

# Annual report to the nation focuses on brain tumors

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Lung cancer death rates in women have fallen for the first time in four decades, according to an annual report on the status of cancer published online March 31 in the *Journal of the National Cancer Institute*. The drop comes about 10 years after lung cancer deaths in men began to fall, a delay that reflects the later uptake of smoking by women in the middle of the last century.

Overall, the cancer death rate has continued a decline that began in the early 1990s according to the report, which is published each year by the National Cancer Institute (NCI), the North American Association of Central Cancer Registries (NAACCR), the [Centers for Disease Control and Prevention](#) (CDC), and the American Cancer Society.

Lead author Betsy A. Kohler of NAACCR and colleagues collected information on cancer incidence (new cases) from the NCI, CDC, and NAACCR and on cancer deaths from the CDC's National Center for Health Statistics.

Incidence rates (new cases) also fell overall, according to the report. For certain cancers, however, incidence and/or deaths increased.

Highlights from this year's report, which covers periods from 1992 through 2007, include the following:

- Overall cancer incidence rates declined about 1 percent a year

and overall death rates fell an average 1.6 percent a year between 2003 and 2007.

- Among men, incidence of liver, kidney, and pancreatic cancer and melanoma increased from 2003-2007. Death rates increased for three of these cancers--liver and pancreatic cancer and melanoma.
- Among women, incidence of kidney, thyroid, and [pancreatic cancer](#) as well as leukemia and melanoma increased from 2003-2007. Death rates increased for pancreatic and liver cancer. Death rates for uterine cancer, after falling from 1975 through 1997, increased in the following decade.
- Trends in death rates during the most recent 10- and 5-year periods decreased for seven of the top 15 [cancer types](#) in both men and women (colon and rectum, brain [malignant], stomach, and kidney cancers, and non-Hodgkin lymphoma, leukemia, and myeloma); for cancers of the lung, prostate, and oral cavity in men; and for breast and bladder cancers in women. The decreases for ovary, lung, and cervical cancers were limited to the most recent 5-year period.
- Among children, cancer death rates continued a decline that began in the 1970s; however, the incidence of childhood cancer increased by about 0.6 percent a year from 1992-2007.
- Black men and women had the highest death rates overall but also the largest declines in death rates from 1998 through 2007. For new cancers, black men had the highest overall incidence rates. White women had the highest incidence rates among women.

## Brain Tumors

This year's report has a special section on brain tumors and includes, for the first time, data on non-malignant brain tumors diagnosed from 2004 through 2007. The authors found that the incidence of neuroepithelial brain tumors, a common, usually malignant type, fell an average 0.4 percent a year from 1987 through 2007. This decrease balanced an increase of about 2 percent a year from 1980 through 1987, leaving long-term incidence unchanged.

Other highlights from the brain tumor section of the report:

- Nonmalignant tumors were about twice as common as malignant tumors among adults aged 20 and older.
- Brain tumors in children were much rarer than in adults but much more likely to be malignant; 65.2 percent were malignant in children vs. 33.7 percent in adults.
- Tumors of the neuroepithelial tissue were the most common kind of malignant brain tumor and glioblastoma was the most common subtype of neuroepithelial tumors.
- The most common nonmalignant tumor was meningioma, and it was 2.3 times more common in women than in men.

In conclusion the authors write that the "decreases in overall cancer incidence and death rates in nearly all racial and ethnic groups are highly encouraging."

However, they note that the number of people in the U.S. age 65 years and older, people that are at increased risk of many common types of

cancer, is expected to double in size by 2030 compared to 2000.

"Even with declining cancer incidence rates," they write, "the absolute number of individuals diagnosed with cancer will continue to increase because of these population changes";" They conclude that "effective management of the cancer burden will require the application of sound cancer control strategies in prevention, detection, treatment, and survivorship, as well as resources to provide good quality of care."

Provided by Journal of the National Cancer Institute

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