

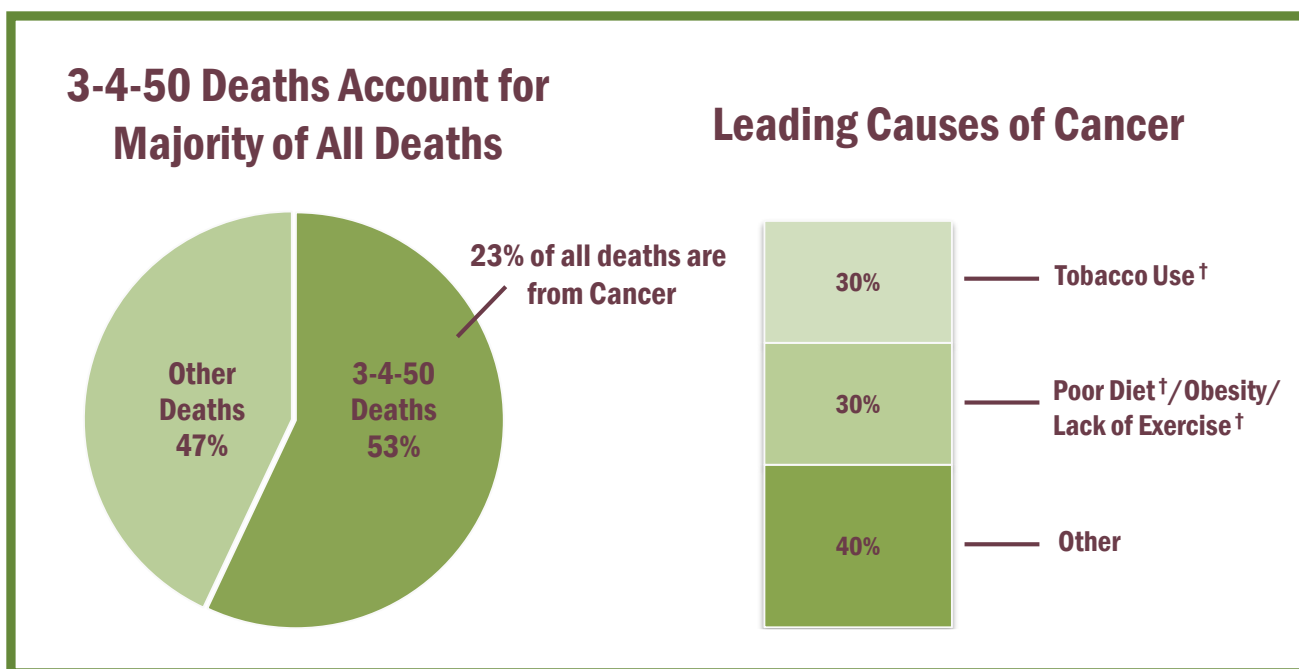
Cancer in Vermont



Vermonters today are more likely to die from a chronic disease than an infectious disease. 3-4-50 is a simple concept to help us grasp the reality that **3 health behaviors** contribute to **4 chronic diseases** that claim the lives of more than **50% of Vermonters**.

CANCER AND 3-4-50

Cancer is a leading cause of death in Vermont. Nearly two-thirds of cancer deaths in the U.S. are linked to tobacco use, poor diet, obesity and lack of physical activity. Additional causes of cancer include viruses and other biologic agents, family history of cancer, reproductive factors, prescription drugs or medical procedures, and environmental pollution.



Data Sources: 2016 Vermont Vital Statistics

Cancer Causes Control. 2012 April; 23(4): 601-608. doi:10.1007/s10552-012-9924-y.

[†] Behaviors that contribute to risk of developing cancer.

CANCER AND 3-4-50

Risk Factor	Increased Likelihood of Cancers
Excess Weight	Cancers of the breast (postmenopausal), colon and rectum, uterus and corpus, thyroid, pancreas, kidney, esophagus, gallbladder, ovary, liver, meninges, gastric cardia, multiple myeloma.
Tobacco	Cancers of the lung, trachea, and bronchus, the larynx (voice box), mouth, lips, esophagus, pharynx, bladder, kidney and renal pelvis, liver, stomach, pancreas, colon and rectum, cervix, and acute myeloid leukemia.

CANCER AND OBESITY

Overweight and obesity are associated with an increased risk of many types of cancer. Lack of physical activity and nutrition are the main contributors to obesity. Approximately 30% of the cancers diagnosed in the U.S. are linked to these risk factors.

The incidence of and mortality from obesity-associated cancers for Vermont men and women is not different compared to the U.S. However, 63% of Vermont adults reported being either overweight or obese (BRFSS, 2017), placing them at increased risk of cancer, cardiovascular disease, diabetes and lung disease.

Obesity Associated Cancers, Vermont, 2011-2015

	Incidence Rate per 100,000	New Cases (per year)	Mortality Rate per 100,000	Deaths (per year)
All Obesity Associated Sites	156.3	1,284	60.9	501

*Data Sources: Vermont Cancer Registry, Vermont Vital Statistics
All rates are age adjusted to the 2000 U.S. standard population.*

CANCER AND TOBACCO

Tobacco use is the number one cause of preventable death. People who use tobacco products or who are regularly around secondhand smoke have an increased risk of many different cancers. Lung cancer is the most common tobacco-associated cancer in Vermont and is the leading cause of cancer death in Vermont and the U.S.

The incidence of and mortality from tobacco-associated cancers for Vermont men and women is not different compared to the U.S. However, 17% of Vermont adults reported smoking tobacco (BRFSS, 2017), placing them at increased risk of cancer, cardiovascular disease, diabetes and lung disease.

Tobacco Associated Cancers, Vermont, 2011-2015

	Incidence Rate per 100,000	New Cases (per year)	Mortality Rate per 100,000	Deaths (per year)
All Tobacco Associated Sites	167.6	1,365	98.2	796
Lung, Bronchus, and Trachea Cancer	54.7	453	45.3	369

*Data Sources: Vermont Cancer Registry, Vermont Vital Statistics
All rates are age adjusted to the 2000 U.S. standard population.*

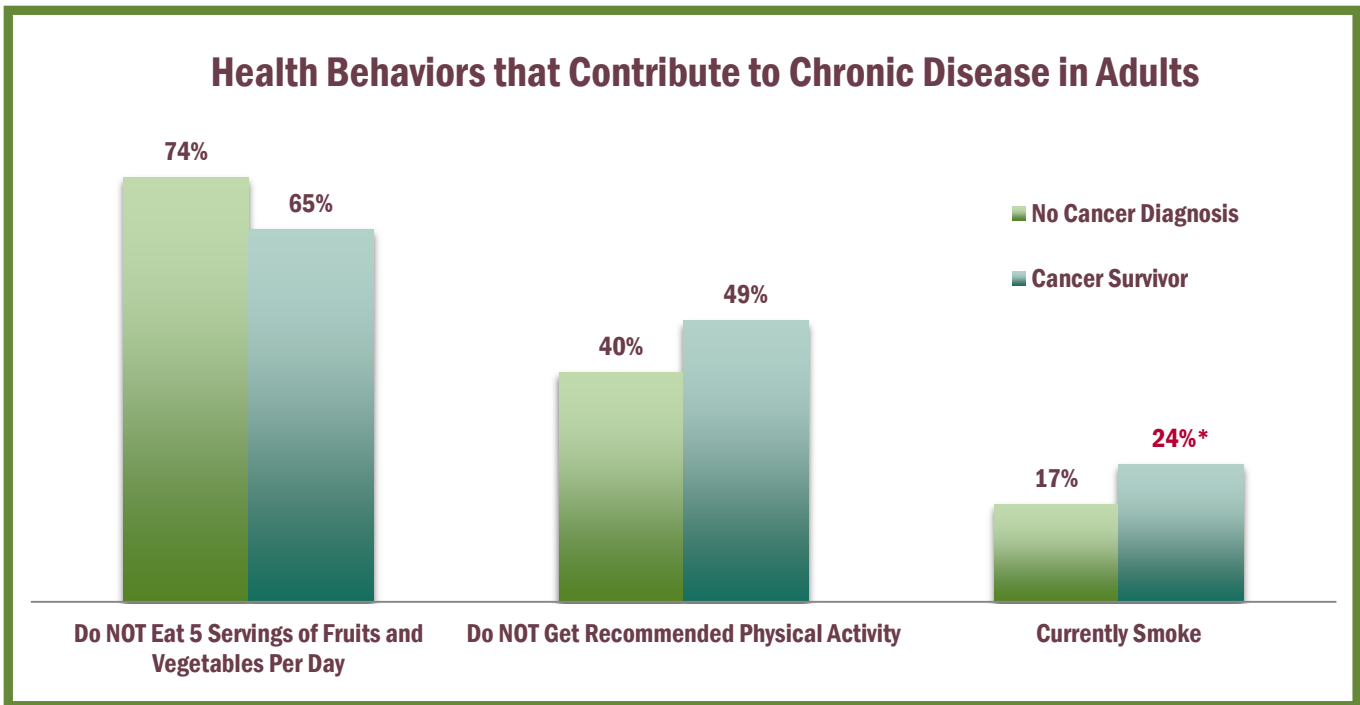
CANCER SURVIVORSHIP AND HEALTH BEHAVIORS

Cancer survivors face unique challenges to their physical health and maintaining a healthy lifestyle. Survivors are at greater risk for recurrence and for developing secondary cancers due to the effects of treatment, unhealthy lifestyle behaviors, underlying genetics or risk factors that contributed to the first cancer.

Tobacco Quitting smoking after a cancer diagnosis has been proven to increase survival rates, reduce risk of secondary cancers, improve treatment response and reduce treatment side effects as well as provide an improved quality of life.

Obesity Adopting or maintaining a healthy lifestyle after a cancer diagnosis can reduce morbidity and mortality from cancer and other chronic diseases. Reducing excess body weight through good nutrition and regular exercise can enhance the quality of life and extend the lifespan of cancer survivors. It can also reduce the risk of developing new cancer or a recurrence of the original cancer and experiencing treatment side effects.

Vermont Cancer Survivors Adult cancer survivors in Vermont were significantly more likely to report being current smokers than Vermont adults who never had a cancer diagnosis (24% vs 17%, BRFSS, 2015-2017). There were no differences between adult Vermont cancer survivors and those never diagnosed with cancer in the percentage eating fewer than five servings of fruits and vegetables daily or in the percentage failing to meet aerobic physical activity recommendations.



Data Source: Phys. Activity 2015, 2017 BRFSS; Smoking status 2015-2017; Fruits/veg servings 2017 BRFSS (*) notes statistical difference All rates are age adjusted to the 2000 U.S. standard population.

For more information on the data presented here, email 3-4-50@vermont.gov.