

Approximately seven percent of Vermonters have been diagnosed with cancer in their lifetime (BRFSS 2021); this includes individuals who are newly diagnosed, in active treatment, have completed active treatment, and are living with progressive symptoms of the disease. A person diagnosed with cancer is most commonly called a **cancer survivor**, though this term is not universally accepted.

As Vermont and the nation’s population ages, the occurrence of new cancer cases is expected to increase. With advances in early detection and treatment, people are also living longer with a cancer diagnosis. Understanding who survivors are and their barriers to a high quality of life are therefore ever more important to supporting the health of Vermont. This data brief explores how cancer has upset the lives of Vermont survivors as well as how these disruptions affect their quality of life.

KEY POINTS

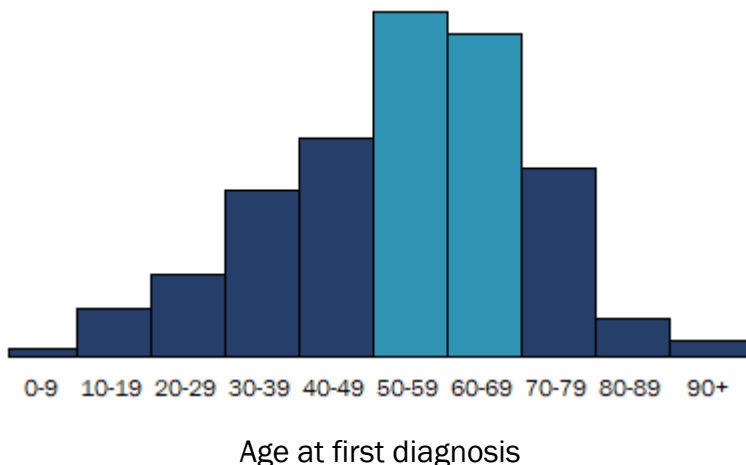
- **Most cancer survivors have completed treatment, and 39% were diagnosed 11 or more years in the past.**
- **Survivors currently in treatment are more likely to report pain due to their diagnosis or treatment, worse general health, and having less emotional or social support.**

How cancer interrupts lives

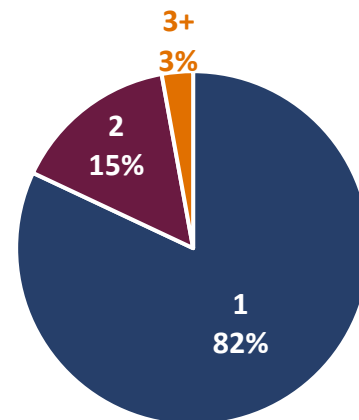
While the [Vermont Cancer Data Pages](#) shows subpopulations in Vermont who are more likely to have cancer, here we explore how cancer has interrupted the lives of all Vermont survivors.

Although most cancer survivors were first diagnosed with cancer in their 50’s and 60’s, age of diagnosis varies widely. Approximately 18% of Vermonters living with cancer have been diagnosed with 2 or more cancers, and three percent have been diagnosed with 3 or more cancers.

Survivors are most likely to have been first diagnosed with cancer in their 50s or 60s.

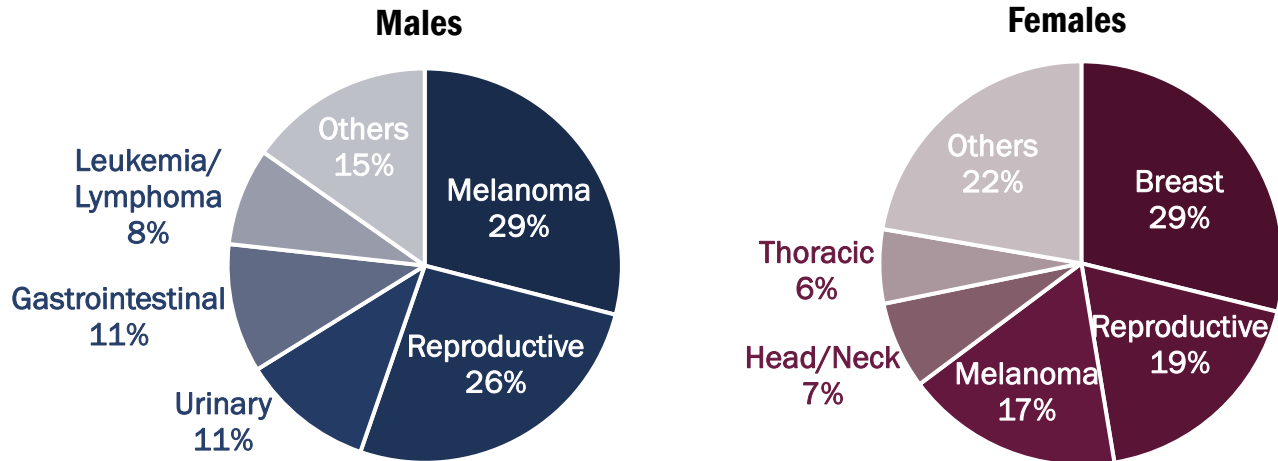


About 18% of survivors have been diagnosed with cancer 2 or more times.



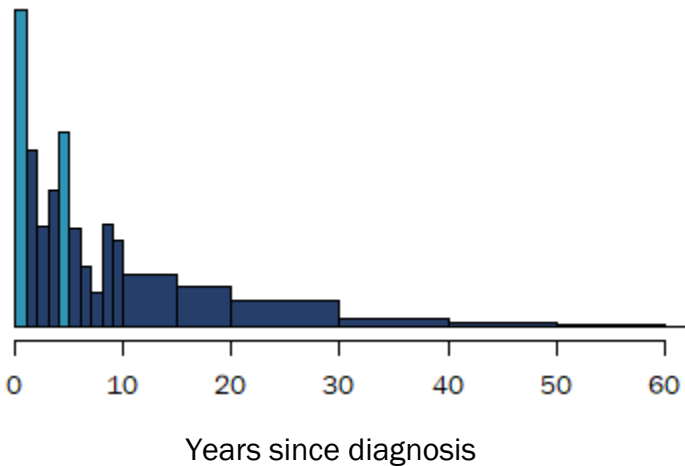
Vermont male¹ survivors are most likely to have been most recently diagnosed with melanoma or male reproductive cancers (most often prostate). Vermont female¹ survivors are most likely to have been most recently diagnosed with breast, female reproductive cancers or melanoma.

Melanoma, breast and male/female reproductive cancers are the most prevalent cancers in Vermont.

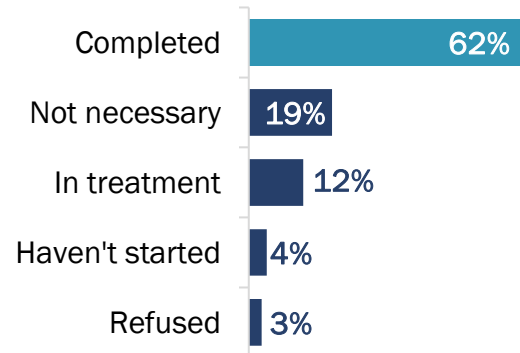


Of Vermonters currently living with cancer, almost half (45%) were diagnosed in the last 5 years. However, many survivors (39%) were first diagnosed 11 or more years in the past. Due to improvements in early detection and treatment, the expected survival time of cancer patients has become longer. Most survivors (62%) have completed treatment, while 12% are currently in treatment. Since undergoing treatment is a significant life disrupter, quality of life measures below are compared for survivors who are currently in treatment and those who have completed treatment.

Time since diagnosis was more likely to be either **one year or less** or **five to six years** than any other time period.



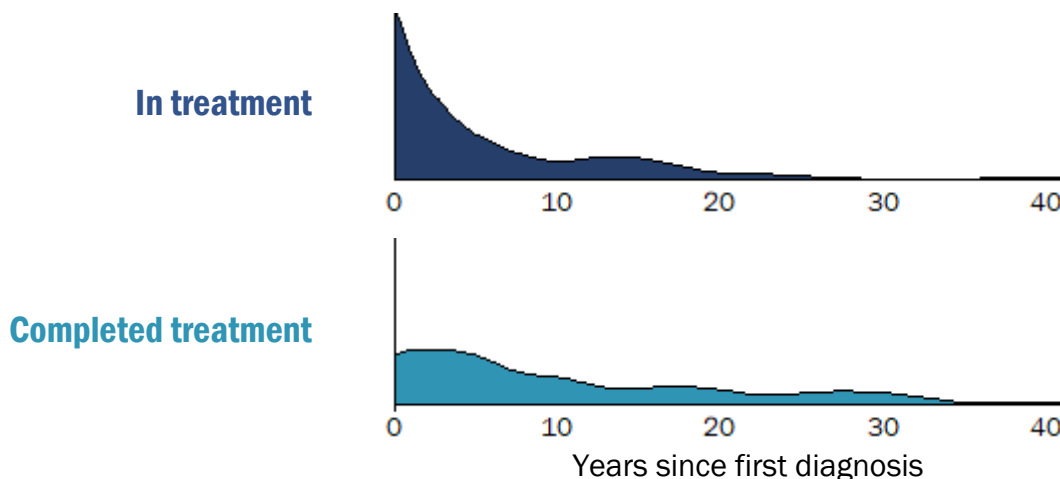
Most survivors have **completed treatment**.



¹ Male and female here refer to self-reported answers to the question "Are you male or female?"

Survivors in treatment are most likely to have been diagnosed in the past 6 years, whereas those who have completed treatment are most likely to have been diagnosed in the past 15 years.

Survivors in treatment are more likely to have been diagnosed with cancer in the last 6 years. Survivors who have completed treatment have a broader range of time since diagnosis.



In addition, survivors may face economic repercussions.²

7% Have been denied health or life insurance.

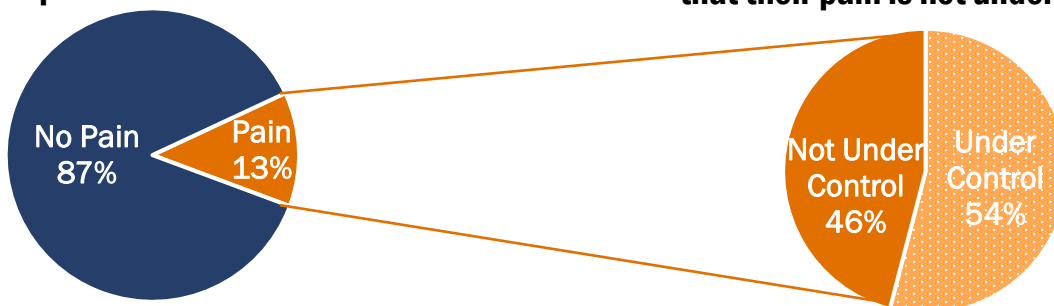
Since survivors' experiences with cancer are so different, interventions to support survivors should take the variation into consideration.

Quality of life

More than 1 in 10 Vermont survivors report physical pain due to their cancer diagnosis that could be related either to the cancer or to treatment. Of those with pain, 46% report that the pain is not under control either with or without medication.

More than 1 in 10 survivors currently have pain due to their cancer.

46% of survivors experiencing pain report that their pain is not under control.



² Since health insurers have been prohibited from denying insurance due to a pre-existing condition since 2010, it is likely that these survivors were denied life insurance.

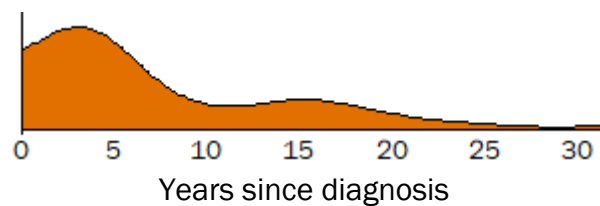
Cancer Survivorship

Survivors in treatment are more likely to report pain, and pain is more prevalent among survivors who have more recently been diagnosed.

Survivors in treatment are more likely to report pain due to their cancer than those who have completed treatment.



The prevalence of pain increases from time of diagnosis to about four years after diagnosis and then decreases.

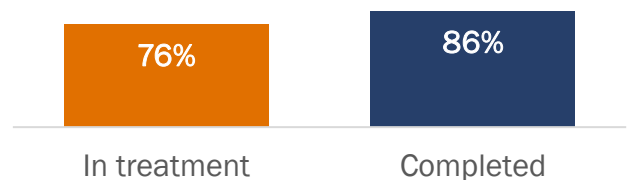


Quality of life, while contingent on many individual factors, may be partially evaluated based on general assessments of one's general and emotional/social health. Among cancer survivors, those in treatment are less likely to report having good to excellent health than those who have completed treatment. Similarly, those who have not completed treatment are less likely to report always or usually having needed social or emotional support.

Survivors in treatment are less likely to report good to excellent general health than those who have completed treatment.



Survivors in treatment are less likely to have needed emotional/social support.



Key Takeaways

The results shared here provide a snapshot of how cancer disrupts Vermont survivors' lives and a glimpse of challenges to a high quality of life. This data brief highlights how survivors' experiences can differ depending on details pertaining to their diagnosis and treatment status. Interventions seeking to support survivors should be planned to take into consideration whether the appropriate population is all survivors or a subset to more efficiently and powerfully effect change.

Survivors' experiences with cancer vary widely and so should support services.

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