Risk Factors Associated with Colorectal Cancer and Colorectal Screening, Among Adults Ages 50-64 Years, By Demographic Factors, Georgia, 2011

- Adults ages 50-64 years who were non-Hispanic black males, were more likely than non-Hispanic white males to be diagnosed with colorectal cancer. Additionally, non-Hispanic black females were more likely than non-Hispanic white females to be diagnosed with colorectal cancer. (Figure 1).

- Blacks have higher CRC incidence as compared to whites, and are the second-most uninsured population in the United States (U.S.). Hispanics are the most uninsured population in the U.S. Provider education, targeted messages, and media campaigns should be utilized to reach these populations to achieve an 80% CRC screening rate by 2018. Target populations are the newly insured, insured individuals who do not utilize screening services, and financially challenged individuals.

Conclusion

- Blacks have higher CRC incidence as compared to whites, and are the second-most uninsured population in the United States (U.S.). Hispanics are the most uninsured population in the U.S. Provider education, targeted messages, and media campaigns should be utilized to reach these populations to achieve an 80% CRC screening rate by 2018. Target populations are the newly insured, insured individuals who do not utilize screening services, and financially challenged individuals.

*The Colorectal Cancer Screening Recommendation is defined as the percent of adults who had a FOBT in the last year, and/or sigmoidoscopy in the last 5 years, and/or colonoscopy in the last 10 years.