

**2014 NORTH CAROLINA CANCER INCIDENCE BY GENDER  
PER 100,000 POPULATION  
AGE-ADJUSTED TO THE 2000 US CENSUS**

SITE	All Males		All Females		Total	
	Cases	Rate	Cases	Rate	Cases	Rate
Oral Cavity	1,040	19.0	381	6.1	1,421	12.1
Esophagus	432	7.9	99	1.5	531	4.4
Stomach	401	7.6	289	4.7	690	6.0
Colon & Rectum	2,123	41.2	1,981	31.8	4,104	36.0
Liver	693	12.5	263	4.1	956	7.9
Gallbladder	51	1.0	72	1.2	123	1.1
Pancreas	771	14.9	693	10.8	1,464	12.6
Larynx	375	6.9	102	1.5	477	3.9
Lung & Bronchus	4,291	82.5	3,588	55.7	7,879	67.3
Bone	47	1.0	53	1.0	100	1.0
Soft Tissue	185	3.7	163	2.8	348	3.2
Melanoma (Skin)	1,657	32.9	1,056	17.9	2,717	24.3
Female Breast	.	.	9,787	160.2	9,787	160.2
Cervix Uteri	.	.	393	7.5	393	7.5
Corpus Uteri	.	.	1,628	25.5	1,628	25.5
Ovary	.	.	597	9.7	597	9.7
Prostate	6,197	109.2	.	.	6,197	109.2
Testes	206	4.4	.	.	206	4.4
Bladder	1,701	35.1	549	8.5	2,250	19.8
Kidney	1,144	21.8	711	11.4	1,856	16.1
Endocrine	349	6.8	974	18.0	1,323	12.5
Multiple Myeloma	481	9.4	383	6.0	864	7.5
Leukemia	773	15.5	559	9.2	1,333	11.9
Brain & Other CNS (includes benign brain)	727	14.5	1,144	19.2	1,871	17.0
Brain & Other CNS (excludes benign brain)	343	6.8	283	5.0	626	5.8
Hodgkin Disease	137	2.8	113	2.1	250	2.4
Non-Hodgkin Lymphoma	983	19.5	825	13.3	1,809	16.0
Other Cancer	1,781	36.1	1,865	29.8	3,647	32.5
<b>All Cancers</b>	<b>26,161</b>	<b>498.4</b>	<b>27,407</b>	<b>445.3</b>	<b>53,576</b>	<b>465.0</b>

Produced by the NC Central Cancer Registry, 12/2016.

Numbers are subject to change as files are updated.

Cases may not sum to totals due to unknown or other values.

Cancers of the urinary bladder and female breast include in situ cases.

Rates are calculated using the bridged-race population estimates obtained from the National Center for Health Statistics available online at [www.cdc.gov/nchs/nvss/bridged\\_race/data\\_documentation.htm#vintage2015](http://www.cdc.gov/nchs/nvss/bridged_race/data_documentation.htm#vintage2015).

The widespread use of prostate-specific antigen (PSA) testing has dramatically changed the epidemiology of prostate cancer. According to the American Cancer Society, incidence rates for prostate cancer spiked dramatically in the United States in the late 1980s and early 1990s, in large part because of increased use of the PSA blood test for screening. Since then, rates have been steadily declining. From 2007 to 2011, incidence rates were stable in men younger than 65 and decreased by 2.8% per year in those 65 and older (1). SEER has reported similar findings. Using statistical models for analysis, rates for new prostate cancer cases have been falling on average 2.4% each year over the last 10 years (2).

The decline in rates may represent the effect of screening anticipation: incidence has become lower than expected as cases that were bound to present have already been diagnosed through screening. The decline in the incidence rate observed in North Carolina is consistent with that found in the national statistics and may suggest that the PSA screening prevalence effect is starting to subside. For more information on the PSA Test, see <http://www.cancer.gov/cancertopics/factsheet/detection/PSA>.

(1) American Cancer Society. *Cancer Facts & Figures 2015*. Atlanta: American Cancer Society; 2015.

(2) <http://seer.cancer.gov/statistics/summaries.html> (accessed 1/26/2015)