Cancer Incidence and Mortality in Nebraska: 2006

May, 2009

The Nebraska Cancer Registry contains a wealth of information, not all of which can be included in this summary report:

What types of data are available?

- Demographic: age at diagnosis, gender, race/ethnicity, county of residence
- Medical history: diagnosis, primary site, cell type, stage of disease at diagnosis
- Therapy: surgery, radiation therapy, chemotherapy, immunotherapy, hormone therapy
- Follow-Up: length of survival, cause of death

Who may request data from the Nebraska Cancer Registry?

- Medical Researchers
- Health Planners
- Market Researchers
- Health Care Facility Administrators
- Physicians
- Nurses
- Health Care Facility Cancer Committees
- Oncology Conference Planners and Speakers
- Patient Care Evaluators
- Pharmaceutical Companies
- Government Officials
- Concerned Citizens
- Students

How do I make a request?

Contact the Office of Health Statistics at the
Nebraska Department of Health and Human Services
Division of Public Health
P.O. Box 95026, Lincoln, NE 68509-5026
Phone 402/471-2241, Monday-Friday between 8 AM and 5 PM

Please note: To comply with confidentiality regulations, the Nebraska Department of Health and Human Services reserves the right to limit the amount and type of data that are released in response to a request.

NEBRASKA CANCER REGISTRY
2006 ANNUAL REPORT

Nebraska Department of Health & Human Services
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EXECUTIVE SUMMARY

- In 2006, there were 8,912 diagnoses of malignant cancer among Nebraska residents. This number is almost identical to the number of malignancies that were diagnosed in Nebraska in 2005 (8,909).

- When compared to national estimates of cancer incidence, liver and stomach cancers and melanoma of the skin were diagnosed significantly less frequently in Nebraska in 2006, while leukemia and colorectal cancer were diagnosed significantly more frequently.

- In 2006, prostate, lung, and colorectal cancers were the most frequently diagnosed malignancies among Nebraska men, while breast, colorectal, and lung cancers were the most frequently diagnosed malignancies among Nebraska women. Taken together, these cancers accounted for more than half of all malignant cancers diagnosed among Nebraska residents in 2006.

- During the past five years (2002-06), almost 60% of all malignant cancers in Nebraska were diagnosed among people 65 years of age and older. Less than 1% were diagnosed among children and adolescents (less than 18 years of age).

- During the past decade (1997-2006), African-Americans in Nebraska were significantly more likely to be diagnosed with and die from prostate and lung cancers than were whites. They were also significantly more likely to die from female breast and colorectal cancers, even though they were not more likely to be diagnosed with either type.

- In 2006, 3,426 Nebraska residents died from cancer, which is a slight increase from the state's 2005 cancer death total of 3,353.

- Cancer deaths in general occurred significantly less often in Nebraska in 2006 than in the U.S. as a whole. By specific body site, stomach, lung, and female breast cancer deaths occurred significantly less often in Nebraska in 2006, compared to the most recent national rates.

- Lung cancer was the leading cause of cancer mortality in Nebraska in 2006, accounting for more than 25% of the state's cancer deaths. Colorectal cancer was the second leading cause of cancer deaths in Nebraska in 2006.

- Since 1990, the annual rate of breast cancer deaths among Nebraska women has declined by over 40%, closely following the national trend.

- Since the early 1990s, the annual rate of prostate cancer deaths among Nebraska men has declined by about 30%, closely following the national trend.

INTRODUCTION

This publication represents the 20th annual statistical summary of the Nebraska Cancer Registry (NCR) since it began collecting data in 1987. The purpose of this report is to present the registry's most recent data to the citizens of the State of Nebraska. The majority of the data cover cancer diagnoses and cancer deaths that occurred between January 1, 2006 and December 31, 2006, as well as during the past five years (January 1, 2002-December 31, 2006).

The NCR was founded in 1986, when the Nebraska Unicameral authorized funding for a state cancer registry using a portion of funds generated by the state's cigarette tax. The establishment of the registry successfully combined the efforts of many Nebraska physicians, legislators, concerned citizens, and the Nebraska Medical Foundation, all of whom had worked for years toward this goal. The Nebraska Medical Foundation also helped to establish the registry with financial assistance. Since 1994, the NCR has received additional funding from the Centers for Disease Control and Prevention (CDC).

The NCR is managed by the Nebraska Department of Health and Human Services (NDHHS). However, registry data are collected and edited by the Nebraska Methodist Hospital of Omaha, under contract to the Nebraska Medical Foundation. Analysis of registry data and preparation of the annual statistical report are the responsibility of the NDHHS.

The purpose of the registry is to gather data that describe how many Nebraska residents are diagnosed with cancer, what types of cancer they have, what type of treatment they receive, and the time and quality of survival after diagnosis. These data are put to a variety of uses both inside and outside of the NDHHS. Within the agency, they are monitored closely from year to year to determine the trends that are developing, and to see how Nebraska's cancer experience compares to the rest of the nation. They are indispensable for investigating reports of possible cancer clusters. The NDHHS also uses these data to help plan and evaluate cancer control programs within the agency. Outside of the NDHHS the registry has furnished information to many individuals, institutions, and organizations, such as the North American Association of Central Cancer Registries, the University of Nebraska Medical Center, the National Cancer Institute, the American Cancer Society (ACS), and CDC. The NCR also contributes its data to several national cancer incidence databases, which are listed on page 3.

All individual records in the cancer registry are kept in strict confidence as prescribed by both state and federal law. The NCR follows all of the privacy safeguards in the Health Insurance Portability and Accountability Act (HIPAA), although some of the procedural requirements do not apply to the registry.

The NDHHS welcomes inquiries about cancer from the public for aggregate statistics or general information from the registry. To obtain cancer data or information about the registry not included in this report, please refer to the instructions provided inside the front cover.

An electronic copy of this report and the latest cancer data is available to Internet users via the NDHHS web site. The URL address is:
www.dhhs.ne.gov/ced/cancer/data.htm

METHODOLOGY

Data Collection and Management

The NCR gathers data on Nebraska residents diagnosed and treated for malignant and in situ tumors. The registry does not include benign tumors (except for benign brain and other nervous system tumors, which became reportable as of January 1, 2004), benign polyps, and basal cell and squamous cell carcinomas of the skin. Information gathered from each case includes the patient's name, address, birth date, race, gender, and Social Security number; date of diagnosis; primary site of the cancer (coded according to the International Classification of Diseases for Oncology, 3rd edition [ICD-O-3]); stage of disease at diagnosis; facility where the initial diagnosis was made; basis of staging; method of diagnostic confirmation; and histological type (also classified according to the ICD-O-3). Follow-up information is gathered periodically on registered cases, and includes the date of last contact with the patient, status of disease, type of additional treatment, quality of survival; and, if death has occurred, the date and cause of death and the status of the cancer at the time of death. The registry collects this information from every hospital in the state for all persons diagnosed with and/or treated for cancer. In addition, the registry includes Nebraska residents who are diagnosed with and/or treated for cancer out of state. NCR data also include cases diagnosed and/or treated at pathology laboratories, radiation therapy sites, physician's offices, and cases identified from death certificates.

Nebraska cancer mortality data are obtained from death certificates on file with the NDHHS. Mortality data are available for every Nebraska resident who dies from cancer, whether death occurs in or outside of Nebraska. The mortality data presented in this report are limited to those deaths where cancer is listed as the underlying (i.e., primary) cause of death. For deaths that occurred in and after 1999, causes of death are coded according to the Tenth Edition of the International Classification of Disease (ICD-10). For deaths that occurred prior to 1999, causes of death are coded according to the Ninth Edition of the International Classification of Disease (ICD-9).

All of the U.S. cancer incidence and mortality rates presented in this report were compiled by the National Cancer Institute's Surveillance, Epidemiology, and End Results (SEER) Program. This report presents incidence rates from the nine population-based cancer registries that have been affiliated with SEER since 1973, and these data provide estimates of U.S. cancer incidence. The mortality data were compiled for SEER by the National Center for Health Statistics and include all cancer deaths occurring in the United States.

Confidentiality

All data obtained by the NCR from the medical records of individual patients are held in strict confidence by the NDHHS. As specified in state statute, researchers may obtain case-specific and/or patient-identifiable information from the registry by submitting a written application that describes how the data will be used for scientific study. In situations where contact with a patient or patient's family is proposed, the applicant must substantiate the need for any such contact and submit approval from an Institutional Review Board. In addition, before any individual's name can be given to a researcher, the registry will obtain permission from the individual that they are willing to be a research subject. Upon favorable review by the NDHHS, the applicant must also agree to maintain the confidentiality and security of the data throughout the course of the study, to

destroy or return the registry data at the end of the study and to present material to the registry prior to publication to assure that no identifiable information is released.

Aggregate data (i.e., statistical information) from the registry are considered open to the public and are available upon request. Details on how to obtain such data are provided inside the front cover of this report.

Quality Assurance

The NCR and reporting facilities spend a great deal of time and energy to ensure that the information they gather is both accurate and complete. In recent years, these efforts have met with great success. For twelve consecutive years (1995-2006), the NCR has met all of the criteria necessary to earn the Gold Standard of data quality awarded by the North American Association of Central Cancer Registries (NAACCR). These criteria include:

1) Completeness of case ascertainment – The registry must find at least 95% of the total number of cases that are estimated to have occurred.

2) Completeness of information – The proportion of registry cases missing information on age at diagnosis, gender, and county of residence must be no more than 2%, and the proportion missing information on race must be no more than 3%.

3) Data accuracy – Error rates based on edit checks of selected data items must be no greater than 1%.

4) Timeliness – All data for a single calendar year must be submitted to the NAACCR for review no more than 23 months after the year has ended.

Gold standard certification also requires that all cases pass strict edits and that the proportion of registry cases found solely through a review of death certificates must be no more than 3%. Lastly, the proportion of duplicate cases in the registry must be no more than one per 1,000.

Since the NCR has achieved the highest quality standards, its data are now included in several national cancer incidence databases that are maintained by other agencies and organizations. These databases compile information from cancer registries throughout the United States and Canada that meet the same data quality standards as the NCR. These databases include:

1) *Cancer in North America* (http://www.naaccr.org/index.asp)

2) *United States Cancer Statistics* (http://apps.nccd.cdc.gov/uscs/)

3) *Cancer Facts & Figures 2008* (http://www.cancer.org/docroot/stt/stt_0.asp)

4) *Cancer Control PLANET* (http://cancercontrolplanet.cancer.gov/).

Definitions

Several technical terms are used in presenting the information in this report. The following definitions are provided here to assist the reader.

Incidence rate
An incidence rate is the number of new cases of a disease that occur within a specific population during a given time period, divided by the size of the population. For example, if 10 residents of a county with 20,000 residents are diagnosed with colorectal cancer during a single year, then the incidence rate for that county for that year is .0005. Since cancer incidence rates are usually expressed per 100,000 population, this figure is then multiplied by 100,000 to yield a rate of 50 per 100,000 per year.

Mortality rate
A mortality rate is the number of deaths that occur within a specific population during a given time period, divided by the size of the population. Like incidence rates, mortality rates are usually expressed as the number of deaths per 100,000 population.

Age-adjusted rate
Age-adjustment is a simple mathematical procedure that makes it possible to compare rates between populations that have different age distributions, and to compare rates within a single population over time. All of the incidence and mortality rates in this report are age-adjusted using the United States population in 2000 as the standard. Rates presented in pre-2000 editions of this report were age-adjusted using the U.S. population in 1970 as the standard.

Stage of Disease at Diagnosis

In situ
Tumors diagnosed as in situ consist of malignant cells that are growing in place. In situ tumors are confined to the cell group of origin, and have not penetrated the supporting structure of the organ on which they arose.

Malignant
Tumors diagnosed as malignant have spread beyond the cell group of the organ where they began, and may have spread further. The organ where a malignancy began is also known as the primary site. Malignant tumors are subdivided into three categories:

Localized--A localized malignant tumor has not spread beyond the organ where it started.

Regional--A regional malignant tumor has spread beyond the organ where it began, by direct extension to immediately adjacent organs or tissues and/or by spread to regional lymph nodes.

Distant--A distant malignant tumor has spread beyond the primary site to distant parts of the body.

Data Analysis

Most of the incidence and mortality rates presented in this report were calculated for cancer diagnoses and deaths that occurred during 2006 and 2002-2006 combined. Incidence and mortality rates that are based on more than one year of data should be interpreted as an average annual rate. Rates for 2006 were calculated using the 2006 population estimates developed by the United States Bureau of the Census, while the 2002-2006 rates were calculated using 2004 population estimates prepared by the Census Bureau. The rates in Tables 3 and 7, which are based on data for the years 1997-2006, were calculated using the Census Bureau's 2002 estimates of Nebraska's white, African-American, Native American, Asian/Pacific Islander, and Hispanic populations.

All of the data presented in this report are current through January 1, 2009. However, because some cases diagnosed during or even before 2006 may not yet have been reported to the registry, the incidence data presented in this report should be considered subject to change. **In addition, the incidence data reported in previous editions of this report should no longer be considered complete.**

With the exception of bladder cancer, all of the site-specific incidence rates in this report were calculated with malignant cases only, to maintain comparability with statistics from the SEER Program and other cancer registries throughout the United States. For bladder cancer, incidence rates were calculated with malignant and in situ cases combined. All incidence and mortality rates in this report were calculated per 100,000 population, and were age-adjusted according to the age distribution of the population of the United States in 2000. Statewide rates were also calculated for males and females separately, and for both sexes combined. Rates based on five or fewer events are not presented due to their unreliability. Also, the number of cases for any county with five or fewer cases in a single year is not shown in order to reduce the possibility of identifying a specific person.

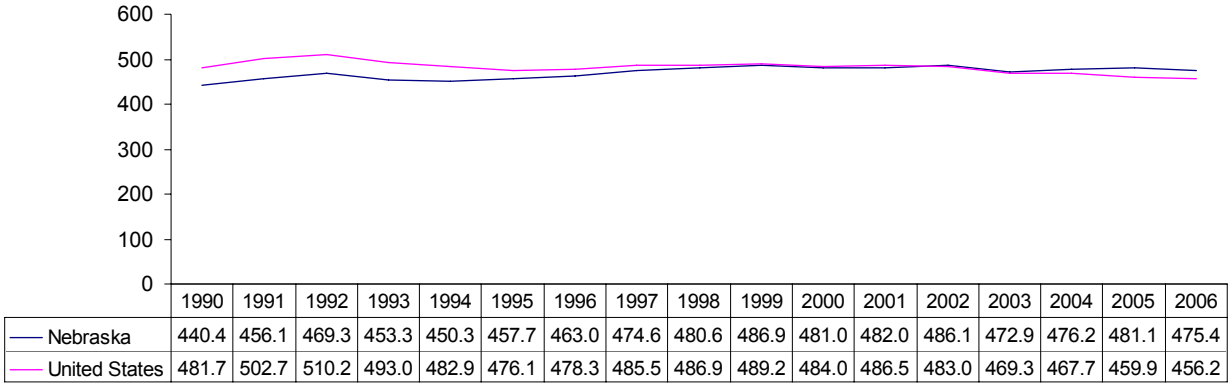
To evaluate the statistical significance of the differences between rates, 95% confidence intervals for rates were calculated using the formula CI = r $\pm$ (RC x SE), where CI = confidence interval, r = rate, RC = 1.96, and SE = standard error. The standard error for a rate was determined by dividing the rate by the square root of the number of events (cancer diagnoses or deaths). A statistically significant difference exists and is indicated in those instances where the confidence intervals of a pair of rates being compared to each other do not intersect.

CANCER INCIDENCE IN NEBRASKA

The Nebraska Cancer Registry recorded 8,912 diagnoses of malignant cancer among Nebraska residents in 2006, and this number translates into a statewide annual incidence rate of 475.4 cases per 100,000 population. By primary site, cancers of the lung, breast, prostate, colon and rectum occurred most frequently, accounting for more than half (54.1%) of all diagnoses. The number of malignant diagnoses for 2006 is about equal to the 2005 number (8,909), but recent registry experience suggests that, as the registry continues to find cases, the 2006 figure will probably increase by about 2-4%.

Table 1 presents the number and rate of malignant cancers diagnosed among Nebraska residents during 2006 and 2002-2006, for all sites combined and for cancers of specific sites. Also presented are the most current estimates of cancer incidence in the United States for the year 2006. Comparison of the most recent Nebraska and national data show that cancers of the stomach and liver and melanoma of the skin occurred significantly less frequently in Nebraska, while leukemia and colorectal cancer occurred significantly more frequently. Table 2 presents the number of malignant cancers diagnosed and the incidence rates for 2006 and 2002-2006 by county of residence, with comparable Nebraska and U.S. rates included. Table 3 presents Nebraska incidence data by race and ethnicity for the years 1997-2006. Table 4 presents the number of malignant cancers diagnosed in Nebraska during 2002-2006 by age at diagnosis. The graph below presents the annual incidence rates for all malignant cancers for Nebraska and the U.S. since 1990.

Cancer (All Sites)
Incidence Rates, by Year
Nebraska and the United States (1990-2006)



	1990	1991	1992	1993	1994	1995	1996	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006
Nebraska	440.4	456.1	469.3	453.3	450.3	457.7	463.0	474.6	480.6	486.9	481.0	482.0	486.1	472.9	476.2	481.1	475.4
United States	481.7	502.7	510.2	493.0	482.9	476.1	478.3	485.5	486.9	489.2	484.0	486.5	483.0	469.3	467.7	459.9	456.2

TABLE 1: Cancer Incidence
Number of Cases and Rates, by Site and Gender
Nebraska (2006 and 2002-2006) and US (2006)

SITE	NEBRASKA 2006						NEBRASKA 2002-2006						US 2006		
	MALE		FEMALE		TOTAL		MALE		FEMALE		TOTAL		MALE	FEMALE	TOTAL
	NO.	RATE	NO.	RATE	NO.	RATE	NO.	RATE	NO.	RATE	NO.	RATE	RATE	RATE	RATE
All Sites	4726	564.9	4185	411.1	8912	475.4	22873	563.4	20957	420.8	43832	479.0	527.3	406.0	456.2
Oral Cavity & Pharynx	141	16.0	64	6.0	205	10.8	647	15.5	325	6.5	972	10.7	15.0	6.2	10.3
Esophagus	59	7.0	22	2.1	81	4.3	344	8.5	82	1.6	426	4.7	7.6	2.1	4.6
Stomach	75	9.0	30	2.7	105	5.7	331	8.2	151	2.9	482	5.2	10.3	5.1	7.3
Colon & Rectum (Colorectal)	530	63.8	526	47.2	1056	55.1	2726	67.7	2567	47.9	5293	56.7	51.3	40.7	45.5
Liver & Intra-hepatic Bile Duct	52	6.1	23	2.3	75	3.9	252	6.1	118	2.4	370	4.0	10.2	3.6	6.7
Pancreas	123	14.6	98	9.1	221	11.6	533	13.2	466	8.8	999	10.7	13.6	10.7	12.0
Lung & Bronchus	659	79.6	493	47.7	1153	61.6	3401	84.8	2489	49.4	5891	64.4	71.3	51.6	60.0
Melanoma of the Skin	187	22.4	129	13.7	316	17.3	866	21.0	676	14.7	1542	17.3	26.1	17.6	21.1
Breast	12	1.4	1266	128.2	1278	68.6	44	1.1	6168	127.2	6212	68.4	1.3	123.0	66.4
Uterine Cervix	---	---	51	5.6	---	---	---	---	322	7.4	---	---	---	6.7	---

TABLE 1: Cancer Incidence (Continued)
Number of Cases and Rates, by Site and Gender
Nebraska (2006 and 2002-2006) and US (2006)

SITE	NEBRASKA 2006						NEBRASKA 2002-2006						US 2006		
	MALE		FEMALE		TOTAL		MALE		FEMALE		TOTAL		MALE	FEMALE	TOTAL
	NO.	RATE	NO.	RATE	NO.	RATE	NO.	RATE	NO.	RATE	NO.	RATE	RATE	RATE	RATE
Uterine Corpus & Unspecified (Endometrium)	---	---	227	22.5	---	---	---	---	1316	27.0	---	---	---	24.1	---
Ovary	---	---	120	12.0	---	---	---	---	585	11.9	---	---	---	12.5	---
Prostate	1334	158.4	---	---	---	---	6436	158.1	---	---	---	---	163.1	---	---
Urinary Bladder	296	36.5	90	8.3	386	20.2	1474	37.2	510	9.6	1984	21.3	36.1	8.9	20.5
Brain & Other Nervous System	74	9.0	50	5.2	124	7.0	349	8.3	268	5.6	617	6.9	7.4	5.0	6.1
Kidney & Renal Pelvis	189	22.1	105	10.4	294	15.7	823	19.9	507	10.2	1330	14.6	18.1	10.4	13.9
Non-Hodgkin Lymphoma	200	24.0	185	17.6	385	20.4	1008	24.8	913	17.5	1921	20.9	23.3	16.6	19.5
Myeloma	61	7.4	34	3.4	95	5.1	292	7.2	243	4.7	535	5.8	6.5	4.5	5.4
Leukemia	170	20.4	116	11.1	286	15.1	747	18.4	577	11.3	1325	14.4	14.8	9.7	11.9
Thyroid	48	5.5	164	18.2	212	11.9	201	4.8	699	15.9	900	10.4	5.7	16.3	11.0

Total rates are expressed per 100,000 population and are age-adjusted to the 2000 U.S. population
Gender-specific rates are expressed per 100,000 male or female population and are age-adjusted to the 2000 U.S. population

TABLE 2: Cancer (All Sites) Incidence
Number of Cases and Rates, by County of Residence
Nebraska and US (2006 and 2002-2006)

	2006		2002-2006	
	# Cases	Rate	# Cases	Rate
US	NA	456.2	NA	466.9
NEBRASKA	8912	475.4	43832	479.0
COUNTY				
ADAMS	167	439.9	865	458.5
ANTELOPE	31	▼317.9	212	448.8
ARTHUR	*	*	13	459.3
BANNER	8	717.5	21	434.6
BLAINE	*	*	16	382.5
BOONE	37	441.0	208	493.9
BOX BUTTE	56	429.8	301	458.6
BOYD	13	378.1	101	560.9
BROWN	25	458.8	116	445.5
BUFFALO	208	506.9	975	491.8
BURT	51	453.9	263	469.1
BUTLER	38	▼339.3	247	443.0
CASS	129	496.4	628	483.0
CEDAR	39	▼300.5	243	▼381.4
CHASE	23	379.6	109	▼385.3
CHERRY	34	436.9	167	429.7
CHEYENNE	46	362.5	266	445.3
CLAY	50	568.7	219	480.8
COLFAX	66	580.6	332	533.5
CUMING	52	376.0	286	▼409.4
CUSTER	64	382.0	355	434.9
DAKOTA	88	501.6	398	441.3
DAWES	43	433.3	188	▼398.8
DAWSON	80	▼310.3	512	▼403.1
DEUEL	18	559.0	76	480.3
DIXON	33	373.8	172	444.6
DODGE	264	▲583.8	1255	▲567.5
DOUGLAS	2301	505.1	11051	▲501.0
DUNDY	25	765.7	81	506.0
FILLMORE	46	474.1	212	447.3
FRANKLIN	27	525.9	125	501.2
FRONTIER	20	503.0	83	443.6
FURNAS	38	490.9	184	474.0
GAGE	136	448.9	659	▼438.7
GARDEN	14	467.3	72	411.5
GARFIELD	15	475.8	75	502.8
GOSPER	13	404.0	61	395.2
GRANT	7	865.7	26	▲868.4
GREELEY	14	378.3	98	519.6
HALL	278	467.8	1506	▲517.1
HAMILTON	47	430.8	227	▼415.8
HARLAN	33	530.0	132	▼432.9
HAYES	*	*	11	168.7
HITCHCOCK	23	517.6	125	532.1
HOLT	82	530.5	400	522.2
HOOKER	7	535.9	25	415.9
HOWARD	48	535.1	230	544.8

TABLE 2: Cancer (All Sites) Incidence (Continued)
Number of Cases and Rates, by County of Residence
Nebraska and US (2006 and 2002-2006)

	2006		2002-2006	
	# Cases	Rate	# Cases	Rate
COUNTY				
JEFFERSON	50	420.8	252	▼410.7
JOHNSON	28	387.1	152	451.5
KEARNEY	33	389.1	164	▼393.1
KEITH	41	▼336.6	260	441.2
KEYA PAHA	9	694.9	20	▼283.5
KIMBALL	28	536.9	141	504.4
KNOX	83	▲622.8	306	451.5
LANCASTER	1181	486.3	5692	487.4
LINCOLN	194	466.4	958	470.6
LOGAN	*	*	17	407.8
LOUP	*	*	15	▼304.2
McPHERSON	*	*	17	494.4
MADISON	191	495.4	923	484.8
MERRICK	41	406.8	240	468.3
MORRILL	30	440.1	163	488.9
NANCE	22	381.3	117	446.3
NEMAHA	44	464.4	179	▼383.4
NUCKOLLS	41	591.1	201	538.9
OTOE	98	518.5	458	470.0
PAWNEE	17	342.1	85	334.7
PERKINS	18	397.8	104	477.9
PHELPS	45	360.7	258	▼407.7
PIERCE	43	508.9	211	467.9
PLATTE	164	459.1	769	472.5
POLK	43	623.1	179	463.7
RED WILLOW	79	549.1	359	483.2
RICHARDSON	53	432.7	331	517.0
ROCK	21	938.5	64	506.5
SALINE	88	529.6	401	507.8
SARPY	550	507.9	2538	▲515.6
SAUNDERS	119	496.1	561	474.7
SCOTTS BLUFF	189	417.0	1099	491.9
SEWARD	92	495.6	448	481.1
SHERIDAN	36	439.1	188	442.2
SHERMAN	17	▼304.6	122	494.8
SIOUX	*	*	22	▼227.1
STANTON	17	252.3	105	▼316.1
THAYER	45	470.9	195	420.6
THOMAS	*	*	21	483.2
THURSTON	26	400.2	163	480.8
VALLEY	25	363.2	148	422.4
WASHINGTON	91	423.4	473	452.0
WAYNE	43	429.1	191	▼411.1
WEBSTER	27	457.2	162	526.7
WHEELER	*	*	26	545.3
YORK	86	481.7	402	444.7

NA = not available
*Number and rate for single years are not shown if based on five or fewer events
Rates are expressed per 100,000 population and are age-adjusted to the 2000 U.S. population

▼ county rate is significantly lower than the state rate
▲ county rate is significantly higher than the state rate

TABLE 3: Cancer Incidence
Number of Cases and Rates, All Sites and Top Ten Sites, by Race and Ethnicity
Nebraska (1997-2006)

	White			African-American			Native American			Asian/Pacific Islander			Hispanic		
	Site	Number	Rate	Site	Number	Rate	Site	Number	Rate	Site	Number	Rate	Site	Number	Rate
	All	81412	472.7	All	2246	498.0	All	371	457.1	All	370	268.1	All	1123	285.4
Rank															
1	Prostate	12054	158.1	Prostate	391	210.6	Female Breast	44	87.4	Colon & Rectum (Colorectal)	47	44.2	Colon & Rectum (Colorectal)	131	41.3
2	Female Breast	11998	131.3	Lung & Bronchus	388	90.3	Prostate	43	143.6	Female Breast	45	50.2	Female Breast	122	57.6
3	Lung & Bronchus	10998	63.6	Female Breast	301	114.1	Colon & Rectum (Colorectal)	43	53.2	Lung & Bronchus	45	37.4	Lung & Bronchus	110	36.0
4	Colon & Rectum (Colorectal)	10264	58.1	Colon & Rectum (Colorectal)	258	62.3	Lung & Bronchus	41	59.6	Prostate	23	59.4	Prostate	92	63.1
5	Urinary Bladder	3788	21.5	Non-Hodgkin Lymphoma	81	16.9	Kidney & Renal Pelvis	32	35.8	Uterine Cervix	21	17.8	Leukemia	57	8.2
6	Non-Hodgkin Lymphoma	3516	20.4	Kidney & Renal Pelvis	79	17.0	Oral Cavity & Pharynx	14	17.3	Liver & Intrahepatic Bile Duct	21	14.4	Kidney & Renal Pelvis	50	11.9
7	Uterine Corpus & Unspecified (Endometrium)	2519	27.5	Pancreas	62	14.9	Non-Hodgkin Lymphoma	13	15.8	Non-Hodgkin Lymphoma	18	10.6	Non-Hodgkin Lymphoma	49	11.7
8	Leukemia	2394	13.8	Leukemia	51	9.8	Uterine Corpus & Unspecified (Endometrium)	11	22.3	Thyroid	17	18.1	Thyroid	45	6.9
9	Melanoma of the Skin	2381	14.3	Uterine Corpus & Unspecified (Endometrium)	48	19.3	Liver & Intrahepatic Bile Duct	11	14.9	Leukemia	16	7.4	Stomach	43	13.1
10	Kidney & Renal Pelvis	2358	13.8	Myeloma	48	11.3	Uterine Cervix	10	16.0	Oral Cavity & Pharynx	15	9.2	Uterine Cervix	39	13.3

Rates are expressed per 100,000 population, excluding gender-specific sites (prostate, female breast, cervix, endometrium), which are expressed per 100,000 male or female population. All rates are age-adjusted to the 2000 U.S. population.

TABLE 4: Cancer Incidence
Number of Cases and Percentage Distribution, by Site and Age at Diagnosis,
Nebraska (2002-2006)

	0-17 Yrs.		18-44 Yrs.		45-64 Yrs.		65 Yrs and Older		TOTAL	
	No.	%	No.	%	No.	%	No.	%	No.	%
All Sites	362	0.8	3305	7.5	13994	31.9	26171	59.7	43832	100.0
Oral Cavity & Pharynx	6	0.6	78	8.0	406	41.8	482	49.6	972	100.0
Esophagus	0	0.0	14	3.3	136	31.9	276	64.8	426	100.0
Stomach	0	0.0	20	4.1	134	27.8	328	68.0	482	100.0
Colon & Rectum (Colorectal)	1	<0.1	186	3.5	1366	25.8	3740	70.7	5293	100.0
Liver & Intrahepatic Bile Duct	6	1.6	23	6.2	140	37.8	201	54.3	370	100.0
Pancreas	0	0.0	24	2.4	257	25.7	718	71.9	999	100.0
Lung & Bronchus	3	<0.1	122	2.1	1609	27.3	4157	70.6	5891	100.0
Melanoma of the Skin	5	0.3	350	22.7	578	37.5	609	39.5	1542	100.0
Female Breast	0	0.0	637	10.3	2593	42.0	2938	47.6	6168	100.0
Uterine Cervix	0	0.0	143	44.4	116	36.0	63	19.6	322	100.0
Uterine Corpus & Unspecified (Endometrium)	1	<0.1	91	6.9	572	43.5	652	49.5	1316	100.0
Ovary	5	0.9	61	10.4	210	35.9	309	52.8	585	100.0
Prostate	0	0.0	24	0.4	2136	33.2	4276	66.4	6436	100.0
Urinary Bladder	0	0.0	44	2.2	461	23.2	1479	74.5	1984	100.0
Brain & Other Nervous System	84	13.6	111	18.0	179	29.0	243	39.4	617	100.0
Kidney & Renal Pelvis	13	1.0	100	7.5	514	38.6	703	52.9	1330	100.0
Non-Hodgkin Lymphoma	24	1.2	170	8.8	552	28.7	1175	61.2	1921	100.0
Myeloma	1	0.2	20	3.7	156	29.2	358	66.9	535	100.0
Leukemia	97	7.3	102	7.7	313	23.6	813	61.4	1325	100.0
Thyroid	12	1.3	359	39.9	363	40.3	166	18.4	900	100.0

NOTE: Due to rounding, some percentages may not sum to 100.0

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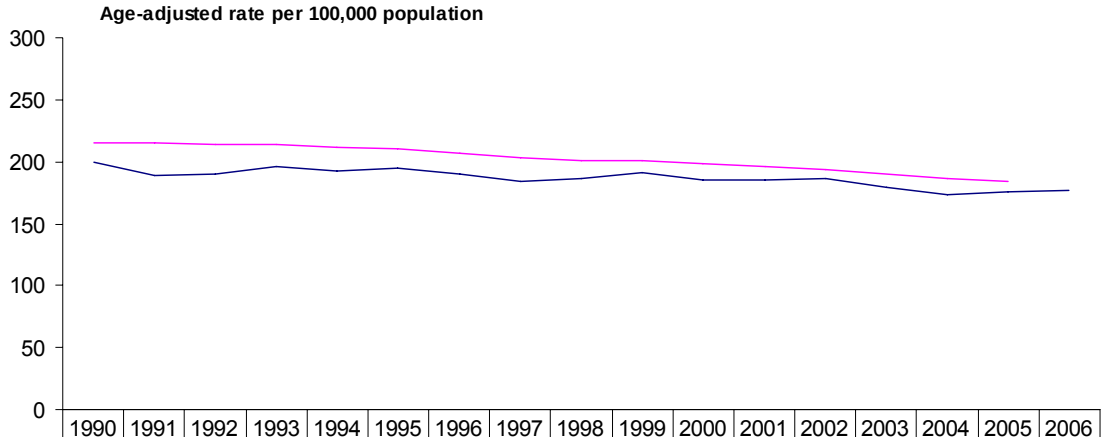
CANCER MORTALITY IN NEBRASKA

In 2006, 3,426 Nebraska residents died from cancer, a number that translates into a rate of 176.9 cancer deaths per 100,000 population. These figures represent a slight increase from the state's 2005 figures of 3,353 (cancer deaths) and 175.7 (cancer mortality rate). Cancer was the second leading cause of mortality in Nebraska in 2006, exceeded only by heart disease, and accounted for more than one of every five deaths. By primary site, cancers of the lung, breast, prostate, colon and rectum were the most frequently mentioned, accounting for 1,680 (49.0%) of Nebraska's cancer deaths in 2006.

Table 5 presents the number and rate of cancer deaths that occurred among Nebraska residents during 2006 and 2002-2006, for all sites combined and for specific sites. The most recent U.S. cancer mortality rates, which cover the year 2005, are also included. These data show that cancer deaths in general occur significantly less often in Nebraska than in the U.S. as a whole. By primary site, stomach, lung and bronchus, and female breast cancer deaths also occurred significantly less often in Nebraska in 2006, compared to national rates. Table 6 presents the number of cancer deaths and mortality rates for 2006 and 2002-2006 by county of residence, with comparable state and U.S. rates included. Table 7 presents Nebraska cancer mortality data by race and ethnicity for the years 1997-2006. Table 8 presents the number of Nebraska cancer deaths during 2002-2006 by age at death. The graph below shows the annual mortality rates for cancer for Nebraska and the U.S. since 1990.

Cancer (All Sites)
Mortality Rates, by Year
Nebraska and the United States (1990-2006)



	1990	1991	1992	1993	1994	1995	1996	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006
Nebraska	199.4	188.9	190.4	195.5	191.9	194.3	189.8	184.3	186.0	191.6	185.7	185.4	186.0	178.7	173.7	175.7	176.9
United States	214.9	215.1	213.5	213.4	211.7	209.9	207.0	203.6	200.8	200.7	198.7	195.9	193.7	190.0	185.9	184.0	

TABLE 5: Cancer Mortality
Number of Deaths and Rates, by Site and Gender
Nebraska (2006 and 2002-2006) and US (2005)

SITE	NEBRASKA 2006						NEBRASKA 2002-2006						US 2005		
	MALE		FEMALE		TOTAL		MALE		FEMALE		TOTAL		MALE	FEMALE	TOTAL
	NO.	RATE	NO.	RATE	NO.	RATE	NO.	RATE	NO.	RATE	NO.	RATE	RATE	RATE	RATE
All Sites	1839	225.3	1587	142.8	3426	176.9	8725	220.2	8083	150.1	16808	178.4	226.1	155.3	184.0
Oral Cavity & Pharynx	23	2.7	19	1.8	42	2.2	123	3.0	66	1.2	189	2.0	3.8	1.4	2.5
Esophagus	66	7.9	20	1.7	86	4.5	327	8.1	84	1.6	411	4.5	7.9	1.7	4.4
Stomach	26	3.2	23	2.1	49	2.5	138	3.5	102	1.9	240	2.5	5.2	2.7	3.8
Colon & Rectum (Colorectal)	202	24.7	179	15.0	381	19.3	936	23.7	936	16.2	1872	19.4	21.0	14.6	17.4
Liver & Intra-hepatic Bile Duct	51	6.2	32	2.9	83	4.4	229	5.6	123	2.3	352	3.8	7.8	3.2	5.3
Pancreas	123	14.8	98	8.7	221	11.4	473	11.9	442	8.1	915	9.7	12.4	9.4	10.8
Lung & Bronchus	538	65.8	365	34.5	903	47.7	2619	65.6	1829	35.5	4448	48.3	69.4	40.6	52.8
Melanoma of the Skin	35	4.2	23	2.4	58	3.1	175	4.3	95	1.9	270	2.9	4.0	1.8	2.7
Breast	1	0.1	213	19.6	214	11.0	17	0.4	1214	23.0	1231	13.0	0.3	24.0	13.5
Uterine Cervix	---	---	16	1.6	---	---	---	---	93	2.0	---	---	---	2.4	---

TABLE 5: Cancer Mortality (Continued)
Number of Deaths and Rates, by Site and Gender
Nebraska (2006 and 2002-2006) and US (2005)

SITE	NEBRASKA 2006						NEBRASKA 2002-2006						US 2005		
	MALE		FEMALE		TOTAL		MALE		FEMALE		TOTAL		MALE	FEMALE	TOTAL
	NO.	RATE	NO.	RATE	NO.	RATE	NO.	RATE	NO.	RATE	NO.	RATE	RATE	RATE	RATE
Uterine Corpus & Unspecified (Endometrium)	---	---	56	5.0	---	---	---	---	262	4.9	---	---	---	4.1	---
Ovary	---	---	92	8.6	---	---	---	---	453	8.8	---	---	---	8.6	---
Prostate	183	23.5	---	---	---	---	926	24.5	---	---	---	---	24.6	---	---
Urinary Bladder	57	7.1	29	2.3	86	4.2	258	6.7	118	2.0	376	3.8	7.6	2.2	4.3
Brain & Other Nervous System	48	5.5	32	3.1	80	4.3	234	5.6	203	4.0	437	4.8	5.3	3.5	4.3
Kidney & Renal Pelvis	55	6.7	31	2.9	86	4.5	263	6.6	194	3.5	457	4.9	5.9	2.7	4.1
Non-Hodgkin Lymphoma	71	8.7	73	5.9	144	7.3	358	9.1	349	6.2	707	7.4	8.8	5.5	6.9
Myeloma	28	3.5	35	3.2	63	3.3	173	4.4	163	2.9	336	3.5	4.5	2.9	3.6
Leukemia	87	10.7	56	4.8	143	7.4	398	10.1	308	5.4	706	7.4	9.7	5.4	7.2
Thyroid	4	0.5	3	0.3	7	0.4	13	0.3	23	0.4	36	0.4	0.5	0.5	0.5

Total rates are expressed per 100,000 population and are age-adjusted to the 2000 U.S. population
Gender-specific rates are expressed per 100,000 male or female population and are age-adjusted to the 2000 U.S. population

TABLE 6: Cancer (All Sites) Mortality
Number of Deaths and Rates, by County of Residence
Nebraska (2006 and 2002-2006) and US (2005 and 2001-2005)

	2005 # Deaths	2005 Rate	2001-2005 # Deaths	2001-2005 Rate
US	NA	184.0	NA	189.8
	2006 # Deaths	**2006 Rate**	**2002-2006 # Deaths**	**2002-2006 Rate**
NEBRASKA	3426	176.9	16808	178.4
COUNTY				
ADAMS	66	164.5	350	177.9
ANTELOPE	17	148.1	82	156.8
ARTHUR	*	*	5	**
BANNER	*	*	5	**
BLAINE	*	*	8	192.1
BOONE	18	200.1	94	208.6
BOX BUTTE	22	151.8	131	189.8
BOYD	9	216.9	31	148.1
BROWN	10	159.5	43	145.7
BUFFALO	87	205.5	365	180.2
BURT	23	189.0	114	189.6
BUTLER	18	156.3	89	153.5
CASS	51	193.4	234	183.1
CEDAR	17	120.8	101	▼144.4
CHASE	7	101.9	42	▼129.4
CHERRY	12	140.9	61	142.5
CHEYENNE	21	158.1	103	165.0
CLAY	21	211.1	80	167.3
COLFAX	20	163.6	109	162.7
CUMING	31	204.8	122	162.8
CUSTER	21	▼117.3	144	165.4
DAKOTA	32	186.8	161	180.4
DAWES	18	161.6	96	185.9
DAWSON	42	158.3	219	169.1
DEUEL	9	246.3	41	253.8
DIXON	10	111.1	75	170.1
DODGE	84	167.6	424	173.8
DOUGLAS	849	190.6	4198	▲194.0
DUNDY	6	148.3	31	155.7
FILLMORE	19	178.6	91	164.4
FRANKLIN	*	*	57	209.6
FRONTIER	12	297.5	30	155.4
FURNAS	17	207.3	70	150.1
GAGE	61	175.7	277	162.9
GARDEN	*	*	31	168.9
GARFIELD	*	*	31	156.9
GOSPER	*	*	22	135.0
GRANT	*	*	7	310.0
GREELEY	*	*	36	139.5
HALL	131	211.6	527	174.1
HAMILTON	11	▼95.1	94	162.9
HARLAN	16	232.5	55	170.1
HAYES	*	*	8	▼90.1
HITCHCOCK	*	*	45	185.6
HOLT	28	169.1	130	153.4
HOOKER	*	*	14	177.7
HOWARD	17	177.4	74	163.8

TABLE 6: Cancer (All Sites) Mortality (Continued)
Number of Deaths and Rates, by County of Residence
Nebraska (2006 and 2002-2006) and US (2005 and 2001-2005)

	2006		2002-2006	
	# Deaths	Rate	# Deaths	Rate
COUNTY				
JEFFERSON	18	121.7	112	158.0
JOHNSON	11	▼89.0	67	157.8
KEARNEY	11	114.2	83	186.6
KEITH	22	175.4	114	188.0
KEYA PAHA	*	*	8	▼97.9
KIMBALL	17	318.1	73	231.4
KNOX	34	241.5	137	177.3
LANCASTER	425	176.5	2063	179.5
LINCOLN	84	197.5	398	189.2
LOGAN	*	*	12	220.0
LOUP	*	*	11	197.5
McPHERSON	*	*	5	**
MADISON	71	177.8	328	161.1
MERRICK	19	171.3	102	183.2
MORRILL	10	134.6	60	171.1
NANCE	13	215.9	55	189.5
NEMAHA	19	181.6	81	159.4
NUCKOLLS	13	131.1	83	187.1
OTOE	31	135.0	197	185.8
PAWNEE	8	153.0	42	153.4
PERKINS	8	143.9	44	183.6
PHELPS	25	166.7	122	171.6
PIERCE	14	167.1	88	196.0
PLATTE	59	165.2	299	181.0
POLK	15	199.1	73	171.5
RED WILLOW	32	212.5	144	185.9
RICHARDSON	23	132.9	145	207.5
ROCK	*	*	20	139.3
SALINE	29	167.4	150	172.7
SARPY	165	171.2	773	175.0
SAUNDERS	51	206.8	217	177.3
SCOTTS BLUFF	87	181.3	422	177.5
SEWARD	46	224.1	206	202.2
SHERIDAN	15	158.2	87	187.2
SHERMAN	10	201.0	47	176.1
SIOUX	*	*	13	130.1
STANTON	9	126.8	61	178.4
THAYER	15	126.6	77	143.8
THOMAS	0	---	2	**
THURSTON	15	211.9	89	▲253.8
VALLEY	13	153.3	56	▼138.4
WASHINGTON	45	204.6	190	178.4
WAYNE	17	161.1	68	▼133.8
WEBSTER	10	148.4	60	167.9
WHEELER	*	*	13	270.6
YORK	32	162.0	154	157.6

NA = not available
*Number and rate for single years are not shown if based on five or fewer events
**Rate for combined years is not shown if based on five or fewer events
Rates are expressed per 100,000 population and are age-adjusted to the 2000 U.S. population

▼ county rate is significantly lower than the state rate
▲ county rate is significantly higher than the state rate

TABLE 7: Cancer Mortality
Number of Deaths and Rates, All Sites and Top Ten Sites, by Race and Ethnicity
Nebraska (1997-2006)

	White			African-American			Native American			Asian/Pacific Islander			Hispanic		
	Site	Number	Rate	Site	Number	Rate	Site	Number	Rate	Site	Number	Rate	Site	Number	Rate
	All	32185	180.7	All	1021	245.5	All	147	205.7	All	132	110.9	All	373	116.1
Rank															
1	Lung & Bronchus	8511	48.8	Lung & Bronchus	318	75.6	Lung & Bronchus	41	58.7	Lung & Bronchus	35	30.0	Lung & Bronchus	65	21.5
2	Colon & Rectum (Colorectal)	3713	20.4	Colon & Rectum (Colorectal)	118	30.5	Colon & Rectum (Colorectal)	12	17.0	Liver & Intrahepatic Bile Duct	15	8.3	Colon & Rectum (Colorectal)	42	14.4
3	Female Breast	2342	23.5	Female Breast	92	36.4	Female Breast	10	19.7	Colon & Rectum (Colorectal)	11	9.9	Liver & Intrahepatic Bile Duct	29	10.0
4	Prostate	1873	26.2	Prostate	53	39.7	Kidney & Renal Pelvis	10	14.0	Pancreas	11	9.2	Female Breast	23	12.9
5	Pancreas	1712	9.6	Pancreas	52	13.0	Ovary	8	10.4	Female Breast	8	11.0	Stomach	23	7.2
6	Non-Hodgkin Lymphoma	1449	8.0	Leukemia	34	8.1	Pancreas	7	17.3	Stomach	8	4.4	Pancreas	20	6.9
7	Leukemia	1403	7.8	Stomach	33	7.7	Several sites	4	*	Non-Hodgkin Lymphoma	5	*	Leukemia	19	4.9
8	Brain & Other Nervous System	883	5.2	Myeloma	32	8.3	---	---	---	Kidney & Renal Pelvis	5	*	Non-Hodgkin Lymphoma	15	4.6
9	Ovary	866	8.8	Liver & Intrahepatic Bile Duct	32	6.7	---	---	---	Brain & Other Nervous System	5	*	Prostate	11	11.3
10	Kidney & Renal Pelvis	812	4.6	Non-Hodgkin Lymphoma	26	6.4	---	---	---	Uterine Cervix	4	*	Uterine Cervix	11	4.5

Rates are expressed per 100,000 population, excluding gender-specific sites (prostate, female breast, cervix, ovary), which are expressed per 100,000 male or female population. All rates are age-adjusted to the 2000 U.S. population.
* Rate is not shown if based on five or fewer deaths

TABLE 8: Cancer Mortality
Number of Deaths and Percentage Distribution, by Site and Age at Diagnosis,
Nebraska (2002-2006)

	0-17 Yrs.		18-44 Yrs.		45-64 Yrs.		65 Yrs and Older		TOTAL	
	No.	%	No.	%	No.	%	No.	%	No.	%
All Sites	62	0.4	472	2.8	3810	22.7	12464	74.2	16808	100.0
Oral Cavity & Pharynx	2	1.1	7	3.7	62	32.8	118	62.4	189	100.0
Esophagus	0	0.0	7	1.7	111	27.0	293	71.3	411	100.0
Stomach	0	0.0	9	3.8	54	22.5	177	73.8	240	100.0
Colon & Rectum (Colorectal)	0	0.0	33	1.8	380	20.3	1459	77.9	1872	100.0
Liver & Intrahepatic Bile Duct	4	1.1	10	2.8	102	29.0	236	67.0	352	100.0
Pancreas	0	0.0	17	1.9	202	22.1	696	76.1	915	100.0
Lung & Bronchus	0	0.0	72	1.6	1098	24.7	3278	73.7	4448	100.0
Melanoma of the Skin	0	0.0	29	10.7	89	33.0	152	56.3	270	100.0
Female Breast	0	0.0	68	5.6	367	30.2	779	64.2	1214	100.0
Uterine Cervix	0	0.0	16	17.2	44	47.3	33	35.5	93	100.0
Uterine Corpus & Unspecified (Endometrium)	0	0.0	5	1.9	67	25.6	190	72.5	262	100.0
Ovary	0	0.0	14	3.1	115	25.4	324	71.5	453	100.0
Prostate	0	0.0	0	0.0	64	6.9	862	93.1	926	100.0
Urinary Bladder	0	0.0	3	0.8	54	14.4	319	84.8	376	100.0
Brain & Other Nervous System	29	6.6	34	7.8	143	32.7	231	52.9	437	100.0
Kidney & Renal Pelvis	6	1.3	8	1.8	113	24.7	330	72.2	457	100.0
Non-Hodgkin Lymphoma	1	0.1	14	2.0	117	16.5	575	81.3	707	100.0
Myeloma	0	0.0	4	1.2	62	18.5	270	80.4	336	100.0
Leukemia	5	0.7	30	4.2	104	14.7	567	80.3	706	100.0

NOTE: Due to rounding, percentages may not sum to 100.0

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INCIDENCE AND MORTALITY FOR SELECTED SITES

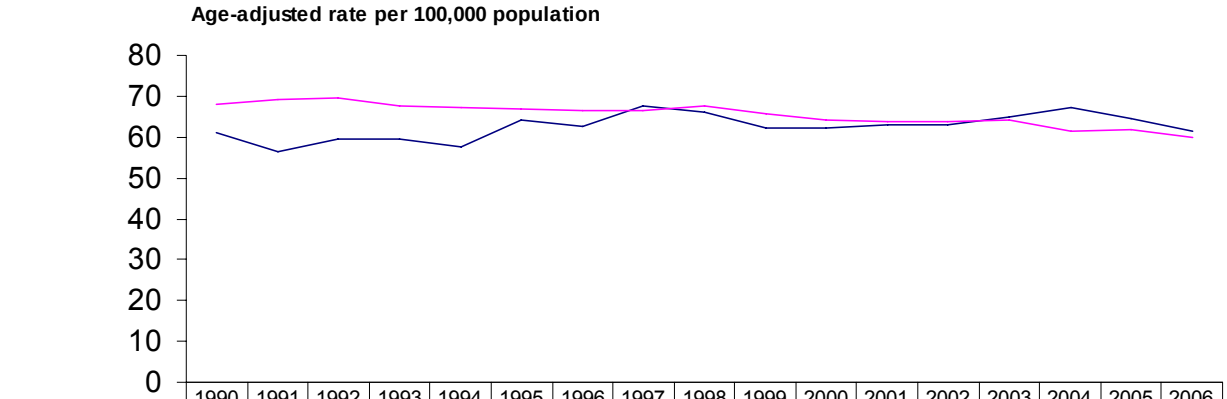
Lung and Bronchus

Although lung cancer was only the third most frequently diagnosed cancer among Nebraska residents in 2006, it was the year's leading cause of cancer mortality, accounting for more than 25% of the state's cancer deaths. During the past five years (2002-06), lung cancer has averaged over 1,100 diagnoses and 900 deaths in Nebraska per year. Lung cancer is more likely to strike men than women, both in Nebraska and throughout the United States. The large number of lung cancer deaths is due to the small number of cases that are detected at an early stage: as a result, fewer than 20% of people who are diagnosed with lung cancer survive five years or more.

Cigarette smoking is the major cause of lung cancer and is estimated to cause 85% of lung cancer deaths. People who smoke two or more packs of cigarettes per day are 15 to 25 times more likely to die from lung cancer than non-smokers. Quitting smoking reduces the risk of dying from lung cancer although it takes 10-15 years for an ex-smoker's risk to drop to the level of a lifelong non-smoker. Data gathered in 2006 as part of the Behavioral Risk Factor Surveillance System indicate that close to one in five (18.7%) Nebraska residents age 18 years or older are regular smokers, which is about equal to the national figure of 20.1%.

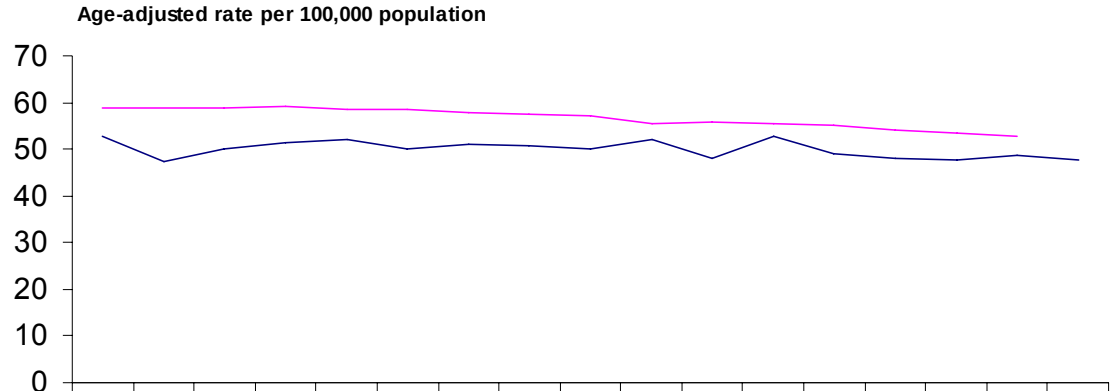
Lung and bronchus cancer incidence and mortality statistics by county of residence are presented in Appendix I (Table 9).

Lung and Bronchus Cancer
Incidence Rates, by Year
Nebraska and the United States (1990-2006)



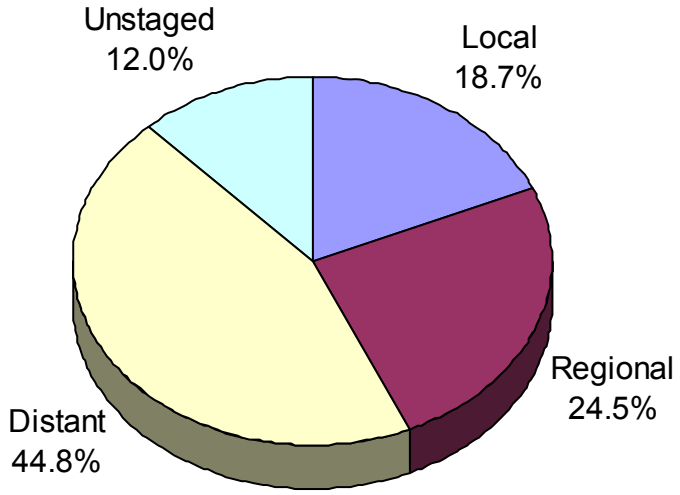
	1990	1991	1992	1993	1994	1995	1996	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006
Nebraska	61.2	56.6	59.5	59.6	57.6	64.1	62.5	67.5	65.9	62.4	62.2	63.1	63.1	65.1	67.4	64.6	61.6
United States	68.1	69.2	69.4	67.8	67.1	66.8	66.4	66.6	67.5	65.8	64.0	63.9	63.6	64.2	61.4	61.8	60.0

Lung and Bronchus Cancer
Mortality Rates, by Year
Nebraska and the United States (1990-2006)



	1990	1991	1992	1993	1994	1995	1996	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006
Nebraska	52.9	47.2	49.9	51.4	52.0	50.0	51.0	50.6	50.1	52.1	48.0	52.8	49.2	47.9	47.7	48.6	47.7
United States	58.9	59.0	58.9	59.1	58.5	58.4	57.9	57.5	57.1	55.4	55.8	55.3	55.0	54.1	53.3	52.8	

Lung and Bronchus Cancer
Percentage of Cases, by Stage of Disease at Diagnosis
Nebraska (2002-2006)



Breast (Female only)

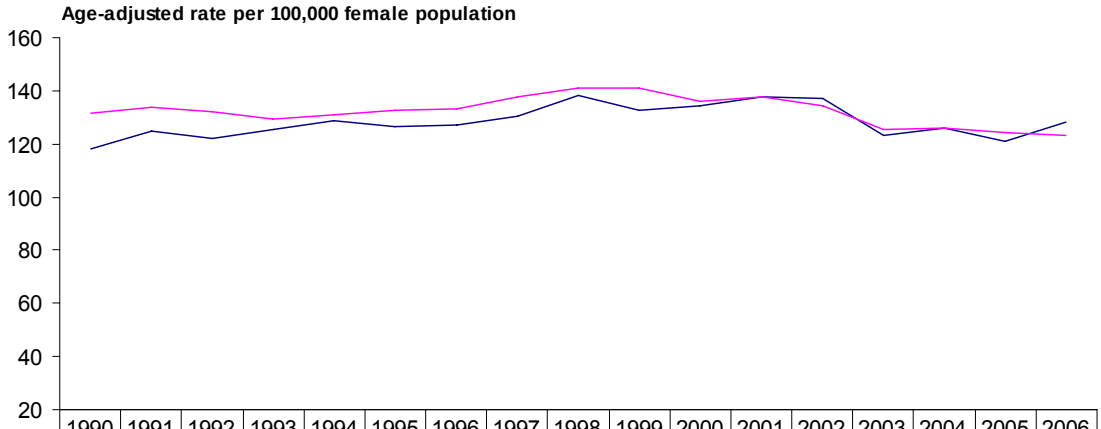
Breast cancer is the most common malignancy diagnosed among women and the second most frequent cause of female cancer deaths. In Nebraska, over 6,200 women were diagnosed with malignant breast cancer (and another 1,300 were diagnosed with in situ breast cancer) and over 1,200 women died from it between 2002 and 2006. Since 1990, the rate of breast cancer deaths in Nebraska and the U.S. has declined significantly; at the same time, screening for the disease has increased. During the present decade, the rate of malignant breast cancer diagnoses has also declined, which has been attributed to the decreasing use of post-menopausal hormone replacement therapy.

Age remains a strong risk factor for breast cancer. Only about 20% of the malignancies diagnosed in Nebraska during 2002-2006 involved a woman under 50, while nearly half occurred among women 65 and older. Other risk factors include genetic mutations, a personal or family history of breast cancer, some forms of benign breast disease, early menstruation, late menopause, never having children or having a first child after age 30, and for post-menopausal women, obesity and long-term hormone replacement therapy.

Periodic screening for breast cancer can save lives by detecting cases at an early stage, when they are most treatable. ACS screening guidelines recommend that women have an annual mammogram beginning at age 40. The ACS also recommends that a clinical breast exam be part of a regular health exam, about every three years for women in their 20s and 30s, and every year for women 40 and older. For women who have an increased risk of breast cancer (i.e., a strong family history of breast or ovarian cancer or past treatment for Hodgkin Disease), magnetic resonance imaging (MRI) is recommended as an additional screening test.

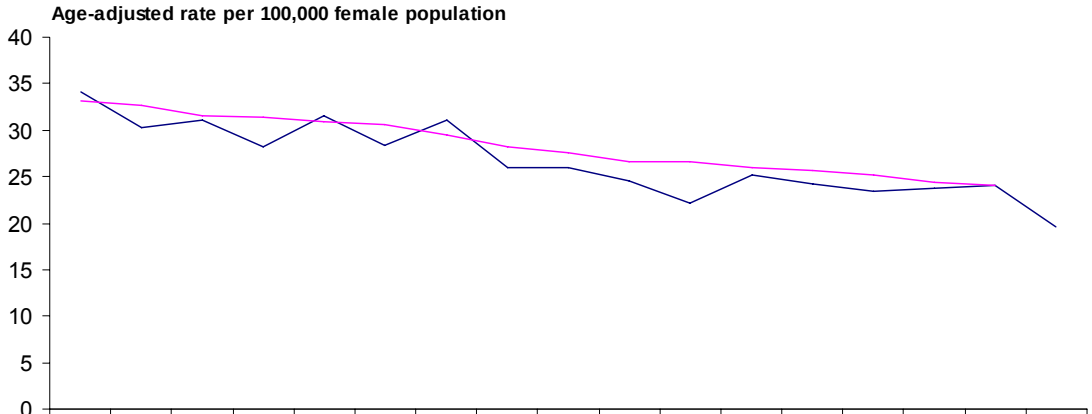
Female breast cancer incidence and mortality statistics by county of residence are presented in Appendix II (Table 10).

Female Breast Cancer
Incidence Rates, by Year
Nebraska and the United States (1990-2006)



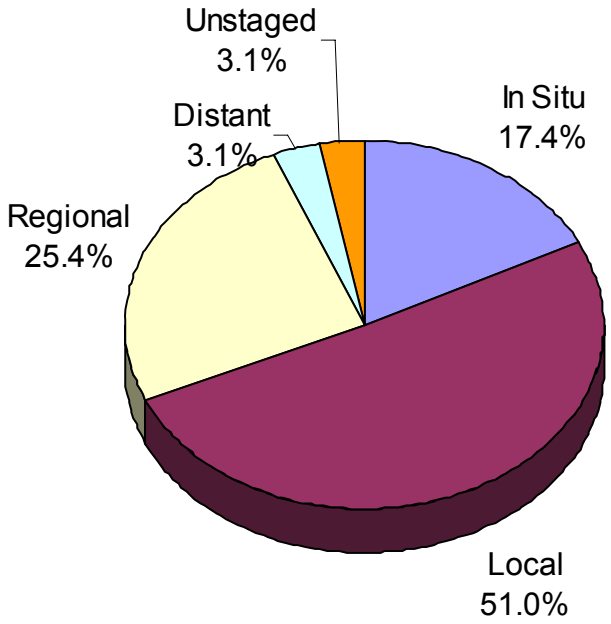
	1990	1991	1992	1993	1994	1995	1996	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006
Nebraska	118.2	125.0	121.9	125.3	128.9	126.5	127.2	130.7	138.1	132.9	134.5	137.8	137.0	123.3	125.9	120.9	128.2
United States	131.7	133.7	131.9	129.1	130.8	132.5	133.5	137.8	141.1	141.0	136.1	137.9	134.6	125.5	125.9	124.1	123.0

Female Breast Cancer
Mortality Rates, by Year
Nebraska and the United States (1990-2006)



	1990	1991	1992	1993	1994	1995	1996	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006
Nebraska	34.1	30.3	31.1	28.2	31.5	28.3	31.1	26.0	25.9	24.5	22.2	25.1	24.2	23.5	23.8	24.0	19.6
United States	33.1	32.7	31.6	31.4	30.9	30.6	29.5	28.2	27.5	26.6	26.6	26.0	25.6	25.2	24.4	24.0	

Female Breast Cancer
Percentage of Cases, by Stage of Disease at Diagnosis
Nebraska (2002-2006)



Colon and Rectum (Colorectal)

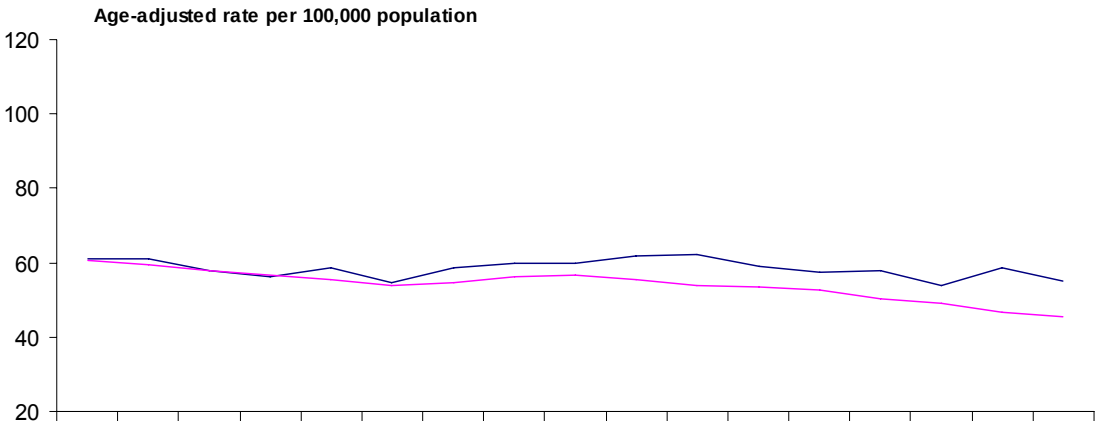
In 2006, colorectal cancer was the fourth most frequently diagnosed cancer among Nebraska residents, accounting for almost 1,100 new cases. It was also the second leading cause of cancer mortality in the state, accounting for 381 deaths.

The risk of developing colorectal cancer increases with age. Over 70% of the colorectal cancer cases that occurred in Nebraska during 2002-2006 were at least 65 years old when diagnosed. Other risk factors include a personal or family history of colorectal cancer or polyps, a personal history of chronic inflammatory bowel disease, and certain hereditary colorectal cancer syndromes. Modifiable risk factors include physical inactivity, obesity, smoking, a high-fat diet (especially fat from animal sources), and heavy alcohol use.

At present, screening for asymptomatic polyps and tumors remains the best method for preventing colorectal cancer cases and deaths. The ACS recommends that people should begin screening at age 50 and follow one of these schedules: 1) a fecal occult blood test (FOBT) or fecal immunochemical test (FIT) every year, 2) flexible sigmoidoscopy every five years, 3) an FOBT or FIT every year and flexible sigmoidoscopy every five years (both FOBT/FIT and sigmoidoscopy together are preferable to either option alone), 4) double-contrast barium enema every five years, or 5) colonoscopy every ten years. People at increased risk (i.e., a personal or family history of colorectal cancer or polyps, a personal history of chronic inflammatory bowel disease, or a family history of hereditary colorectal cancer syndromes) should talk to a doctor about beginning screening before age 50 and/or being screened more often.

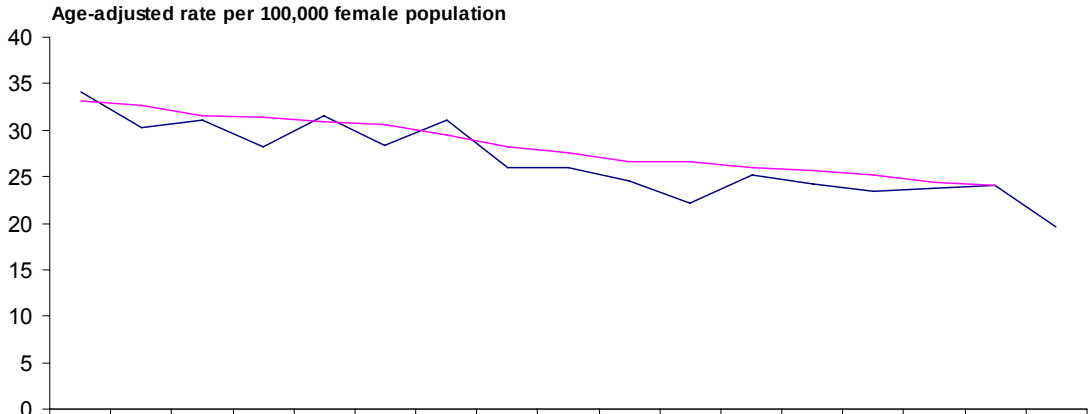
Colorectal cancer incidence and mortality statistics by county of residence are presented in Appendix III (Table 11).

Colorectal Cancer
Incidence Rates, by Year
Nebraska and the United States (1990-2006)



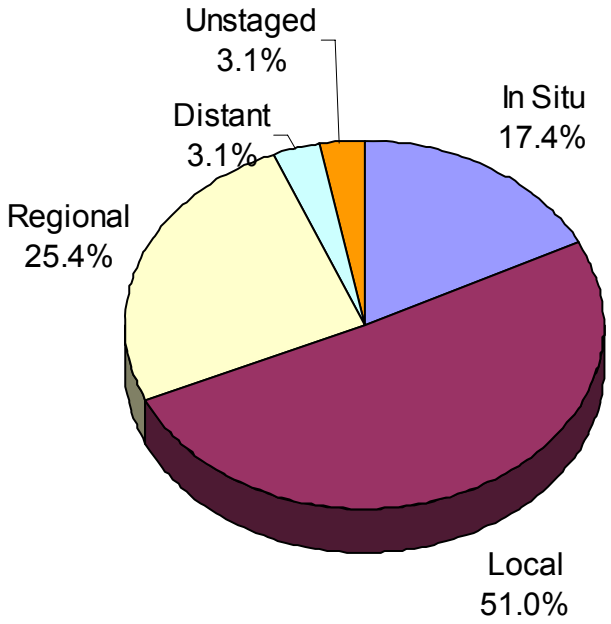
	1990	1991	1992	1993	1994	1995	1996	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006
Nebraska	61.0	61.2	57.7	56.3	58.7	54.8	58.7	59.8	60.0	61.9	62.2	59.0	57.6	57.9	54.0	58.7	55.1
United States	60.7	59.5	58.0	56.8	55.6	54.0	54.7	56.4	56.7	55.4	54.0	53.3	52.7	50.3	49.2	46.7	45.5

Female Breast Cancer
Mortality Rates, by Year
Nebraska and the United States (1990-2006)



	1990	1991	1992	1993	1994	1995	1996	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006
Nebraska	34.1	30.3	31.1	28.2	31.5	28.3	31.1	26.0	25.9	24.5	22.2	25.1	24.2	23.5	23.8	24.0	19.6
United States	33.1	32.7	31.6	31.4	30.9	30.6	29.5	28.2	27.5	26.6	26.6	26.0	25.6	25.2	24.4	24.0	

Female Breast Cancer
Percentage of Cases, by Stage of Disease at Diagnosis
Nebraska (2002-2006)



Prostate

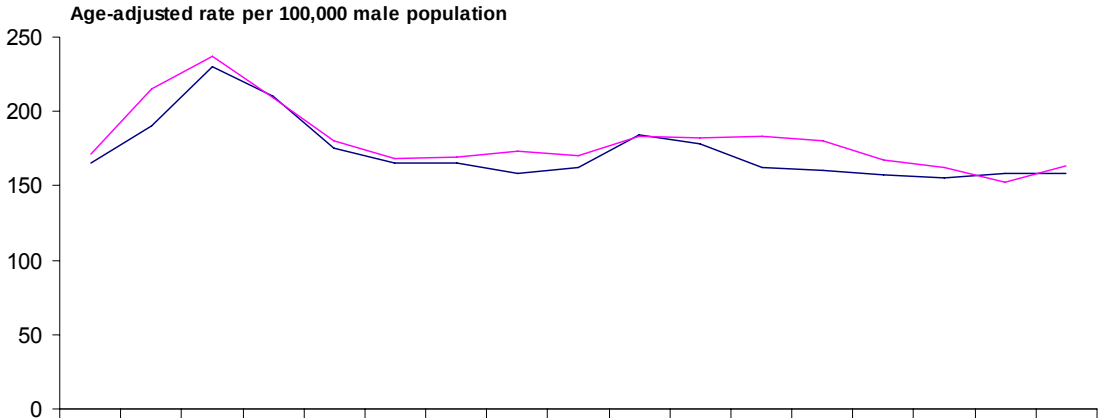
With over 1,300 diagnoses in 2006, prostate cancer was the most common cancer among Nebraska men, accounting for more than one of every four new cancer cases. Although survival rates are quite high, it is also the second leading cause of cancer deaths among men, and was responsible for over 900 deaths in Nebraska between 2002 and 2006. Since the mid-1990s, prostate cancer death rates have declined, both in Nebraska and throughout the United States.

Little is known about what causes prostate cancer. However, there are two well-known high-risk groups: the elderly (men age 65 and older accounted for about two-thirds of Nebraska's diagnoses during 2002-2006) and African-Americans. Men with a close relative (father or brother) who have had prostate cancer (especially at a young age) are also at increased risk.

Although screening can reduce mortality for some types of cancer (e.g., breast, cervical, colorectal), the value of screening for prostate cancer is still uncertain. The ACS recommends that health care providers offer the prostate-specific antigen test and a digital rectal exam annually to men age 50 and older who have a life expectancy of at least 10 years. Men at higher risk (African-Americans and those who have one or more first degree relatives diagnosed with prostate cancer at a young age) should begin testing at age 45. Information should be provided to all men about the benefits and limitations of prostate cancer testing and treatment so that they can make the most informed decision possible.

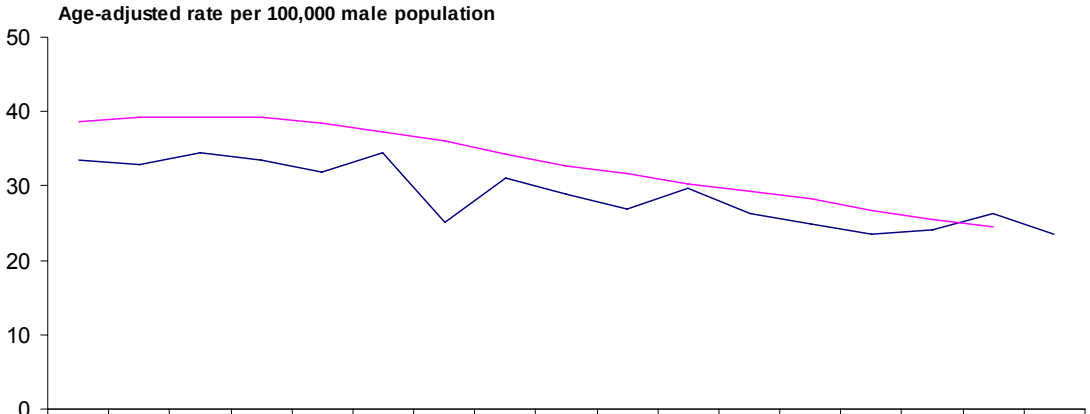
Prostate cancer incidence and mortality statistics by county of residence are presented in Appendix IV (Table 12).

Prostate Cancer
Incidence Rates, by Year
Nebraska and the United States (1990-2006)



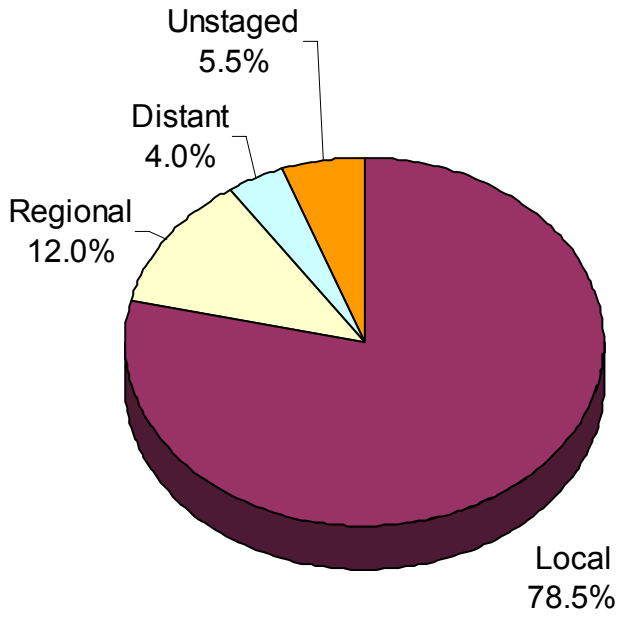
	1990	1991	1992	1993	1994	1995	1996	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006
Nebraska	165.5	190.2	230.1	210.3	175.1	165.5	164.9	158.8	162.3	183.9	178.0	162.2	160.0	157.2	155.3	158.5	158.4
United States	170.9	214.7	237.2	209.3	180.0	168.7	168.9	173.1	170.1	183.0	181.8	183.5	180.5	167.5	162.6	152.0	163.1

Prostate Cancer
Mortality Rates, by Year
Nebraska and the United States (1990-2006)



	1990	1991	1992	1993	1994	1995	1996	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006
Nebraska	33.5	32.8	34.5	33.5	31.9	34.4	25.1	31.0	28.8	26.9	29.6	26.3	25.0	23.5	24.2	26.2	23.5
United States	38.6	39.3	39.2	39.3	38.5	37.3	36.0	34.2	32.6	31.6	30.3	29.2	28.2	26.6	25.5	24.6	

Prostate Cancer
Percentage of Cases, by Stage of Disease at Diagnosis
Nebraska (2002-2006)



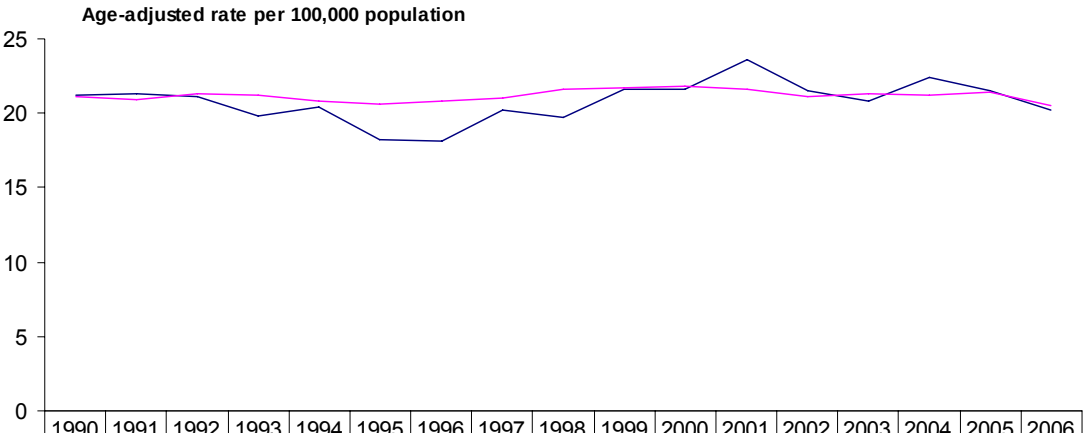
Urinary Bladder

Between 2002 and 2006, almost 2,000 Nebraska residents were diagnosed with bladder cancer. Bladder cancer occurs much more frequently among men than women (by about a 3-to-1 ratio), and it now ranks fourth as the most common site of cancer diagnoses among Nebraska men. However, deaths from bladder cancer occur far less often (376 Nebraska residents died from it during 2002-2006), which is the result of a high percentage of early-stage diagnoses and the existence of effective treatments. Survival prospects have improved considerably in recent decades, to the point where the most current national data show that over 80% of all bladder cancer patients are still alive five years after diagnosis.

Cigarette smoking is the most important known risk factor for bladder cancer. Smokers develop bladder cancer two to three times more often than non-smokers, and about one-third of all cases are attributable to smoking. Risk factors also include occupational exposures to certain chemicals used to make dyes (benzidine and beta-naphthylamine), as well as working in the manufacture of rubber, leather, textiles, and paint. Like most cancers, the risk of bladder cancer increases with age: almost 75% of the cases that occurred in Nebraska during 2002-2006 were at least 65 years old when diagnosed.

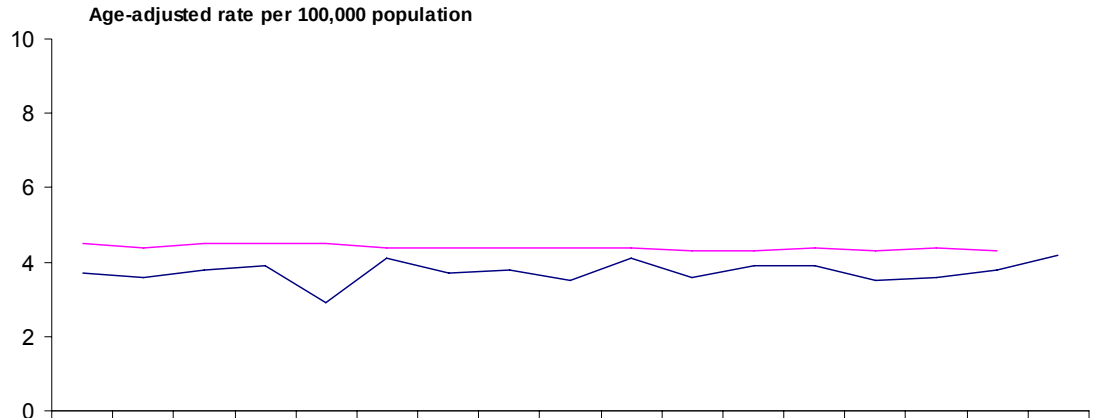
Urinary bladder cancer incidence and mortality statistics by county of residence are presented in Appendix V (Table 13).

Urinary Bladder Cancer
Incidence Rates, by Year
Nebraska and the United States (1990-2006)



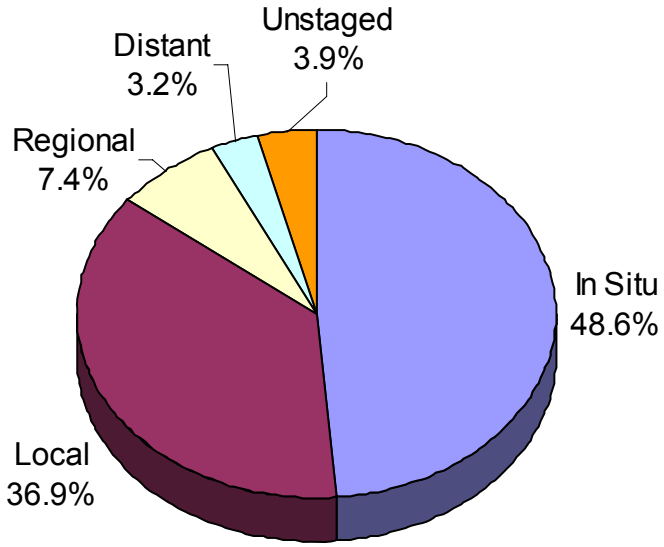
	1990	1991	1992	1993	1994	1995	1996	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006
Nebraska	21.2	21.3	21.1	19.8	20.4	18.2	18.1	20.2	19.7	21.6	21.6	23.6	21.5	20.8	22.4	21.5	20.2
United States	21.1	20.9	21.3	21.2	20.8	20.6	20.8	21.0	21.6	21.7	21.8	21.6	21.1	21.3	21.2	21.4	20.5

Urinary Bladder Cancer
Mortality Rates, by Year
Nebraska and the United States (1990-2006)



	1990	1991	1992	1993	1994	1995	1996	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006
Nebraska	3.7	3.6	3.8	3.9	2.9	4.1	3.7	3.8	3.5	4.1	3.6	3.9	3.9	3.5	3.6	3.8	4.2
United States	4.5	4.4	4.5	4.5	4.5	4.4	4.4	4.4	4.4	4.4	4.3	4.3	4.4	4.3	4.4	4.3	

Urinary Bladder Cancer
Percentage of Cases, by Stage of Disease at Diagnosis
Nebraska (2002-2006)



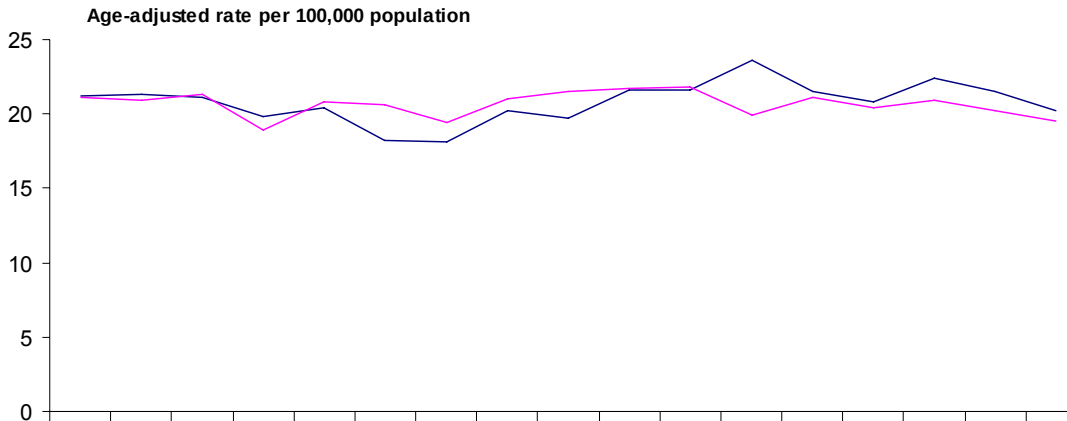
Non-Hodgkin Lymphoma

Lymphomas are cancers that affect the white blood cells of the immune system, and are usually classified as either Hodgkin Disease or Non-Hodgkin lymphoma. Non-Hodgkin lymphoma is by far the more common disorder of the two, accounting for over 1,900 diagnoses and 700 deaths among Nebraska residents between 2002 and 2006 (for Hodgkin Disease, the comparable figures are 285 diagnoses and 44 deaths). National statistics indicate that the incidence rate for Non-Hodgkin lymphoma has increased by about 80% since the mid-1970s, and some of this increase is related to the appearance of AIDS. However, both state and national data show that Non-Hodgkin lymphoma deaths have been increasing since at least 1950, which indicates that factors other than AIDS are also responsible.

The causes of Non-Hodgkin lymphoma are unknown, although there is evidence that viral exposures and reduced immune function are associated with the disease. People whose immune systems have been suppressed by drugs, particularly those who have received an organ transplant, are at high risk of Non-Hodgkin lymphoma, and it also occurs more frequently among people with congenital and acquired immunologic disorders, including AIDS. The increased incidence of the disease among people with congenital disorders of the immune system suggests that hereditary factors may increase risk. Some studies have found that occupational exposure to certain herbicides is a risk factor as well.

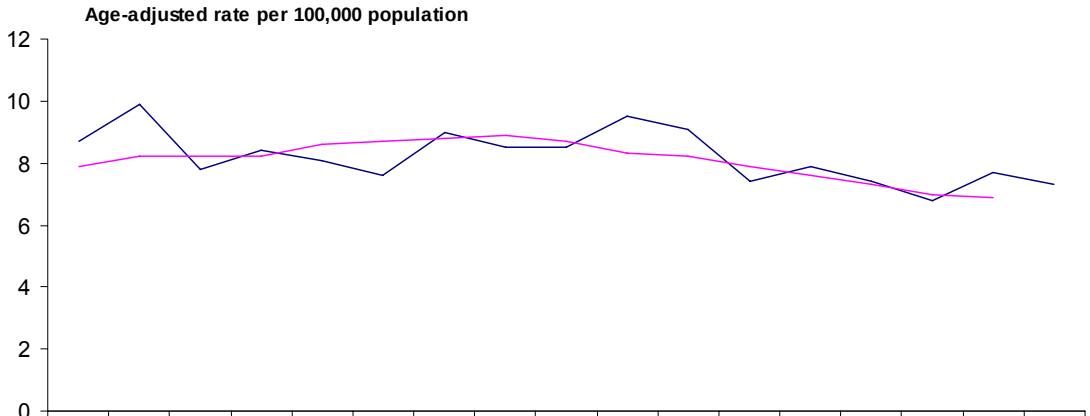
Non-Hodgkin lymphoma incidence and mortality statistics are presented in Appendix VI (Table 14).

Non-Hodgkin Lymphoma
Incidence Rates, by Year
Nebraska and the United States (1990-2006)



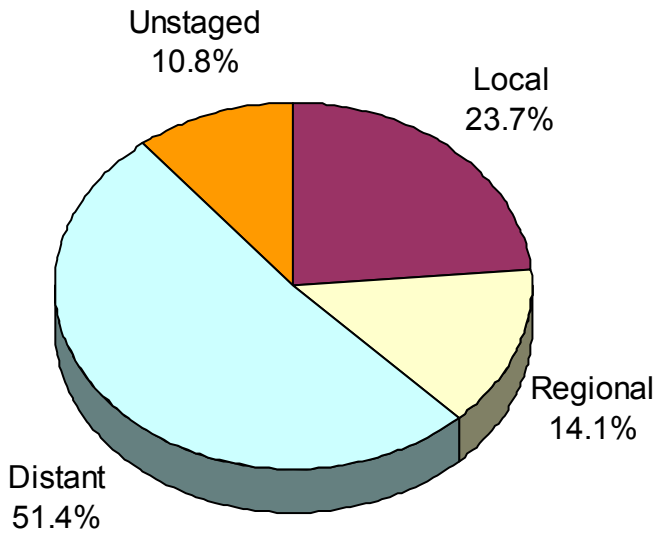
	1990	1991	1992	1993	1994	1995	1996	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006
Nebraska	21.2	21.3	21.1	19.8	20.4	18.2	18.1	20.2	19.7	21.6	21.6	23.6	21.5	20.8	22.4	21.5	20.2
United States	21.1	20.9	21.3	18.9	20.8	20.6	19.4	21.0	21.5	21.7	21.8	19.9	21.1	20.4	20.9	20.2	19.5

Non-Hodgkin Lymphoma
Mortality Rates, by Year
Nebraska and the United States (1990-2006)



	1990	1991	1992	1993	1994	1995	1996	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006
Nebraska	8.7	9.9	7.8	8.4	8.1	7.6	9.0	8.5	8.5	9.5	9.1	7.4	7.9	7.4	6.8	7.7	7.3
United States	7.9	8.2	8.2	8.2	8.6	8.7	8.8	8.9	8.7	8.3	8.2	7.9	7.6	7.3	7.0	6.9	

Non-Hodgkin Lymphoma
Percentage of Cases, by Stage of Disease at Diagnosis
Nebraska (2002-2006)



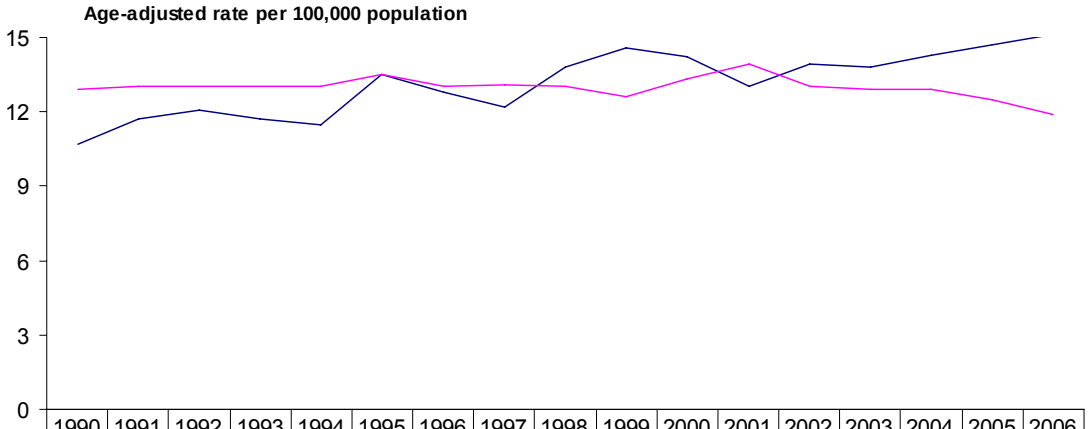
Leukemia

Between 2002 and 2006, leukemia accounted for more than 1,300 diagnoses and over 700 deaths among Nebraska residents. Leukemia is the most common type of malignancy among children and adolescents, accounting for one of every four malignant cancers diagnosed among Nebraska residents under the age of 18. At the same time, however, more than six of every ten leukemia cases that occurred in Nebraska between 2002 and 2006 were 65 or older at diagnosis. There are many different types of leukemia: acute lymphocytic leukemia is the most frequently diagnosed among children, while acute myeloid and chronic lymphocytic are the most common types among adults. Survival rates vary widely by type: overall, about half of all leukemia patients remain alive at least five years after diagnosis.

The major causes of most types of leukemia are unknown. Nevertheless, several risk factors have been identified, and include genetic abnormalities (such as Down's syndrome), exposure to ionizing radiation, and workplace exposure to benzene and other related solvents. Adult T-cell leukemia is strongly associated with infection by a retrovirus, the human T-cell lymphotropic virus, type I (HTLV-I). Cigarette smoking is a risk factor for acute myeloid leukemia, while people who have a family history of chronic lymphocytic leukemia carry an increased risk of the disease themselves.

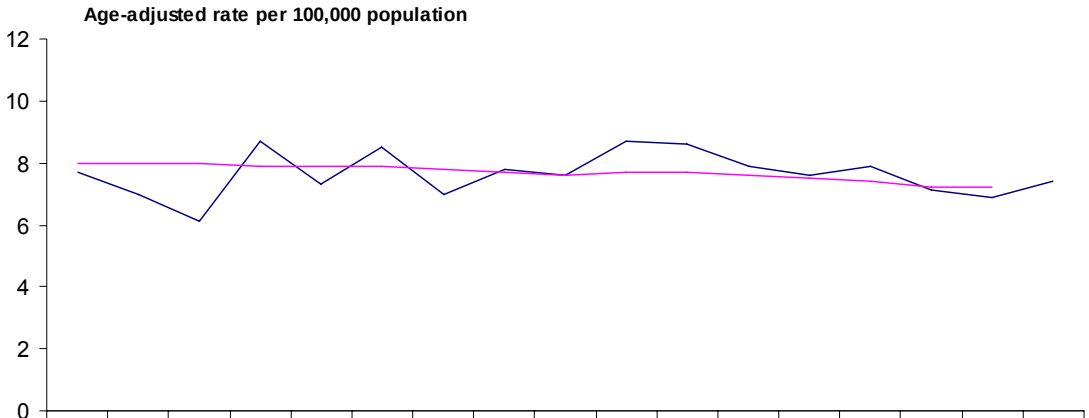
Leukemia incidence and mortality statistics by county of residence are presented in Appendix VII (Table 15).

Leukemia
Incidence Rates, by Year
Nebraska and the United States (1990-2006)



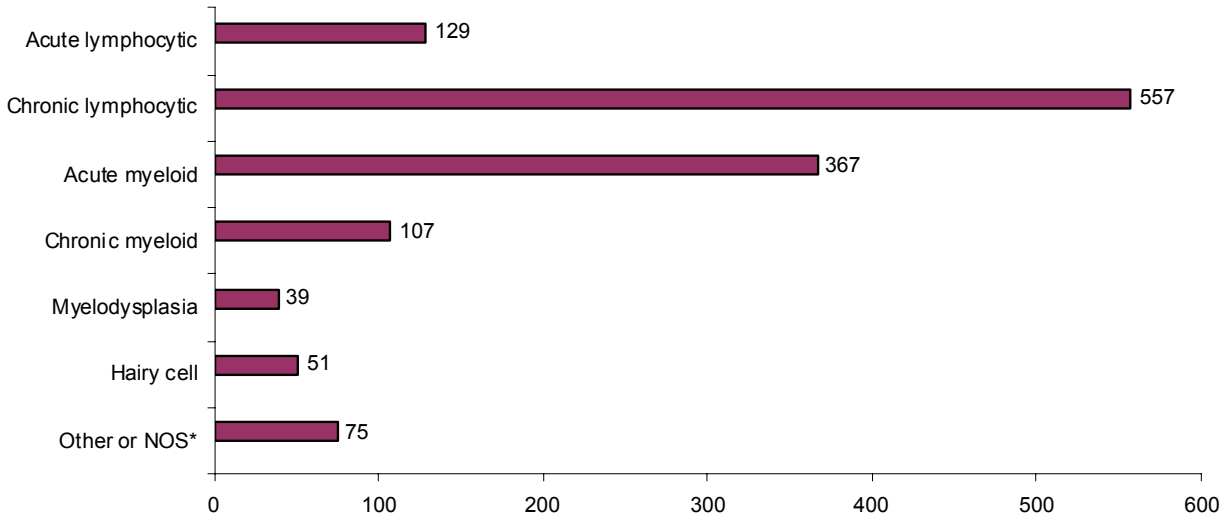
	1990	1991	1992	1993	1994	1995	1996	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006
Nebraska	10.7	11.7	12.1	11.7	11.5	13.5	12.8	12.2	13.8	14.6	14.2	13.0	13.9	13.8	14.3	14.7	15.1
United States	12.9	13.0	13.0	13.0	13.0	13.5	13.0	13.1	13.0	12.6	13.3	13.9	13.0	12.9	12.9	12.5	11.9

Leukemia
Mortality Rates, by Year
Nebraska and the United States (1990-2006)



	1990	1991	1992	1993	1994	1995	1996	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006
Nebraska	7.7	7.0	6.1	8.7	7.3	8.5	7.0	7.8	7.6	8.7	8.6	7.9	7.6	7.9	7.1	6.9	7.4
United States	8.0	8.0	8.0	7.9	7.9	7.9	7.8	7.7	7.6	7.7	7.7	7.6	7.5	7.4	7.2	7.2	

Leukemia
Number of Cases, by Histologic Type
Nebraska (2002-2006)



*includes plasma cell leukemia (2 cases); acute biphenotypic leukemia (2 cases); chronic eosinophilic leukemia (4 cases); acute leukemia, NOS (28 cases); lymphoid leukemia, NOS (6 cases); myeloid leukemia, NOS (15 cases); leukemia, NOS (18 cases)
Abbreviation: NOS, not otherwise specified

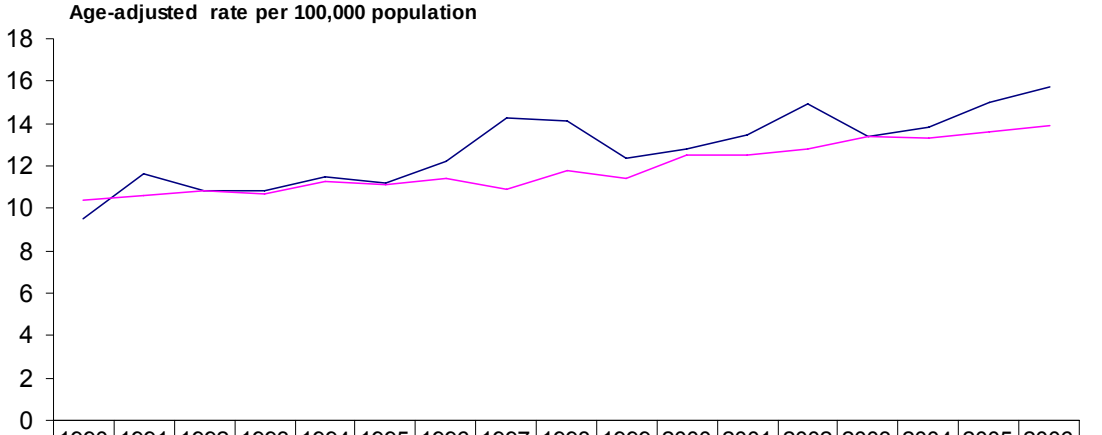
Kidney and Renal Pelvis

Cancers of the kidney and renal pelvis accounted for more than 1,300 diagnoses in Nebraska between 2002 and 2006, and also accounted for more than 400 deaths in Nebraska during the same years. State and national trends since 1990 show a significant increase in the rate of diagnosis of these cancers, but little change in the mortality rate. The chances of survival for people with kidney cancer are relatively high, with the most current national statistics showing that about two-thirds of all cases remain alive at least five years after diagnosis.

Preventable risk factors for cancer of the kidney include cigarette smoking and obesity. Current estimates indicate that smoking is responsible for about one-third of all kidney cancer deaths. Non-preventable risk factors for cancer of the kidney include age, certain hereditary conditions, family history of kidney cancer, coexisting kidney disease, and high blood pressure. However, since people with high blood pressure are often treated with drugs, it is unclear whether their increased risk is related to their high blood pressure or the drugs. Nevertheless, people who need drugs to lower their blood pressure should take them.

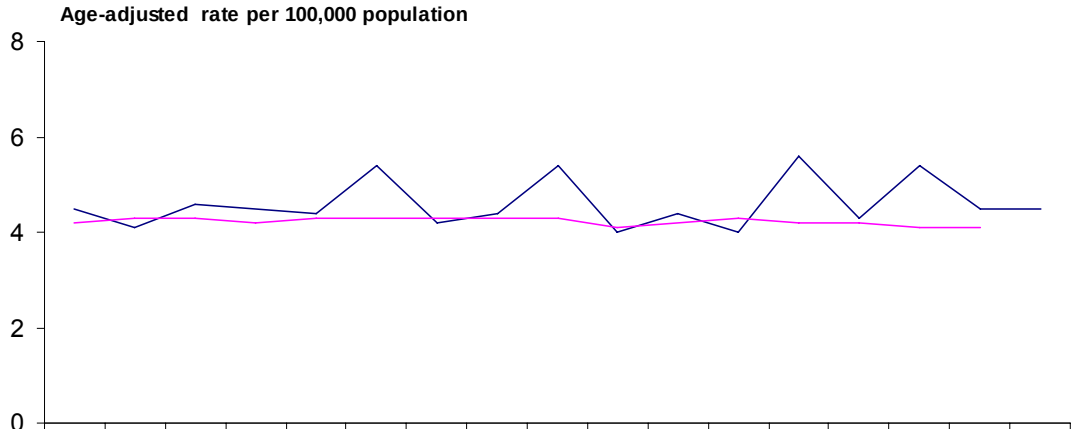
Kidney and renal pelvis cancer incidence and mortality statistics by county of residence are presented in Appendix VIII (Table 16).

Kidney and Renal Pelvis Cancer
Incidence Rates, by Year
Nebraska and the United States (1990-2006)



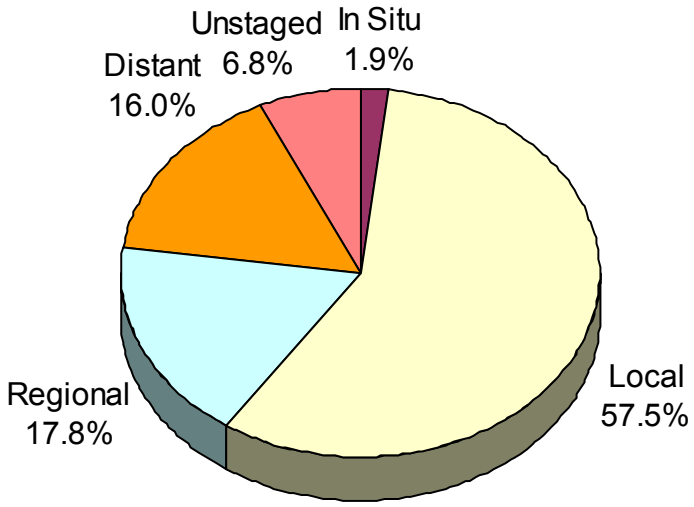
	1990	1991	1992	1993	1994	1995	1996	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006
Nebraska	9.5	11.6	10.8	10.8	11.5	11.2	12.2	14.3	14.1	12.4	12.8	13.5	14.9	13.4	13.8	15.0	15.7
United States	10.4	10.6	10.8	10.7	11.3	11.1	11.4	10.9	11.8	11.4	12.5	12.5	12.8	13.4	13.3	13.6	13.9

Kidney and Renal Pelvis Cancer
Mortality Rates, by Year
Nebraska and the United States (1990-2006)



	1990	1991	1992	1993	1994	1995	1996	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006
Nebraska	4.5	4.1	4.6	4.5	4.4	5.4	4.2	4.4	5.4	4.0	4.4	4.0	5.6	4.3	5.4	4.5	4.5
United States	4.2	4.3	4.3	4.2	4.3	4.3	4.3	4.3	4.3	4.1	4.2	4.3	4.2	4.2	4.1	4.1	

Kidney and Renal Pelvis Cancer
Percentage of Cases, by Stage of Disease at Diagnosis
Nebraska (2002-2006)



Melanoma of the Skin

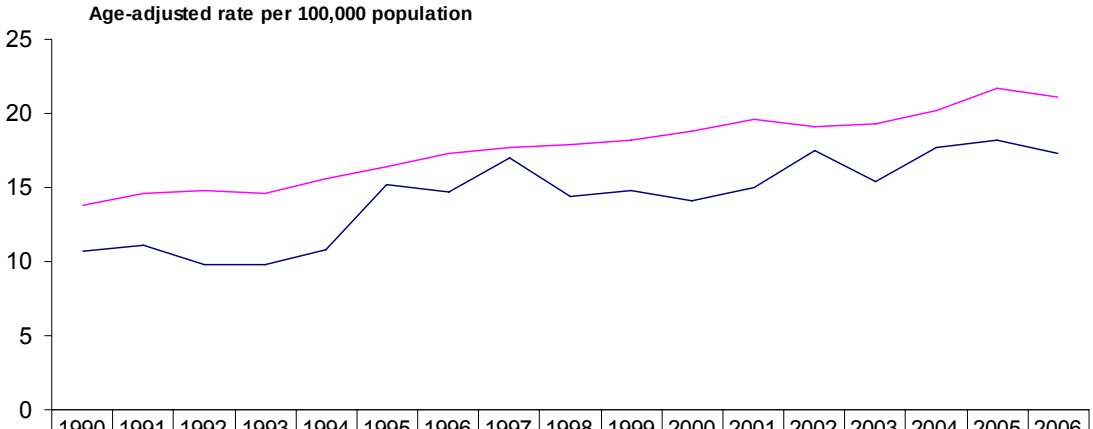
There are several different types of skin cancer, but melanomas are the most serious. Nationally, melanomas comprise only about 5% of all skin cancer diagnoses but about 75% of all skin cancer deaths. In Nebraska, melanomas of the skin accounted for more than 1,500 diagnoses and 200 deaths between 2002 and 2006. The incidence of melanoma continues to increase significantly in Nebraska and throughout the United States. Because most melanomas are discovered early in their development and can be surgically removed, the five-year survival rate is now over 90%.

Melanoma is related to exposure to ultraviolet radiation (most of which comes from the sun), particularly exposures during childhood that resulted in severe sunburns. The risk of developing melanoma is particularly high among people with light skin. Sun exposure is not the only risk factor, however: family history of melanoma and the presence of dysplastic nevi (large moles with irregular coloration and shape) also increase a person's risk of the disease.

Skin melanomas are among the most preventable and treatable of all cancers. Wearing protective clothing and using sunscreen are the best methods for preventing the disease, and children in particular should have such protection. In addition, early detection can greatly reduce the risk of melanoma mortality. Recognition of changes in skin growths or the appearance of new growths is the best way to find melanomas early in their development. The ACS suggests that adults practice skin self-examination regularly, and that suspicious lesions be evaluated promptly by a physician.

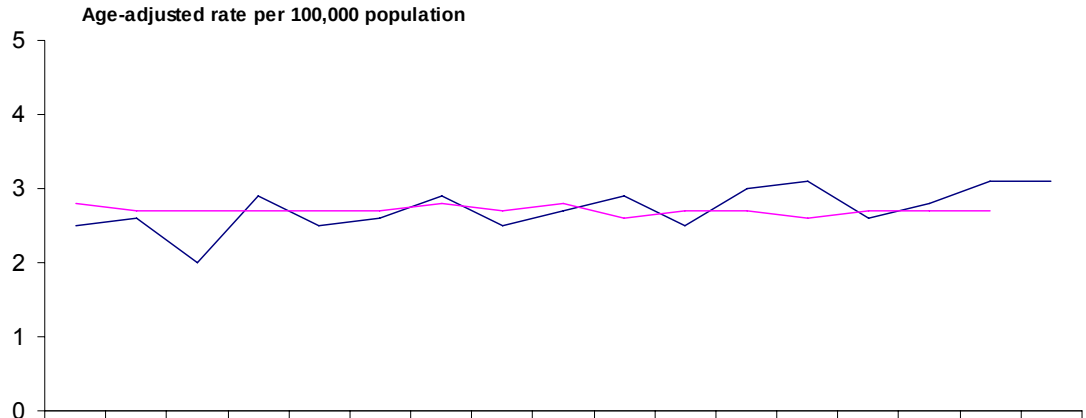
Melanoma of the skin incidence and mortality statistics by county of residence are presented in Appendix IX (Table 17).

Melanoma of the Skin
Incidence Rates, by Year
Nebraska and the United States (1990-2006)



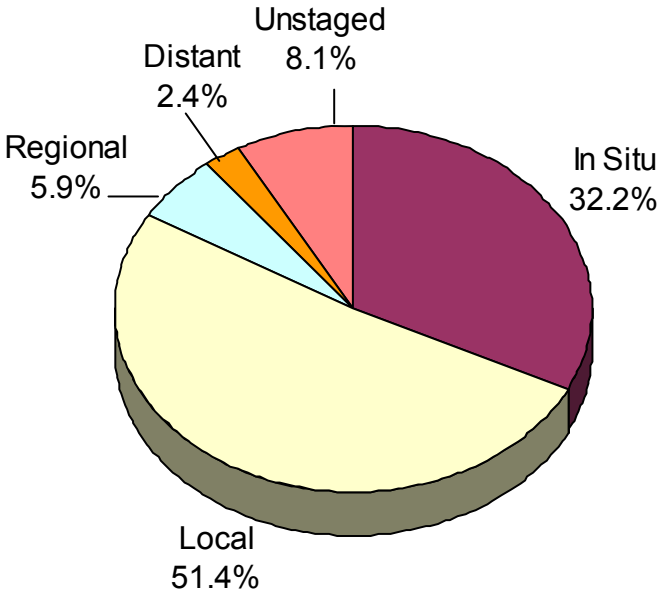
	1990	1991	1992	1993	1994	1995	1996	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006
Nebraska	10.7	11.1	9.8	9.8	10.8	15.2	14.7	17.0	14.4	14.8	14.1	15.0	17.5	15.4	17.7	18.2	17.3
United States	13.8	14.6	14.8	14.6	15.6	16.4	17.3	17.7	17.9	18.2	18.8	19.6	19.1	19.3	20.2	21.7	21.1

Melanoma of the Skin
Mortality Rates, by Year
Nebraska and the United States (1990-2006)



	1990	1991	1992	1993	1994	1995	1996	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006
Nebraska	2.5	2.6	2.0	2.9	2.5	2.6	2.9	2.5	2.7	2.9	2.5	3.0	3.1	2.6	2.8	3.1	3.1
United States	2.8	2.7	2.7	2.7	2.7	2.7	2.8	2.7	2.8	2.6	2.7	2.7	2.6	2.7	2.7	2.7	

Melanoma of the Skin
Percentage of Cases, by Stage of Disease at Diagnosis
Nebraska (2002-2006)



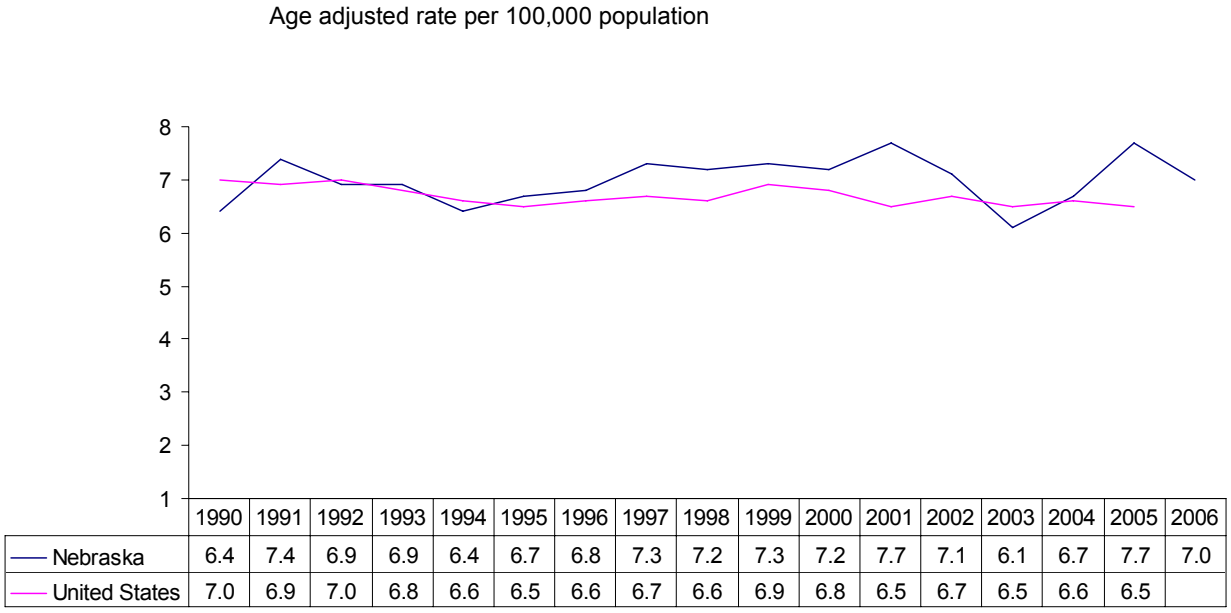
Brain and Other Nervous System

Between 2002 and 2006, cancers of the brain and nervous system accounted for 617 malignant cases and 437 deaths among Nebraska residents. The Nebraska Cancer Registry began collecting information on benign brain tumors in 2004, and has recorded 425 diagnoses of this type among Nebraska residents through the end of 2006. Brain tumors are one of the most common types of cancer among children, accounting for about one of every four diagnoses, although about 40% of all cases are diagnosed among people 65 and older. Survival prospects vary widely by type and location of the tumor: overall, 35% of people diagnosed with a malignant brain tumor remain alive at least five years after diagnosis, according to national statistics.

The causes of brain tumors are unknown, although some risk factors have been identified. Radiation is the best-known risk factor, and is usually the result of treatment for other types of cancer. Some rare inherited disorders also carry an increased risk of brain and nervous system cancers. In recent years, cell phone use has attracted much attention as a possible risk factor for brain tumors, even though cell phones do not emit the kind of radiation that is known to cause cancer. So far, research studies have not provided convincing evidence that cell phone use is a risk factor for brain tumors. However, because cell phones are such a new invention, the effects of long-term use are still unknown.

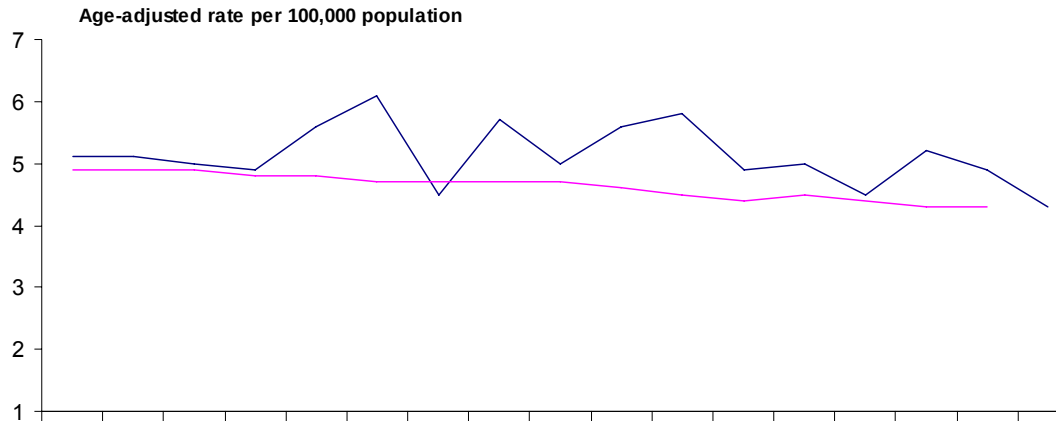
Brain and other nervous system cancer incidence and mortality statistics are presented in Appendix X (Table 18).

Brain and Other Nervous System Cancer Incidence Rates, by Year
Nebraska and the United States (1990-2006)



	1990	1991	1992	1993	1994	1995	1996	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006
Nebraska	6.4	7.4	6.9	6.9	6.4	6.7	6.8	7.3	7.2	7.3	7.2	7.7	7.1	6.1	6.7	7.7	7.0
United States	7.0	6.9	7.0	6.8	6.6	6.5	6.6	6.7	6.6	6.9	6.8	6.5	6.7	6.5	6.6	6.5	

Brain and Other Nervous System Cancer
Mortality Rates, by Year
Nebraska and the United States (1990-2006)



	1990	1991	1992	1993	1994	1995	1996	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006
Nebraska	5.1	5.1	5.0	4.9	5.6	6.1	4.5	5.7	5.0	5.6	5.8	4.9	5.0	4.5	5.2	4.9	4.3
United States	4.9	4.9	4.9	4.8	4.8	4.7	4.7	4.7	4.7	4.6	4.5	4.4	4.5	4.4	4.3	4.3	

Brain and Other Nervous System
Percentage of Cases, by Stage of Disease at Diagnosis
Nebraska (2002-2006)

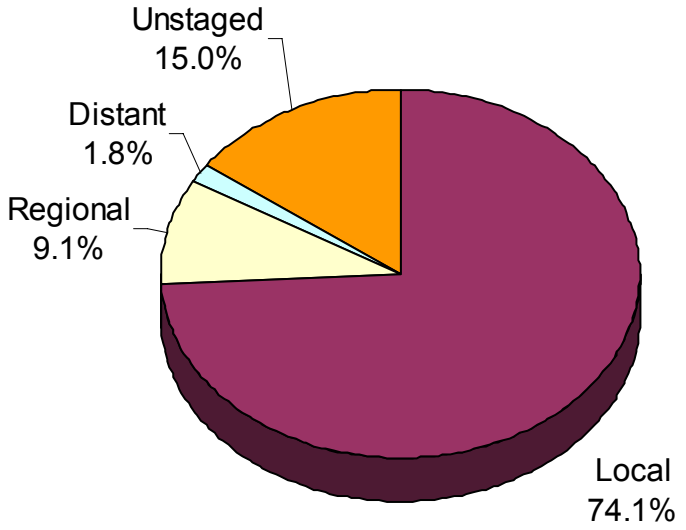


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TABLE 9: Cancer of the Lung and Bronchus Incidence and Mortality
Number of Cases, Deaths, and Rates, by County of Residence
Nebraska (2002-06) and US (2002-06 [incidence] & 2001-05 [mortality])

	Incidence		Mortality	
	# Cases	Rate	# Deaths	Rate
US	NA	62.2	NA	54.1
NEBRASKA	5891	64.4	4448	48.3
COUNTY				
ADAMS	138	73.5	98	51.9
ANTELOPE	24	44.9	18	33.4
ARTHUR	1	**	2	**
BANNER	3	**	1	**
BLAINE	0	---	1	**
BOONE	18	▼41.4	16	34.9
BOX BUTTE	37	54.9	34	50.0
BOYD	14	71.6	10	49.5
BROWN	16	56.3	17	57.6
BUFFALO	117	61.1	80	40.8
BURT	47	81.1	42	▲71.6
BUTLER	24	▼44.0	17	▼29.8
CASS	106	▲82.0	70	54.8
CEDAR	29	▼41.6	26	37.3
CHASE	18	66.0	13	43.3
CHERRY	21	51.2	15	36.2
CHEYENNE	31	50.6	25	39.3
CLAY	27	60.4	18	41.0
COLFAX	42	67.2	31	46.3
CUMING	34	47.4	26	36.3
CUSTER	46	57.0	32	39.3
DAKOTA	67	76.5	47	53.4
DAWES	19	▼39.5	20	39.3
DAWSON	62	▼48.8	51	40.3
DEUEL	14	85.3	10	62.2
DIXON	18	46.4	18	44.1
DODGE	152	66.9	120	51.3
DOUGLAS	1695	▲79.1	1234	▲57.7
DUNDY	10	53.9	8	47.3
FILLMORE	29	56.5	25	46.7
FRANKLIN	22	86.4	23	84.0
FRONTIER	8	39.1	5	**
FURNAS	18	43.1	10	▼21.6
GAGE	81	52.9	57	▼36.6
GARDEN	11	54.3	10	50.8
GARFIELD	8	50.4	3	**
GOSPER	7	41.9	5	**
GRANT	3	**	0	---
GREELEY	10	44.2	11	43.3
HALL	182	62.6	129	43.6
HAMILTON	23	▼42.1	19	34.9
HARLAN	15	48.3	16	49.0
HAYES	1	**	2	**
HITCHCOCK	16	63.4	9	38.6
HOLT	44	56.0	34	41.2
HOOKER	4	**	1	**
HOWARD	39	91.0	20	45.8

TABLE 9: Cancer of the Lung and Bronchus Incidence and Mortality (Continued)
Number of Cases, Deaths, and Rates, by County of Residence
Nebraska (2002-06) and US (2002-06 [incidence] & 2001-05 [mortality])

	Incidence		Mortality	
	# Cases	Rate	# Deaths	Rate
COUNTY				
JEFFERSON	32	51.2	19	▼27.5
JOHNSON	16	▼42.0	14	34.4
KEARNEY	17	▼40.7	21	49.0
KEITH	31	50.4	29	46.7
KEYA PAHA	0	---	0	---
KIMBALL	22	71.7	17	54.4
KNOX	43	55.9	31	39.8
LANCASTER	731	64.3	541	47.7
LINCOLN	145	71.0	117	57.0
LOGAN	4	**	2	**
LOUP	0	---	3	**
McPHERSON	1	**	0	---
MADISON	120	64.6	97	51.2
MERRICK	29	54.4	28	52.5
MORRILL	21	62.3	18	52.6
NANCE	13	49.5	14	48.3
NEMAHA	22	45.8	21	40.3
NUCKOLLS	20	51.9	15	37.1
OTOE	72	72.5	66	63.7
PAWNEE	8	▼28.0	5	**
PERKINS	10	45.7	9	42.8
PHELPS	24	▼36.2	23	34.2
PIERCE	24	53.9	22	52.4
PLATTE	100	61.3	73	44.1
POLK	17	42.7	16	39.3
RED WILLOW	52	68.5	41	54.1
RICHARDSON	41	65.7	29	49.0
ROCK	10	75.7	11	86.9
SALINE	49	59.5	37	44.0
SARPY	333	70.8	225	48.9
SAUNDERS	79	66.2	47	38.9
SCOTTS BLUFF	119	▼51.3	106	44.6
SEWARD	68	71.1	48	49.6
SHERIDAN	23	48.7	20	43.1
SHERMAN	14	50.6	14	49.7
SIOUX	4	**	0	---
STANTON	12	35.7	16	47.3
THAYER	23	47.2	17	33.6
THOMAS	3	**	0	---
THURSTON	17	49.0	25	72.2
VALLEY	19	54.0	12	34.2
WASHINGTON	57	53.9	50	46.6
WAYNE	23	47.0	20	40.8
WEBSTER	25	80.1	17	46.1
WHEELER	3	**	2	---
YORK	44	▼47.7	31	▼34.0

NA – not available
**Rate is not shown if based on five or fewer events
Rates are expressed per 100,000 population and are age-adjusted to the 2000 U.S. population

▼ county rate is significantly lower than the state rate
▲ county rate is significantly higher than the state rate

TABLE 10: Cancer of the Female Breast Incidence and Mortality
Number of Cases, Deaths, and Rates, by County of Residence
Nebraska (2002-06) and US (2002-06 [incidence] & 2001-05 [mortality])

	Incidence		Mortality	
	# Cases	Rate	# Deaths	Rate
US	NA	126.5	NA	25.0
NEBRASKA	6168	127.2	1214	23.0
COUNTY				
ADAMS	121	125.7	23	21.3
ANTELOPE	38	169.0	6	21.0
ARTHUR	2	**	1	**
BANNER	0	---	1	**
BLAINE	1	**	0	---
BOONE	23	108.3	2	**
BOX BUTTE	38	111.4	9	23.0
BOYD	16	156.4	4	**
BROWN	13	90.3	0	---
BUFFALO	140	131.4	32	28.5
BURT	31	103.0	10	29.1
BUTLER	28	96.8	5	**
CASS	82	116.8	10	13.4
CEDAR	33	113.9	6	12.3
CHASE	17	116.6	4	**
CHERRY	27	138.5	2	**
CHEYENNE	48	153.3	9	29.2
CLAY	20	▼79.2	5	**
COLFAX	42	127.8	13	27.5
CUMING	43	122.6	8	14.4
CUSTER	53	129.6	14	23.2
DAKOTA	51	102.6	12	23.6
DAWES	28	115.8	7	26.7
DAWSON	78	115.8	22	29.3
DEUEL	7	87.9	0	---
DIXON	35	167.9	5	**
DODGE	173	150.5	28	20.9
DOUGLAS	1500	122.7	308	24.5
DUNDY	12	130.4	2	**
FILLMORE	28	127.7	8	26.5
FRANKLIN	14	107.6	5	**
FRONTIER	15	165.2	4	**
FURNAS	16	▼82.0	1	**
GAGE	94	124.8	22	22.1
GARDEN	12	181.7	1	**
GARFIELD	11	152.0	1	**
GOSPER	8	127.7	0	---
GRANT	1	**	0	---
GREELEY	12	122.7	1	**
HALL	204	133.7	37	23.2
HAMILTON	29	103.6	10	31.6
HARLAN	16	101.2	6	35.4
HAYES	0	---	1	**
HITCHCOCK	13	91.6	3	**
HOLT	61	163.4	4	**
HOOKER	5	**	3	**
HOWARD	23	109.9	7	30.7

TABLE 10: Cancer of the Female Breast Incidence and Mortality (Continued)
Number of Cases, Deaths, and Rates, by County of Residence
Nebraska (2002-06) and US (2002-06 [incidence] & 2001-05 [mortality])

	Incidence		Mortality	
	# Cases	Rate	# Deaths	Rate
COUNTY				
JEFFERSON	37	122.3	8	23.7
JOHNSON	20	126.5	10	30.7
KEARNEY	27	125.6	5	**
KEITH	32	112.1	5	**
KEYA PAHA	1	**	1	**
KIMBALL	11	84.8	5	**
KNOX	30	▼89.7	7	24.1
LANCASTER	888	▲139.8	149	22.1
LINCOLN	132	125.0	30	27.0
LOGAN	1	**	2	**
LOUP	0	---	1	**
McPHERSON	3	**	0	---
MADISON	124	127.5	27	23.7
MERRICK	34	141.6	4	**
MORRILL	20	111.1	2	**
NANCE	21	167.6	5	**
NEMAHA	25	101.5	5	**
NUCKOLLS	32	160.4	7	23.1
OTOE	57	114.8	6	▼8.7
PAWNEE	13	83.1	2	**
PERKINS	17	152.5	5	**
PHELPS	53	162.6	11	30.9
PIERCE	25	108.6	9	37.4
PLATTE	108	125.4	29	33.3
POLK	27	140.3	3	**
RED WILLOW	43	113.5	12	35.0
RICHARDSON	57	171.8	11	29.1
ROCK	7	83.8	0	---
SALINE	59	146.0	5	**
SARPY	408	141.4	70	26.6
SAUNDERS	74	127.9	13	18.5
SCOTTS BLUFF	162	139.1	25	18.6
SEWARD	67	144.7	12	21.5
SHERIDAN	24	111.6	4	**
SHERMAN	13	97.3	2	**
SIOUX	4	**	3	**
STANTON	13	▼75.3	8	44.1
THAYER	18	85.6	5	**
THOMAS	3	**	0	---
THURSTON	15	83.2	4	**
VALLEY	17	96.6	4	**
WASHINGTON	64	116.8	15	25.0
WAYNE	25	106.3	2	**
WEBSTER	18	125.2	2	**
WHEELER	4	**	3	**
YORK	72	148.1	14	23.9

NA – not available
**Rate is not shown if based on five or fewer events
Rates are expressed per 100,000 female population and are age-adjusted to the 2000 U.S. population

▼ county rate is significantly lower than the state rate
▲ county rate is significantly higher than the state rate

TABLE 11: Cancer of the Colon and Rectum (Colorectal) Incidence and Mortality Number of Cases, Deaths, and Rates, by County of Residence

Nebraska (2002-06) and US (2002-06 [incidence] & 2001-05 [mortality])

	Incidence		Mortality	
	# Cases	Rate	# Deaths	Rate
US	NA	48.8	NA	18.8
NEBRASKA	5293	56.7	1872	19.4
COUNTY				
ADAMS	104	52.8	41	19.5
ANTELOPE	33	67.5	9	17.9
ARTHUR	2	**	2	**
BANNER	3	**	0	---
BLAINE	2	**	1	**
BOONE	31	67.5	14	28.7
BOX BUTTE	33	50.1	15	21.4
BOYD	14	71.8	4	**
BROWN	16	55.6	4	**
BUFFALO	120	60.9	33	16.2
BURT	45	71.7	14	22.5
BUTLER	40	67.1	16	26.7
CASS	80	61.0	27	20.5
CEDAR	31	47.1	9	12.2
CHASE	10	▼32.6	5	**
CHERRY	15	41.5	11	26.0
CHEYENNE	34	55.6	9	13.8
CLAY	31	63.1	9	18.9
COLFAX	46	70.5	15	23.5
CUMING	43	56.4	12	13.9
CUSTER	48	54.8	22	25.8
DAKOTA	41	45.6	13	14.9
DAWES	29	60.6	12	21.6
DAWSON	60	46.3	17	▼12.1
DEUEL	7	39.7	4	**
DIXON	15	▼36.6	8	18.3
DODGE	173	▲73.7	56	21.4
DOUGLAS	1223	56.2	436	20.1
DUNDY	6	38.5	3	**
FILLMORE	30	57.1	8	14.3
FRANKLIN	13	44.3	10	32.3
FRONTIER	8	42.7	5	**
FURNAS	25	58.3	8	19.1
GAGE	98	61.6	29	16.2
GARDEN	6	▼21.4	6	26.7
GARFIELD	10	46.3	9	39.3
GOSPER	7	46.2	2	**
GRANT	3	**	1	**
GREELEY	12	54.0	2	**
HALL	172	57.6	53	17.1
HAMILTON	27	47.2	6	10.7
HARLAN	27	87.3	7	24.3
HAYES	1	**	0	---
HITCHCOCK	7	▼27.9	4	**
HOLT	56	68.2	13	16.3
HOOKER	2	**	0	---
HOWARD	26	58.6	2	**

TABLE 11: Cancer of the Colon and Rectum (Colorectal) Incidence and Mortality (Continued)

Numbers of Cases, Deaths, and Rates, by County of Residence

Nebraska (2002-06) and US (2002-06 [incidence] & 2001-05 [mortality])

	Incidence		Mortality	
	# Cases	Rate	# Deaths	Rate
COUNTY				
JEFFERSON	32	45.3	16	22.7
JOHNSON	22	63.4	9	19.6
KEARNEY	20	47.8	10	23.0
KEITH	40	67.7	15	26.7
KEYA PAHA	1	**	1	**
KIMBALL	16	53.7	12	34.5
KNOX	38	49.4	23	29.0
LANCASTER	622	54.5	221	19.0
LINCOLN	100	47.3	37	16.5
LOGAN	0	---	0	---
LOUP	2	**	2	**
McPHERSON	2	**	0	---
MADISON	129	67.4	38	17.8
MERRICK	25	46.4	13	21.0
MORRILL	13	▼35.7	7	19.6
NANCE	18	65.2	11	36.9
NEMAHA	27	50.4	12	23.1
NUCKOLLS	30	73.7	7	14.3
OTOE	69	68.4	26	23.3
PAWNEE	12	58.5	5	**
PERKINS	17	76.5	5	**
PHELPS	29	43.2	13	17.3
PIERCE	33	68.6	14	29.1
PLATTE	104	63.5	43	25.8
POLK	33	84.1	11	27.8
RED WILLOW	51	64.7	15	17.5
RICHARDSON	49	65.5	20	23.3
ROCK	10	88.9	3	**
SALINE	60	70.1	24	26.0
SARPY	277	63.0	73	17.4
SAUNDERS	67	54.7	23	18.5
SCOTTS BLUFF	104	▼44.9	46	18.9
SEWARD	56	57.4	24	22.2
SHERIDAN	24	52.6	7	13.4
SHERMAN	25	▲103.2	7	26.5
SIOUX	1	**	1	**
STANTON	16	45.8	5	**
THAYER	33	62.6	6	10.9
THOMAS	2	**	0	---
THURSTON	28	84.3	9	26.0
VALLEY	17	49.7	4	**
WASHINGTON	62	59.4	21	19.9
WAYNE	30	60.3	13	21.7
WEBSTER	29	▲93.3	9	27.6
WHEELER	2	**	2	**
YORK	50	51.7	23	22.7

NA – not available
**Rate is not shown if based on five or fewer events
Rates are expressed per 100,000 population and are age-adjusted to the 2000 U.S. population

▼ county rate is significantly lower than the state rate
▲ county rate is significantly higher than the state rate

TABLE 12: Cancer of the Prostate Incidence and Mortality
Number of Cases, Deaths, and Rates, by County of Residence
Nebraska (2002-06) and US (2002-06 [incidence] & 2001-05 [mortality])

	Incidence		Mortality	
	# Cases	Rate	# Deaths	Rate
US	NA	164.9	NA	26.7
NEBRASKA	6436	158.1	926	24.5
COUNTY				
ADAMS	120	144.7	17	20.4
ANTELOPE	33	141.7	7	28.1
ARTHUR	1	**	0	---
BANNER	7	271.3	0	---
BLAINE	2	**	0	---
BOONE	45	▲231.6	9	36.6
BOX BUTTE	49	167.1	3	**
BOYD	26	▲308.7	1	**
BROWN	24	201.9	4	**
BUFFALO	153	176.3	23	29.3
BURT	40	155.0	9	32.4
BUTLER	48	175.6	6	21.1
CASS	78	127.5	9	19.0
CEDAR	47	159.3	11	36.7
CHASE	20	154.7	0	---
CHERRY	34	183.0	2	**
CHEYENNE	32	119.6	5	**
CLAY	47	219.4	6	27.0
COLFAX	68	▲244.9	2	**
CUMING	43	130.3	8	20.8
CUSTER	58	154.1	7	17.8
DAKOTA	49	▼115.6	9	24.8
DAWES	31	141.3	9	42.0
DAWSON	64	▼110.7	16	29.1
DEUEL	17	230.3	4	**
DIXON	15	▼84.9	4	**
DODGE	265	▲266.4	20	20.6
DOUGLAS	1431	152.4	204	25.8
DUNDY	13	161.9	4	**
FILLMORE	27	131.5	5	**
FRANKLIN	24	194.4	0	---
FRONTIER	14	148.4	2	**
FURNAS	30	180.9	7	37.8
GAGE	84	▼125.4	19	26.6
GARDEN	16	189.4	3	**
GARFIELD	13	178.5	4	**
GOSPER	9	115.7	1	**
GRANT	3	**	0	---
GREELEY	21	212.0	7	64.8
HALL	253	▲188.7	25	20.4
HAMILTON	36	142.0	5	**
HARLAN	29	193.5	5	**
HAYES	4	**	0	---
HITCHCOCK	19	170.3	2	**
HOLT	84	▲236.4	6	16.0
HOOKER	6	231.2	0	---
HOWARD	48	▲238.2	3	**

TABLE 12: Cancer of the Prostate Incidence and Mortality (Continued)
Number of Cases, Deaths, and Rates, by County of Residence
Nebraska (2002-06) and US (2002-06 [incidence] & 2001-05 [mortality])

	Incidence		Mortality	
	# Cases	Rate	# Deaths	Rate
COUNTY				
JEFFERSON	32	▼107.9	8	24.7
JOHNSON	21	129.4	3	**
KEARNEY	22	118.4	6	35.7
KEITH	39	135.9	8	32.0
KEYA PAHA	6	166.0	1	**
KIMBALL	25	183.3	6	45.3
KNOX	61	188.5	13	37.1
LANCASTER	724	▼143.0	94	23.5
LINCOLN	114	▼122.7	26	30.4
LOGAN	2	**	1	**
LOUP	2	**	0	---
McPHERSON	3	**	0	---
MADISON	158	189.7	11	▼13.1
MERRICK	46	186.9	7	29.4
MORRILL	34	218.2	3	**
NANCE	18	136.5	2	**
NEMAHA	21	▼102.4	3	**
NUCKOLLS	26	135.5	5	**
OTOE	61	134.4	15	30.7
PAWNEE	10	▼81.8	5	**
PERKINS	15	161.4	4	**
PHELPS	46	157.8	16	▲52.7
PIERCE	44	207.9	7	31.8
PLATTE	138	188.5	16	24.8
POLK	27	147.2	3	**
RED WILLOW	42	122.6	6	16.7
RICHARDSON	45	149.8	12	37.1
ROCK	10	174.0	2	**
SALINE	45	124.5	12	30.7
SARPY	333	160.7	34	26.0
SAUNDERS	98	180.5	11	22.4
SCOTTS BLUFF	208	▲205.7	25	25.0
SEWARD	42	▼98.8	9	19.9
SHERIDAN	32	158.6	9	40.0
SHERMAN	21	180.8	1	**
SIOUX	5	**	0	---
STANTON	18	125.0	4	**
THAYER	28	120.6	8	28.2
THOMAS	1	**	0	---
THURSTON	18	114.3	3	**
VALLEY	29	178.0	6	30.9
WASHINGTON	71	146.0	15	37.0
WAYNE	29	136.4	1	**
WEBSTER	22	143.6	2	**
WHEELER	6	201.1	1	**
YORK	58	143.7	9	20.9

NA – not available
**Rate is not shown if based on five or fewer events
Rates are expressed per 100,000 male population and are age-adjusted to the 2000 U.S. population

▼ county rate is significantly lower than the state rate
▲ county rate is significantly higher than the state rate

TABLE 13: Cancer of the Urinary Bladder Incidence and Mortality Numbers of Cases, Deaths, and Rates, by County of Residence

Nebraska (2002-06) and US (2002-06 [incidence] & 2001-05 [mortality])

	Incidence		Mortality	
	# Cases	Rate	# Deaths	Rate
US	NA	21.1	NA	4.3
NEBRASKA	1984	21.3	376	3.8
COUNTY				
ADAMS	38	18.5	14	6.4
ANTELOPE	13	25.8	0	---
ARTHUR	0	---	0	---
BANNER	1	**	0	---
BLAINE	2	**	0	---
BOONE	11	23.6	1	**
BOX BUTTE	8	▼10.9	4	**
BOYD	1	**	0	---
BROWN	5	**	0	---
BUFFALO	40	19.3	6	2.6
BURT	8	12.6	0	---
BUTLER	13	21.8	2	**
CASS	25	19.6	7	5.8
CEDAR	15	22.3	1	**
CHASE	6	20.6	1	**
CHERRY	16	38.6	4	**
CHEYENNE	20	30.4	3	**
CLAY	7	13.7	3	**
COLFAX	18	26.1	2	**
CUMING	14	15.7	2	**
CUSTER	24	28.5	3	**
DAKOTA	13	15.1	3	**
DAWES	9	19.3	2	**
DAWSON	33	26.1	2	**
DEUEL	4	**	2	**
DIXON	5	**	1	**
DODGE	54	23.4	10	4.0
DOUGLAS	497	23.0	105	4.9
DUNDY	6	27.2	2	**
FILLMORE	6	▼10.1	2	**
FRANKLIN	7	23.2	0	---
FRONTIER	6	29.1	0	---
FURNAS	14	34.0	3	**
GAGE	28	17.3	7	3.8
GARDEN	4	**	0	---
GARFIELD	6	34.6	0	---
GOSPER	1	**	0	---
GRANT	2	**	0	---
GREELEY	1	**	1	**
HALL	71	23.4	21	7.0
HAMILTON	4	**	3	**
HARLAN	4	**	1	**
HAYES	1	**	0	---
HITCHCOCK	8	32.5	3	**
HOLT	21	24.4	2	**
HOOKER	0	---	0	---
HOWARD	11	25.6	2	**

TABLE 13: Cancer of the Urinary Bladder Incidence and Mortality (Continued)
Number of Cases, Deaths, and Rates, by County of Residence
Nebraska (2002-06) and US (2002-06 [incidence] & 2001-05 [mortality])

	Incidence		Mortality	
	# Cases	Rate	# Deaths	Rate
COUNTY				
JEFFERSON	12	18.9	2	**
JOHNSON	6	16.4	2	**
KEARNEY	10	22.8	1	**
KEITH	17	28.4	5	**
KEYA PAHA	2	**	0	---
KIMBALL	11	34.9	4	**
KNOX	11	14.0	4	**
LANCASTER	228	20.1	38	3.3
LINCOLN	46	21.8	8	3.5
LOGAN	1	**	0	---
LOUP	1	**	0	---
McPHERSON	2	**	1	**
MADISON	33	16.5	6	2.5
MERRICK	10	17.8	3	**
MORRILL	12	34.6	2	**
NANCE	5	**	1	**
NEMAHA	8	16.2	0	---
NUCKOLLS	12	27.3	2	**
OTOE	15	13.8	1	**
PAWNEE	3	**	1	**
PERKINS	5	**	2	**
PHELPS	14	19.8	2	**
PIERCE	10	21.8	2	**
PLATTE	41	25.2	3	**
POLK	10	24.5	3	**
RED WILLOW	21	25.3	2	**
RICHARDSON	15	21.8	2	**
ROCK	4	**	0	---
SALINE	16	18.4	4	**
SARPY	105	22.9	15	4.0
SAUNDERS	16	▼13.1	6	4.6
SCOTTS BLUFF	53	22.8	9	3.9
SEWARD	26	26.9	6	5.5
SHERIDAN	7	14.3	1	**
SHERMAN	4	**	0	---
SIOUX	0	---	0	---
STANTON	6	17.0	0	---
THAYER	8	15.9	1	**
THOMAS	1	**	0	---
THURSTON	8	22.4	2	**
VALLEY	7	15.2	1	**
WASHINGTON	25	23.7	2	**
WAYNE	8	15.7	0	---
WEBSTER	8	22.5	1	**
WHEELER	1	**	0	---
YORK	19	19.1	6	5.3

NA – not available
**Rate is not shown if based on five or fewer events
Rates are expressed per 100,000 population and are age-adjusted to the 2000 U.S. population

▼ county rate is significantly lower than the state rate
▲ county rate is significantly higher than the state rate

TABLE 14: Non-Hodgkin Lymphoma Incidence and Mortality
Number of Cases, Deaths, and Rates, by County of Residence
Nebraska (2002-06) and US (2002-06 [incidence] & 2001-05 [mortality])

	Incidence		Mortality	
	# Cases	Rate	# Deaths	Rate
US	NA	20.2	NA	7.3
NEBRASKA	1921	20.9	707	7.4
COUNTY				
ADAMS	47	24.1	12	6.0
ANTELOPE	12	24.7	9	15.0
ARTHUR	1	**	0	---
BANNER	0	---	0	---
BLAINE	0	---	0	---
BOONE	8	22.1	3	**
BOX BUTTE	13	19.5	9	12.4
BOYD	1	**	4	**
BROWN	1	**	3	**
BUFFALO	42	21.0	14	6.7
BURT	8	15.7	7	11.2
BUTLER	9	15.5	5	**
CASS	28	21.4	10	7.5
CEDAR	10	13.6	7	11.3
CHASE	9	30.2	2	**
CHERRY	6	15.8	1	**
CHEYENNE	12	17.9	2	**
CLAY	10	23.8	1	**
COLFAX	9	15.8	5	**
CUMING	16	22.8	5	**
CUSTER	14	16.6	4	**
DAKOTA	19	21.6	7	7.9
DAWES	12	27.9	5	**
DAWSON	23	18.2	13	10.5
DEUEL	3	**	3	**
DIXON	8	20.7	3	**
DODGE	67	▲29.7	28	11.0
DOUGLAS	479	21.7	144	6.7
DUNDY	6	32.3	3	**
FILLMORE	15	24.8	6	10.5
FRANKLIN	2	**	1	**
FRONTIER	2	**	0	---
FURNAS	10	31.3	3	**
GAGE	30	18.4	19	10.7
GARDEN	2	**	0	---
GARFIELD	3	**	1	**
GOSPER	4	**	0	---
GRANT	1	**	0	---
GREELEY	1	**	0	---
HALL	61	21.0	24	7.7
HAMILTON	18	33.8	6	10.2
HARLAN	4	**	4	**
HAYES	0	---	1	**
HITCHCOCK	6	23.3	1	**
HOLT	12	14.5	4	**
HOOKER	0	---	0	---
HOWARD	7	16.3	3	**

TABLE 14: Non-Hodgkin Lymphoma Incidence and Mortality (Continued)
Number of Cases, Deaths, and Rates, by County of Residence
Nebraska (2002-06) and US (2002-06 [incidence] & 2001-05 [mortality])

	Incidence		Mortality	
	# Cases	Rate	# Deaths	Rate
COUNTY				
JEFFERSON	11	19.6	7	12.5
JOHNSON	11	33.0	7	21.3
KEARNEY	7	15.8	3	**
KEITH	13	21.8	4	**
KEYA PAHA	0	---	1	**
KIMBALL	4	**	0	---
KNOX	14	18.1	3	**
LANCASTER	256	21.9	94	8.2
LINCOLN	52	25.8	16	7.4
LOGAN	1	**	0	---
LOUP	1	**	0	---
McPHERSON	0	---	0	---
MADISON	34	16.3	9	4.4
MERRICK	12	22.2	7	11.8
MORRILL	5	**	2	**
NANCE	5	**	3	**
NEMAHA	8	16.1	6	11.2
NUCKOLLS	9	20.2	3	**
OTOE	18	17.6	6	6.2
PAWNEE	5	**	4	**
PERKINS	5	**	3	**
PHELPS	9	13.7	8	10.6
PIERCE	13	29.1	3	**
PLATTE	27	17.1	14	8.3
POLK	4	**	4	**
RED WILLOW	25	30.9	13	14.4
RICHARDSON	11	18.4	2	**
ROCK	3	**	1	**
SALINE	17	20.3	3	**
SARPY	104	21.7	26	5.9
SAUNDERS	28	23.8	10	8.2
SCOTTS BLUFF	47	20.9	19	8.2
SEWARD	27	28.5	10	8.6
SHERIDAN	4	**	3	**
SHERMAN	2	**	1	**
SIOUX	0	---	0	---
STANTON	2	**	2	**
THAYER	4	**	2	**
THOMAS	1	**	0	---
THURSTON	5	**	0	---
VALLEY	5	**	1	**
WASHINGTON	28	26.7	8	7.7
WAYNE	7	15.0	4	**
WEBSTER	8	27.0	4	**
WHEELER	2	**	0	---
YORK	16	17.8	9	9.1

NA – not available
**Rate is not shown if based on five or fewer events
Rates are expressed per 100,000 population and are age-adjusted to the 2000 U.S. population

▼ county rate is significantly lower than the state rate
▲ county rate is significantly higher than the state rate

TABLE 15: Leukemia Incidence and Mortality
Number of Cases, Deaths, and Rates, by County of Residence
Nebraska (2002-06) and US (2002-06 [incidence] & 2001-05 [mortality])

	Incidence		Mortality	
	# Cases	Rate	# Deaths	Rate
US	NA	12.6	NA	7.4
NEBRASKA	1325	14.4	706	7.4
COUNTY				
ADAMS	27	14.9	15	7.3
ANTELOPE	7	12.8	2	**
ARTHUR	0	---	0	---
BANNER	0	---	0	---
BLAINE	0	---	0	---
BOONE	5	**	5	**
BOX BUTTE	8	11.4	5	**
BOYD	6	27.4	0	--
BROWN	4	**	1	**
BUFFALO	28	14.0	22	10.7
BURT	10	18.9	4	**
BUTLER	5	**	6	9.8
CASS	21	16.3	8	6.1
CEDAR	8	13.3	3	**
CHASE	1	**	1	**
CHERRY	10	27.8	3	**
CHEYENNE	7	11.1	4	**
CLAY	3	**	2	**
COLFAX	16	25.3	4	**
CUMING	10	15.1	5	**
CUSTER	9	11.1	6	7.2
DAKOTA	19	19.9	10	10.6
DAWES	7	12.4	6	11.0
DAWSON	16	12.3	12	9.9
DEUEL	0	---	0	---
DIXON	10	24.7	5	**
DODGE	31	13.8	10	▼3.7
DOUGLAS	324	14.5	164	7.6
DUNDY	3	**	3	**
FILLMORE	5	**	3	**
FRANKLIN	7	23.9	5	**
FRONTIER	4	**	1	**
FURNAS	4	**	4	**
GAGE	15	10.1	7	▼3.5
GARDEN	3	**	1	**
GARFIELD	1	**	2	**
GOSPER	1	**	0	---
GRANT	2	**	0	---
GREELEY	5	**	2	**
HALL	55	18.5	28	8.8
HAMILTON	8	14.0	7	11.4
HARLAN	5	**	1	**
HAYES	0	---	0	---
HITCHCOCK	6	27.6	2	**
HOLT	11	18.6	2	**
HOOKER	0	---	0	---
HOWARD	16	▲35.6	12	▲25.5

TABLE 15: Leukemia Incidence and Mortality (Continued)
Number of Cases, Deaths, and Rates, by County of Residence
Nebraska (2002-06) and US (2002-06 [incidence] & 2001-05 [mortality])

	Incidence		Mortality	
	# Cases	Rate	# Deaths	Rate
COUNTY				
JEFFERSON	8	13.2	4	**
JOHNSON	7	14.5	5	**
KEARNEY	7	17.0	5	**
KEITH	9	15.6	6	9.4
KEYA PAHA	1	**	0	---
KIMBALL	5	**	4	**
KNOX	9	10.8	8	8.4
LANCASTER	158	13.4	89	7.8
LINCOLN	33	16.0	15	7.1
LOGAN	0	---	0	---
LOUP	2	**	1	**
McPHERSON	0	---	0	---
MADISON	33	16.6	13	6.0
MERRICK	4	**	4	**
MORRILL	9	30.8	4	**
NANCE	4	**	3	**
NEMAHA	1	**	4	**
NUCKOLLS	7	16.8	1	**
OTOE	20	18.3	10	8.5
PAWNEE	1	**	0	---
PERKINS	2	**	0	---
PHELPS	12	21.1	6	9.4
PIERCE	5	**	3	**
PLATTE	16	10.1	7	**
POLK	5	**	1	**
RED WILLOW	10	13.7	11	13.7
RICHARDSON	13	19.6	8	9.2
ROCK	0	---	1	**
SALINE	11	12.6	4	**
SARPY	71	14.4	31	6.8
SAUNDERS	24	19.9	14	11.8
SCOTTS BLUFF	20	▼9.2	19	7.7
SEWARD	12	12.4	8	6.6
SHERIDAN	4	**	4	**
SHERMAN	2	**	3	**
SIOUX	0	---	1	**
STANTON	4	**	1	**
THAYER	11	22.7	4	**
THOMAS	2	**	0	---
THURSTON	4	**	3	**
VALLEY	5	**	2	**
WASHINGTON	13	12.2	6	5.9
WAYNE	4	**	0	---
WEBSTER	3	**	3	**
WHEELER	1	**	1	**
YORK	9	9.1	6	5.7

NA – not available
**Rate is not shown if based on five or fewer events
Rates are expressed per 100,000 population and are age-adjusted to the 2000 U.S. population

▼ county rate is significantly lower than the state rate
▲ county rate is significantly higher than the state rate

TABLE 16: Cancer of the Kidney and Renal Pelvis Incidence and Mortality
Number of Cases, Deaths, and Rates, by County of Residence

Nebraska (2002-06) and US (2002-06 [incidence] & 2001-05 [mortality])

	Incidence		Mortality	
	# Cases	Rate	# Deaths	Rate
US	NA	13.4	NA	4.2
NEBRASKA	1330	14.6	457	4.9
COUNTY				
ADAMS	24	12.0	12	6.3
ANTELOPE	2	**	1	**
ARTHUR	0	---	0	---
BANNER	0	---	0	---
BLAINE	0	---	0	---
BOONE	6	16.4	1	**
BOX BUTTE	8	12.8	3	**
BOYD	4	**	0	---
BROWN	3	**	0	---
BUFFALO	30	15.2	9	4.6
BURT	3	**	1	**
BUTLER	10	17.1	3	**
CASS	19	14.6	8	6.3
CEDAR	11	15.3	2	**
CHASE	2	**	2	**
CHERRY	5	**	1	**
CHEYENNE	4	**	0	---
CLAY	4	**	1	**
COLFAX	11	20.4	4	**
CUMING	6	10.8	5	**
CUSTER	6	▼6.7	4	**
DAKOTA	13	14.6	6	6.9
DAWES	4	**	1	**
DAWSON	17	13.4	8	6.2
DEUEL	3	**	0	---
DIXON	5	**	3	**
DODGE	32	15.4	11	4.0
DOUGLAS	365	16.2	107	4.9
DUNDY	3	**	2	**
FILLMORE	7	14.8	3	**
FRANKLIN	2	**	0	---
FRONTIER	2	**	1	**
FURNAS	2	**	2	**
GAGE	24	16.0	13	7.9
GARDEN	1	**	1	**
GARFIELD	1	**	0	---
GOSPER	0	---	0	---
GRANT	1	**	0	---
GREELEY	2	**	1	**
HALL	48	16.4	14	4.5
HAMILTON	6	10.9	2	**
HARLAN	3	**	1	**
HAYES	3	**	2	**
HITCHCOCK	9	▲44.9	2	**
HOLT	11	16.0	8	9.8
HOOKER	0	---	0	---
HOWARD	8	19.8	3	**

TABLE 16: Cancer of the Kidney and Renal Pelvis Incidence and Mortality (Continued)
Number of Cases, Deaths, and Rates, by County of Residence
Nebraska (2002-06) and US (2002-06 [incidence] & 2001-05 [mortality])

	Incidence		Mortality	
	# Cases	Rate	# Deaths	Rate
COUNTY				
JEFFERSON	3	**	5	**
JOHNSON	3	**	0	---
KEARNEY	6	12.7	4	**
KEITH	7	12.8	2	**
KEYA PAHA	2	**	1	**
KIMBALL	4	**	4	**
KNOX	13	21.9	5	**
LANCASTER	170	14.5	49	4.2
LINCOLN	33	16.6	10	4.7
LOGAN	0	---	1	**
LOUP	0	---	0	---
McPHERSON	1	**	0	---
MADISON	23	11.7	10	4.6
MERRICK	4	**	2	**
MORRILL	13	▲42.0	3	**
NANCE	5	**	1	**
NEMAHA	2	**	0	---
NUCKOLLS	4	**	4	**
OTOE	8	8.3	3	**
PAWNEE	4	**	1	**
PERKINS	2	**	2	**
PHELPS	5	**	3	**
PIERCE	4	**	1	**
PLATTE	24	14.4	5	**
POLK	10	26.3	5	**
RED WILLOW	10	13.8	2	**
RICHARDSON	4	**	5	**
ROCK	1	**	0	---
SALINE	10	13.3	9	10.5
SARPY	85	16.8	21	4.4
SAUNDERS	12	10.6	4	**
SCOTTS BLUFF	45	20.7	15	6.3
SEWARD	17	19.3	9	9.8
SHERIDAN	8	23.4	2	**
SHERMAN	3	**	1	**
SIOUX	1	**	0	---
STANTON	2	**	0	---
THAYER	3	**	1	**
THOMAS	1	**	0	---
THURSTON	9	27.5	6	18.0
VALLEY	2	**	2	**
WASHINGTON	16	15.3	5	**
WAYNE	8	17.7	2	**
WEBSTER	3	**	1	**
WHEELER	0	---	1	**
YORK	9	11.5	2	**

NA – not available
**Rate is not shown if based on five or fewer events
Rates are expressed per 100,000 population and are age-adjusted to the 2000 U.S. population

▼ county rate is significantly lower than the state rate
▲ county rate is significantly higher than the state rate

TABLE 17: Melanoma of the Skin Incidence and Mortality
Number of Cases, Deaths, and Rates, by County of Residence
Nebraska (2002-06) and US (2002-06 [incidence] & 2001-05 [mortality])

	Incidence		Mortality	
	# Cases	Rate	# Deaths	Rate
US	NA	20.3	NA	2.7
NEBRASKA	1542	17.3	270	2.9
COUNTY				
ADAMS	38	21.9	12	7.0
ANTELOPE	5	**	1	**
ARTHUR	1	**	0	---
BANNER	0	---	0	---
BLAINE	0	---	0	---
BOONE	5	**	1	**
BOX BUTTE	7	12.2	3	**
BOYD	1	**	0	---
BROWN	3	**	0	---
BUFFALO	31	15.8	9	4.8
BURT	14	26.7	0	---
BUTLER	12	22.0	1	**
CASS	28	21.9	4	**
CEDAR	10	16.8	1	**
CHASE	4	**	1	**
CHERRY	1	**	1	**
CHEYENNE	7	13.6	1	**
CLAY	4	**	1	**
COLFAX	9	15.1	4	**
CUMING	6	10.6	3	**
CUSTER	11	14.9	2	**
DAKOTA	16	17.8	1	**
DAWES	7	17.6	0	---
DAWSON	13	▼9.8	3	**
DEUEL	2	**	0	---
DIXON	10	26.1	2	**
DODGE	32	16.2	9	4.2
DOUGLAS	370	16.3	67	3.0
DUNDY	1	**	0	---
FILLMORE	8	22.4	2	**
FRANKLIN	1	**	0	---
FRONTIER	1	**	0	---
FURNAS	8	22.8	0	---
GAGE	21	14.9	6	3.3
GARDEN	3	**	0	---
GARFIELD	6	61.7	0	---
GOSPER	1	**	0	---
GRANT	2	**	0	---
GREELEY	3	**	0	---
HALL	37	12.7	7	2.3
HAMILTON	6	11.0	2	**
HARLAN	3	**	0	---
HAYES	0	---	0	---
HITCHCOCK	5	**	1	**
HOLT	14	20.3	2	**
HOOKER	0	---	0	---
HOWARD	4	**	0	---

TABLE 17: Melanoma of the Skin Incidence and Mortality (Continued)
Number of Cases, Deaths, and Rates, by County of Residence
Nebraska (2002-06) and US (2002-06 [incidence] & 2001-05 [mortality])

	Incidence		Mortality	
	# Cases	Rate	# Deaths	Rate
COUNTY				
JEFFERSON	12	23.7	3	**
JOHNSON	3	**	0	---
KEARNEY	3	**	2	**
KEITH	7	12.8	2	**
KEYA PAHA	0	---	0	---
KIMBALL	7	29.0	0	---
KNOX	5	**	0	---
LANCASTER	263	▲21.4	44	3.7
LINCOLN	34	17.5	5	**
LOGAN	0	---	0	---
LOUP	0	---	1	**
McPHERSON	1	**	0	---
MADISON	28	15.1	3	**
MERRICK	7	16.9	0	---
MORRILL	5	**	1	**
NANCE	4	**	0	---
NEMAHA	9	21.8	2	**
NUCKOLLS	5	**	0	---
OTOE	9	10.3	3	**
PAWNEE	4	**	2	**
PERKINS	4	**	1	**
PHELPS	11	18.5	5	**
PIERCE	10	23.7	1	**
PLATTE	16	▼9.6	3	**
POLK	9	27.8	2	**
RED WILLOW	11	16.6	2	**
RICHARDSON	8	▼8.9	4	**
ROCK	0	---	0	---
SALINE	20	28.7	5	**
SARPY	115	19.8	10	2.1
SAUNDERS	19	16.3	4	**
SCOTTS BLUFF	57	▲26.2	5	**
SEWARD	13	16.0	5	**
SHERIDAN	8	19.0	1	**
SHERMAN	4	**	0	---
SIOUX	0	---	0	---
STANTON	6	18.9	0	---
THAYER	12	33.0	3	**
THOMAS	0	---	0	---
THURSTON	5	**	0	---
VALLEY	2	**	1	**
WASHINGTON	15	14.9	1	**
WAYNE	6	14.2	0	---
WEBSTER	5	**	1	**
WHEELER	0	---	0	---
YORK	9	▼9.9	1	**

NA – not available
**Rate is not shown if based on five or fewer events
Rates are expressed per 100,000 population and are age-adjusted to the 2000 U.S. population

▼ county rate is significantly lower than the state rate
▲ county rate is significantly higher than the state rate

TABLE 18: Cancer of the Brain & Other Nervous System Incidence and Mortality Number of Cases, Deaths, and Rates, by County of Residence

Nebraska (2002-06) and US (2002-06 [incidence] & 2001-05 [mortality])

	Incidence		Mortality	
	# Cases	Rate	# Deaths	Rate
US	NA	6.5	NA	4.4
NEBRASKA	617	6.9	437	4.8
COUNTY				
ADAMS	9	5.2	9	4.8
ANTELOPE	1	**	1	**
ARTHUR	0	---	0	---
BANNER	1	**	1	**
BLAINE	0	---	0	---
BOONE	3	**	4	**
BOX BUTTE	5	**	9	13.5
BOYD	1	**	1	**
BROWN	2	**	1	**
BUFFALO	8	3.9	10	5.1
BURT	4	**	2	**
BUTLER	5	**	2	**
CASS	3	**	3	**
CEDAR	1	**	1	**
CHASE	2	**	2	**
CHERRY	2	**	0	---
CHEYENNE	1	**	1	**
CLAY	4	**	3	**
COLFAX	4	**	2	**
CUMING	1	**	2	**
CUSTER	2	**	3	**
DAKOTA	6	6.7	6	6.3
DAWES	2	**	3	**
DAWSON	11	9.0	6	5.3
DEUEL	1	**	1	**
DIXON	4	**	1	**
DODGE	13	6.6	7	3.8
DOUGLAS	159	6.9	84	3.8
DUNDY	1	**	1	**
FILLMORE	2	**	2	**
FRANKLIN	3	**	0	---
FRONTIER	1	**	1	**
FURNAS	3	**	1	**
GAGE	5	**	1	**
GARDEN	0	---	0	---
GARFIELD	2	**	2	**
GOSPER	2	**	2	**
GRANT	0	---	0	---
GREELEY	0	---	0	---
HALL	19	6.7	12	4.2
HAMILTON	2	**	1	**
HARLAN	1	**	1	**
HAYES	0	---	0	---
HITCHCOCK	1	**	0	---
HOLT	3	**	7	10.1
HOOKER	0	---	0	---
HOWARD	2	**	2	5.7

TABLE 17: Cancer of the Brain & Other Nervous System Incidence and Mortality (Continued)

Number of Cases, Deaths, and Rates, by County of Residence

Nebraska (2002-06) and US (2002-06 [incidence] & 2001-05 [mortality])

	Incidence		Mortality	
	# Cases	Rate	# Deaths	Rate
COUNTY				
JEFFERSON	4	**	3	**
JOHNSON	2	**	2	**
KEARNEY	4	**	2	**
KEITH	4	**	3	**
KEYA PAHA	0	---	0	---
KIMBALL	0	---	0	---
KNOX	9	17.4	6	10.7
LANCASTER	104	8.5	69	5.9
LINCOLN	9	4.9	8	4.1
LOGAN	0	---	1	**
LOUP	0	---	0	---
McPHERSON	0	---	0	---
MADISON	17	9.5	12	6.3
MERRICK	3	**	3	**
MORRILL	1	**	1	**
NANCE	0	---	1	**
NEMAHA	4	**	4	**
NUCKOLLS	4	**	3	**
OTOE	7	8.6	7	7.7
PAWNEE	2	**	2	**
PERKINS	1	**	1	**
PHELPS	8	16.1	5	**
PIERCE	2	**	3	**
PLATTE	11	6.8	7	4.3
POLK	1	**	1	**
RED WILLOW	7	11.0	4	**
RICHARDSON	8	14.7	7	13.3
ROCK	1	**	0	---
SALINE	4	**	3	**
SARPY	43	7.8	24	4.7
SAUNDERS	9	7.6	13	10.8
SCOTTS BLUFF	10	4.6	9	3.6
SEWARD	7	8.7	8	8.8
SHERIDAN	1	**	0	---
SHERMAN	2	**	2	**
SIOUX	0	---	0	---
STANTON	1	**	4	**
THAYER	2	**	1	**
THOMAS	0	---	0	---
THURSTON	2	**	2	**
VALLEY	0	---	0	---
WASHINGTON	6	5.7	5	**
WAYNE	6	13.4	6	13.0
WEBSTER	1	**	1	**
WHEELER	1	**	0	---
YORK	7	8.8	6	7.4

NA – not available

**Rate is not shown if based on five or fewer events

Rates are expressed per 100,000 population and are age-adjusted to the 2000 U.S. population

▼ county rate is significantly lower than the state rate

▲ county rate is significantly higher than the state rate

TABLE 19: Cancer Incidence
Number of Cases and Rates, All Sites and Top Ten Sites, by County of Residence*
(*grouped by local public health department regions—see pp. 74-75)
Nebraska (2002-2006)

Central

	Number	Rate
All Sites	1973	496.7
Prostate	335	▲182.7
Female Breast	267	130.1
Lung & Bronchus	234	58.7
Colon & Rectum (Colorectal)	224	54.6
Non-Hodgkin Lymphoma	91	23.1
Urinary Bladder	85	20.4
Leukemia	67	16.5
Uterine Corpus & Unspecified (Endometrium)	64	31.6
Thyroid	61	▲17.5
Kidney & Renal Pelvis	58	14.7

East Central

	Number	Rate
All Sites	1426	484.1
Prostate	269	▲203.3
Colon & Rectum (Colorectal)	199	65.4
Female Breast	194	127.3
Lung & Bronchus	173	58.2
Urinary Bladder	75	24.5
Non-Hodgkin Lymphoma	49	17.2
Kidney & Renal Pelvis	46	15.5
Leukemia	41	14.1
Thyroid	35	12.8
Uterine Corpus & Unspecified (Endometrium)	34	21.7
Melanoma of the Skin	34	▼11.7

Dakota County

	Number	Rate
All Sites	398	441.3
Lung & Bronchus	67	76.5
Female Breast	51	102.6
Prostate	49	▼115.6
Colon & Rectum (Colorectal)	41	45.6
Non-Hodgkin Lymphoma	19	21.6
Leukemia	19	19.9
Melanoma of the Skin	16	17.8
Urinary Bladder	13	15.1
Kidney & Renal Pelvis	13	14.6
Uterine Corpus & Unspecified (Endometrium)	11	23.3

Elkhorn Logan Valley

	Number	Rate
All Sites	1577	452.4
Prostate	259	165.3
Colon & Rectum (Colorectal)	233	64.3
Lung & Bronchus	213	61.2
Female Breast	211	118.7
Urinary Bladder	61	▼15.9
Non-Hodgkin Lymphoma	60	16.6
Leukemia	57	16.4
Melanoma of the Skin	54	16.6
Pancreas	39	10.7
Uterine Corpus & Unspecified (Endometrium)	36	20.6

Douglas County

	Number	Rate
All Sites	11051	▲501.0
Lung & Bronchus	1695	▲79.1
Female Breast	1500	122.7
Prostate	1431	152.4
Colon & Rectum (Colorectal)	1223	56.2
Urinary Bladder	497	23.0
Non-Hodgkin Lymphoma	479	21.7
Melanoma of the Skin	370	16.3
Kidney & Renal Pelvis	365	16.2
Leukemia	324	14.5
Uterine Corpus & Unspecified (Endometrium)	286	23.4

Four Corners

	Number	Rate
All Sites	1276	458.9
Female Breast	194	135.3
Colon & Rectum (Colorectal)	179	61.0
Prostate	175	136.3
Lung & Bronchus	153	▼54.0
Urinary Bladder	68	23.0
Non-Hodgkin Lymphoma	56	19.8
Uterine Corpus & Unspecified (Endometrium)	46	31.0
Kidney & Renal Pelvis	46	17.4
Melanoma of the Skin	43	16.6
Leukemia	31	11.1

TABLE 19: Cancer Incidence (Continued)
Number of Cases and Rates, All Sites and Top Ten Sites, by County of Residence*
(*grouped by local public health department regions—see pp. 74-75)
Nebraska (2002-2006)

Lincoln-Lancaster County

	Number	Rate
All Sites	5692	487.4
Female Breast	888	▲139.8
Lung & Bronchus	731	64.3
Prostate	724	▼143.0
Colon & Rectum (Colorectal)	622	54.5
Melanoma of the Skin	263	▲21.4
Non-Hodgkin Lymphoma	256	21.9
Urinary Bladder	228	20.1
Uterine Corpus & Unspecified (Endometrium)	202	31.8
Thyroid	181	▲14.2
Kidney & Renal Pelvis	170	14.5

Northeast Nebraska

	Number	Rate
All Sites	769	422.0
Prostate	109	129.9
Female Breast	108	116.3
Colon & Rectum	104	55.6
Lung & Bronchus	87	▼45.7
Urinary Bladder	36	18.0
Kidney & Renal Pelvis	33	17.9
Melanoma of the Skin	31	18.3
Non-Hodgkin Lymphoma	30	15.5
Uterine Corpus & Unspecified (Endometrium)	27	31.0
Leukemia	26	13.1

Loup Basin

	Number	Rate
All Sites	1085	466.3
Prostate	200	181.5
Colon & Rectum (Colorectal)	144	57.8
Lung & Bronchus	139	58.1
Female Breast	134	115.7
Urinary Bladder	57	23.3
Leukemia	41	16.3
Non-Hodgkin Lymphoma	35	15.5
Uterine Corpus & Unspecified (Endometrium)	30	25.0
Melanoma of the Skin	30	13.1
Oral Cavity & Pharynx	25	10.8

Panhandle

	Number	Rate
All Sites	1438	▼440.8
Prostate	248	163.5
Female Breast	192	117.1
Lung & Bronchus	185	▼54.4
Colon & Rectum (Colorectal)	166	48.3
Urinary Bladder	76	21.5
Uterine Corpus & Unspecified (Endometrium)	55	33.1
Non-Hodgkin Lymphoma	55	16.3
Melanoma of the Skin	46	15.7
Kidney & Renal Pelvis	46	14.5
Leukemia	43	12.9

North Central

	Number	Rate
All Sites	1597	▼468.2
Prostate	322	▲199.2
Female Breast	218	128.5
Colon & Rectum (Colorectal)	216	59.9
Lung & Bronchus	196	▼54.0
Urinary Bladder	83	22.1
Non-Hodgkin Lymphoma	62	17.5
Leukemia	53	16.0
Uterine Corpus & Unspecified (Endometrium)	46	26.7
Kidney & Renal Pelvis	45	14.0
Melanoma of the Skin	39	12.6

Public Health Solutions

	Number	Rate
All Sites	1719	▼448.4
Colon & Rectum (Colorectal)	253	60.6
Female Breast	236	124.8
Prostate	216	▼123.8
Lung & Bronchus	214	▼53.9
Non-Hodgkin Lymphoma	77	18.8
Melanoma of the Skin	73	22.0
Urinary Bladder	70	16.9
Uterine Corpus & Unspecified (Endometrium)	56	28.2
Leukemia	50	12.3
Oral Cavity & Pharynx	47	12.9
Kidney & Renal Pelvis	47	12.4

TABLE 19: Cancer Incidence (Continued)
Number of Cases and Rates, All Sites and Top Ten Sites, by County of Residence*
(*grouped by local public health department regions—see pp. 74-75)
Nebraska (2002-2006)

Sarpy Cass

	Number	Rate
All Sites	3166	▲508.1
Female Breast	490	136.8
Lung & Bronchus	439	▲73.6
Prostate	411	151.9
Colon & Rectum (Colorectal)	357	62.0
Melanoma of the Skin	143	20.1
Non-Hodgkin Lymphoma	132	21.6
Urinary Bladder	130	22.0
Kidney & Renal Pelvis	104	16.4
Uterine Corpus & Unspecified (Endometrium)	93	25.8
Leukemia	92	14.9

Southeast

	Number	Rate
All Sites	1205	450.3
Colon & Rectum (Colorectal)	179	62.5
Female Breast	172	124.2
Lung & Bronchus	159	58.1
Prostate	158	▼127.7
Non-Hodgkin Lymphoma	53	19.6
Urinary Bladder	47	15.9
Uterine Corpus & Unspecified (Endometrium)	43	30.7
Leukemia	42	14.2
Melanoma of the Skin	33	12.5
Oral Cavity & Pharynx	31	12.0

Scotts Bluff County

	Number	Rate
All Sites	1099	491.9
Prostate	208	▲205.7
Female Breast	162	139.1
Lung & Bronchus	119	▼51.3
Colon & Rectum (Colorectal)	104	▼44.9
Melanoma of the Skin	57	▲26.2
Urinary Bladder	53	22.8
Non-Hodgkin Lymphoma	47	20.9
Kidney & Renal Pelvis	45	20.7
Uterine Corpus & Unspecified (Endometrium)	39	32.4
Oral Cavity & Pharynx	32	14.5

Southwest Nebraska

	Number	Rate
All Sites	1056	460.2
Prostate	157	148.8
Female Breast	133	112.9
Lung & Bronchus	133	60.0
Colon & Rectum (Colorectal)	125	52.1
Urinary Bladder	67	26.1
Non-Hodgkin Lymphoma	63	26.5
Melanoma of the Skin	34	16.5
Kidney & Renal Pelvis	33	14.8
Leukemia	30	13.6
Pancreas	30	12.0

South Heartland

	Number	Rate
All Sites	1447	477.0
Prostate	215	156.3
Lung & Bronchus	210	69.4
Colon & Rectum (Colorectal)	194	60.3
Female Breast	191	123.0
Non-Hodgkin Lymphoma	74	23.8
Urinary Bladder	65	19.7
Melanoma of the Skin	52	19.1
Uterine Corpus & Unspecified (Endometrium)	47	29.4
Leukemia	40	13.6
Oral Cavity & Pharynx	36	11.2

Three Rivers

	Number	Rate
All Sites	2289	▲513.7
Prostate	434	▲213.5
Colon & Rectum (Colorectal)	311	136.3
Female Breast	302	64.9
Lung & Bronchus	288	63.7
Non-Hodgkin Lymphoma	123	▲27.5
Urinary Bladder	95	20.7
Leukemia	68	15.0
Melanoma of the Skin	66	15.6
Uterine Corpus & Unspecified (Endometrium)	64	28.6
Kidney & Renal Pelvis	60	14.1

TABLE 19: Cancer Incidence (Continued)
Number of Cases and Rates, All Sites and Top Ten Sites, by County of Residence*
(*grouped by local public health department regions—see pp. 74-75)
Nebraska (2002-2006)

Two Rivers

	Number	Rate
All Sites	2227	▼443.0
Prostate	347	153.6
Female Breast	336	128.2
Colon & Rectum (Colorectal)	276	53.9
Lung & Bronchus	264	▼53.0
Urinary Bladder	109	20.9
Non-Hodgkin Lymphoma	91	18.2
Leukemia	76	15.2
Uterine Corpus & Unspecified (Endometrium)	74	28.4
Pancreas	64	11.7
Melanoma of the Skin	63	▼12.9
Kidney & Renal Pelvis	63	12.5

West Central

	Number	Rate
All Sites	1337	462.7
Lung & Bronchus	192	65.7
Female Breast	179	119.6
Prostate	169	▼126.5
Colon & Rectum (Colorectal)	151	50.4
Non-Hodgkin Lymphoma	69	24.0
Urinary Bladder	69	22.9
Leukemia	46	15.7
Melanoma of the Skin	45	16.7
Kidney & Renal Pelvis	43	15.3
Uterine Corpus & Unspecified (Endometrium)	34	21.3

▼ local rate is significantly lower than the state rate
▲ local rate is significantly higher than the state rate

Excluding gender-specific sites, all rates are expressed per 100,000 population, and are age-adjusted to the 2000 U.S. population

Rates for gender-specific sites (prostate, female breast, endometrium, ovary) are expressed per 100,000 male or female population, and are age-adjusted to the 2000 U.S. population.

TABLE 20: Cancer Mortality
Number of Deaths and Rates, All Sites and Top Ten Sites, by County of Residence*
(*grouped by local public health department regions—see pp. 74-75)
Nebraska (2002-2006)

Central

	Number	Rate
All Sites	723	173.8
Lung & Bronchus	176	43.7
Colon & Rectum (Colorectal)	72	16.8
Female Breast	51	23.4
Leukemia	39	8.9
Prostate	37	21.6
Non-Hodgkin Lymphoma	37	8.7
Pancreas	36	8.7
Myeloma	28	▲6.7
Urinary Bladder	27	6.5
Ovary	21	9.4
Esophagus	21	5.3

East Central

	Number	Rate
All Sites	557	181.2
Lung & Bronchus	134	44.0
Colon & Rectum (Colorectal)	83	▲26.8
Female Breast	49	29.1
Prostate	29	22.4
Pancreas	28	9.2
Non-Hodgkin Lymphoma	25	7.9
Leukemia	19	6.0
Esophagus	16	5.2
Ovary	15	9.9
Brain & Other Nervous System	14	5.1

Dakota County

	Number	Rate
All Sites	161	180.4
Lung & Bronchus	47	53.4
Colon & Rectum (Colorectal)	13	14.9
Female Breast	12	23.6
Leukemia	10	10.6
Prostate	9	24.8
Liver & Intrahepatic Bile Duct	8	9.4
Non-Hodgkin Lymphoma	7	7.9
Pancreas	6	7.2
Kidney & Renal Pelvis	6	6.9
Brain & Other Nervous System	6	6.3

Elkhorn Logan Valley

	Number	Rate
All Sites	625	168.0
Lung & Bronchus	181	51.2
Colon & Rectum (Colorectal)	69	17.6
Female Breast	53	25.2
Pancreas	40	10.9
Prostate	32	19.7
Non-Hodgkin Lymphoma	23	6.5
Leukemia	23	6.1
Brain & Other Nervous System	20	5.7
Kidney & Renal Pelvis	16	4.3
Ovary	15	7.7

Douglas County

	Number	Rate
All Sites	4198	▲194.0
Lung & Bronchus	1234	▲57.7
Colon & Rectum (Colorectal)	436	20.1
Female Breast	308	24.5
Pancreas	224	10.5
Prostate	204	25.8
Leukemia	164	7.6
Non-Hodgkin Lymphoma	144	6.7
Kidney & Renal Pelvis	107	4.9
Ovary	106	8.6
Esophagus	105	4.9
Urinary Bladder	105	4.9

Four Corners

	Number	Rate
All Sites	522	172.9
Lung & Bronchus	112	▼38.8
Colon & Rectum (Colorectal)	74	23.7
Female Breast	34	18.9
Pancreas	29	9.8
Non-Hodgkin Lymphoma	28	8.4
Prostate	27	19.7
Ovary	23	14.2
Leukemia	21	6.4
Kidney & Renal Pelvis	19	6.7
Brain & Other Nervous System	17	6.6
Urinary Bladder	17	4.9

TABLE 20: Cancer Mortality (Continued)
Number of Deaths and Rates, All Sites and Top Ten Sites, by County of Residence*
(*grouped by local public health department regions—see pp. 74-75)
Nebraska (2002-2006)

Lincoln-Lancaster County

	Number	Rate
All Sites	2063	179.5
Lung & Bronchus	541	47.7
Colon & Rectum (Colorectal)	221	19.0
Female Breast	149	22.1
Pancreas	127	11.2
Prostate	94	23.5
Non-Hodgkin Leukemia	94	8.2
Leukemia	89	7.8
Brain & Other Nervous System	69	5.9
Ovary	59	9.2
Kidney & Renal Pelvis	49	4.2

Northeast Nebraska

	Number	Rate
All Sites	333	166.3
Lung & Bronchus	89	46.1
Colon & Rectum (Colorectal)	39	18.4
Prostate	19	21.4
Myeloma	18	▲8.5
Female Breast	17	▼12.8
Pancreas	15	6.9
Non-Hodgkin Lymphoma	14	7.3
Kidney & Renal Pelvis	13	7.0
Leukemia	11	5.2
Esophagus	10	6.0
Brain & Other Nervous System	10	5.3

Loup Basin

	Number	Rate
All Sites	420	162.6
Lung & Bronchus	98	39.9
Colon & Rectum (Colorectal)	51	19.0
Female Breast	33	20.9
Prostate	29	24.9
Leukemia	29	10.8
Pancreas	18	6.7
Ovary	15	11.3
Esophagus	12	5.3
Kidney & Renal Pelvis	12	4.3
Liver & Intrahepatic Bile Duct	10	4.2
Non-Hodgkin Lymphoma	10	▼3.4

Panhandle

	Number	Rate
All Sites	640	183.8
Lung & Bronchus	155	44.5
Colon & Rectum (Colorectal)	73	19.7
Prostate	42	28.2
Female Breast	41	23.1
Pancreas	38	10.9
Leukemia	29	8.2
Non-Hodgkin Lymphoma	24	6.9
Ovary	23	13.5
Uterine Corpus & Unspecified (Endometrium)	19	9.3
Urinary Bladder	18	4.7

North Central

	Number	Rate
All Sites	600	▼159.9
Lung & Bronchus	158	43.0
Colon & Rectum (Colorectal)	82	21.5
Prostate	43	24.8
Female Breast	33	17.2
Pancreas	32	8.5
Non-Hodgkin Lymphoma	29	7.3
Leukemia	20	4.8
Brain & Other Nervous System	19	5.9
Uterine Corpus & Unspecified (Endometrium)	17	8.2
Kidney & Renal Pelvis	17	4.7

Public Health Solutions

	Number	Rate
All Sites	707	▼162.3
Lung & Bronchus	155	▼37.7
Colon & Rectum (Colorectal)	83	18.4
Prostate	52	26.9
Female Breast	48	19.8
Non-Hodgkin Lymphoma	37	8.6
Pancreas	35	7.9
Kidney & Renal Pelvis	31	7.0
Ovary	22	8.8
Esophagus	22	5.3
Leukemia	22	▼4.3

TABLE 20: Cancer Mortality (Continued)
Number of Deaths and Rates, All Sites and Top Ten Sites, by County of Residence*
(*grouped by local public health department regions—see pp. 74-75)
Nebraska (2002-2006)

Sarpy Cass

	Number	Rate
All Sites	1007	177.9
Lung & Bronchus	295	50.6
Colon & Rectum (Colorectal)	100	18.3
Female Breast	80	23.8
Pancreas	49	8.9
Prostate	43	24.1
Leukemia	39	6.8
Esophagus	38	6.4
Non-Hodgkin Lymphoma	36	6.6
Liver & Intrahepatic Bile Duct	33	6.1
Kidney & Renal Pelvis	29	4.9

Southeast

	Number	Rate
All Sites	532	178.5
Lung & Bronchus	135	48.1
Colon & Rectum (Colorectal)	72	22.2
Prostate	38	28.0
Female Breast	34	19.3
Pancreas	28	9.4
Leukemia	27	7.8
Non-Hodgkin Lymphoma	25	8.6
Brain & Other Nervous System	22	8.8
Uterine Corpus & Unspecified (Endometrium)	11	6.0
Melanoma of the Skin	11	3.8

Scotts Bluff County

	Number	Rate
All Sites	422	177.5
Lung & Bronchus	106	44.6
Colon & Rectum (Colorectal)	46	18.9
Prostate	25	25.0
Female Breast	25	18.6
Pancreas	21	8.9
Non-Hodgkin Lymphoma	19	8.2
Leukemia	19	7.7
Kidney & Renal Pelvis	15	6.3
Esophagus	13	5.9
Ovary	12	8.8

Southwest Nebraska

	Number	Rate
All Sites	414	164.9
Lung & Bronchus	97	40.4
Colon & Rectum (Colorectal)	45	17.2
Female Breast	32	26.3
Pancreas	27	10.8
Non-Hodgkin Lymphoma	26	9.3
Prostate	25	22.1
Leukemia	22	8.2
Kidney & Renal Pelvis	15	5.9
Urinary Bladder	13	4.9
Ovary	11	6.7

South Heartland

	Number	Rate
All Sites	573	176.8
Lung & Bronchus	148	48.0
Colon & Rectum (Colorectal)	66	19.2
Female Breast	37	20.7
Prostate	30	21.0
Pancreas	27	8.0
Leukemia	21	6.3
Non-Hodgkin Lymphoma	20	6.1
Urinary Bladder	20	5.6
Ovary	19	9.8
Kidney & Renal Pelvis	18	5.6

Three Rivers

	Number	Rate
All Sites	831	174.9
Lung & Bronchus	217	47.0
Colon & Rectum (Colorectal)	100	20.3
Female Breast	56	21.3
Pancreas	53	11.0
Prostate	46	24.6
Non-Hodgkin Lymphoma	46	9.5
Leukemia	30	6.3
Brain & Other Nervous System	25	5.9
Myeloma	20	4.2
Kidney & Renal Pelvis	20	4.1

TABLE 20: Cancer Mortality (Continued)
Number of Deaths and Rates, All Sites and Top Ten Sites, by County of Residence*
(*grouped by local public health department regions—see pp. 74-75)
Nebraska (2002-2006)

Two Rivers

	Number	Rate
All Sites	923	175.8
Lung & Bronchus	219	43.2
Colon & Rectum (Colorectal)	92	16.9
Female Breast	81	28.2
Prostate	67	30.4
Pancreas	57	10.4
Leukemia	51	9.7
Non-Hodgkin Lymphoma	43	8.0
Brain & Other Nervous System	26	5.2
Kidney & Renal Pelvis	25	4.7
Ovary	22	8.1

West Central

	Number	Rate
All Sites	557	185.3
Lung & Bronchus	151	51.2
Colon & Rectum (Colorectal)	55	17.7
Female Breast	41	25.5
Prostate	35	28.3
Pancreas	25	8.1
Leukemia	21	6.8
Non-Hodgkin Lymphoma	20	6.6
Esophagus	15	5.2
Urinary Bladder	14	4.5
Several sites	13	---

**Rate is not shown if based on five or fewer events.

▼ local rate is significantly lower than the state rate
▲ local rate is significantly higher than the state rate

Excluding gender-specific sites, all rates are expressed per 100,000 population, and are age-adjusted to the 2000 U.S. population.

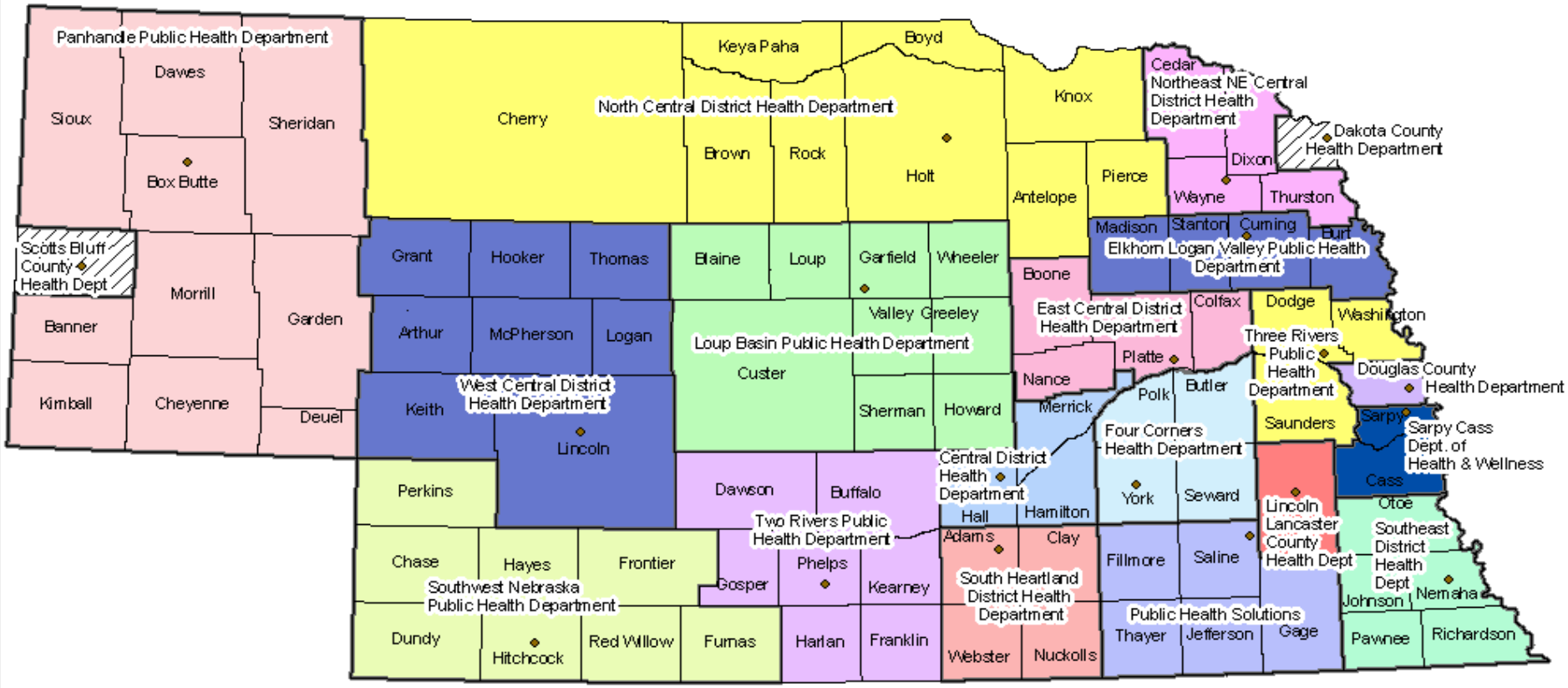
Rates for gender-specific sites (prostate, female breast, endometrium, ovary) are expressed per 100,000 male or female population, and are age-adjusted to the 2000 U.S. population.

Local Public Health Department Regions in Nebraska

#	Health Department	Area of Coverage, by County
1	Central	Hall, Hamilton, Merrick
2	Dakota County	Dakota
3	Douglas County	Douglas
4	East Central	Boone, Colfax, Nance, Platte
5	Elkhorn Logan Valley	Burt, Cuming, Madison, Stanton
6	Four Corners	Butler, Polk, Seward, York
7	Lincoln-Lancaster County	Lancaster
8	Loup Basin	Blaine, Custer, Garfield, Greeley, Howard, Loup, Sherman, Valley, Wheeler
9	North Central	Antelope, Boyd, Brown, Cherry, Holt, Keya Paha, Knox, Pierce, Rock
10	Northeast Nebraska	Cedar, Dixon, Thurston, Wayne
11	Panhandle	Banner, Box Butte, Cheyenne, Dawes, Deuel, Garden, Kimball, Morrill, Sheridan, Sioux
12	Public Health Solutions	Fillmore, Gage, Jefferson, Saline, Thayer
13	Sarpy Cass	Cass, Sarpy
14	Scotts Bluff County	Scotts Bluff
15	South Heartland	Adams, Clay, Nuckolls, Webster
16	Southeast	Johnson, Nemaha, Otoe, Pawnee, Richardson
17	Southwest Nebraska	Chase, Dundy, Frontier, Furnas, Hayes, Hitchcock, Perkins, Red Willow,
18	Three Rivers	Dodge, Saunders, Washington
19	Two Rivers	Buffalo, Dawson, Franklin, Gosper, Harlan, Kearney, Phelps
20	West Central	Arthur, Grant, Hooker, Keith, Lincoln, Logan, McPherson, Thomas

Nebraska Local Public Health Departments

Last Updated: October 2006



Color-coded areas represent Local Public Health Departments eligible under the Nebraska Health Care Funding Act

Counties covered by Local Health Departments but do not qualify for LB 692 funding

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Participants in the Nebraska Cancer Registry
(City--Facility)

Ainsworth--Brown County Hospital
Albion--Boone County Health Center
Alliance--Box Butte General Hospital
Alma--Harlan County Health System
Atkinson--West Holt Memorial Hospital, Inc.
Auburn--Nemaha County Hospital
Aurora--Memorial Hospital
Bassett--Rock County Hospital
Beatrice--Beatrice Community Hosp. & Hlth. Ctr., Inc.
Benkelman--Dundy County Hospital
Blair--Memorial Community Hospital
Bridgeport--Morrill County Community Hospital
Broken Bow--Jennie Melham Memorial Medical Ctr.
Callaway--Callaway District Hospital
Cambridge--Tri Valley Health System
Central City--Litzenberg Memorial County Hospital
Chadron--Chadron Community Hosp. & Hlth. Svcs.
Columbus--Columbus Community Hospital, Inc.
Cozad--Cozad Community Hospital
Creighton--Creighton Area Health Services
Crete--Crete Area Medical Center
David City--Butler County Health Care Center
Fairbury--Jefferson Community Health Center, Inc.
Falls City--Community Medical Center, Inc.
Franklin--Franklin County Memorial Hospital
Fremont--Fremont Area Medical Center
Friend--Warren Memorial Hospital
Geneva--Fillmore County Hospital
Genoa--Genoa Community Hospital/LTC
Gordon--Gordon Memorial Hospital District
Gothenburg--Gothenburg Memorial Hospital
Grand Island--St. Francis Medical Center
Grant--Perkins County Health Services
Hastings--Mary Lanning Memorial Hospital
Hebron--Thayer County Health Services
Henderson--Henderson Health Care Services
Holdrege--Phelps Memorial Health Center
Imperial--Chase County Community Hospital
Kearney--Good Samaritan Hospital
Kearney--Good Samaritan Hospital Pathology
Kimball--Kimball Health Services & Hospital
Lexington--Tri-County Area Hospital District
Lincoln--Bryan-LGH Medical Center East & West
Lincoln--Saint Elizabeth Regional Medical Center
Lincoln--Pathology Medical Services
Lincoln--Williamsburg Radiation Center
Lincoln--Nebraska Heart Insitute
Lynch--Niobrara Valley Hospital Corp.
McCook--Community Hospital
Minden--Kearney County Health Services
Nebraska City--St. Mary's Hospital
Neligh--Antelope Memorial Hospital
Norfolk--Faith Regional Health Services East & West
North Platte--Great Plains Regional Medical Center
North Platte--Pathology Services
Oakland--Oakland Memorial Hospital
Offutt AFB--Ehrling Berquist Hospital
Ogallala--Ogallala Community Hospital
Omaha--Alegent Health - Bergan Mercy Medical Ctr.
Omaha--Alegent Health - Immanuel Medical Center
Omaha--Children's Hospital
Omaha--Methodist Hospital Pathology Center
Omaha--Nebraska Medical Center
Omaha--Nebraska Methodist Hospital
Omaha--Creighton University Medical Center
Omaha--Dept. of Veteran's Affairs Medical Center
Omaha--Boys Town National Research Hospital
Omaha--Alegent Lakeside Hospital
Omaha--Bergan Mercy Medical Center Pathology
Omaha--Bishop Clarkson Hospital Pathology
Omaha--Creighton Pathology Associates
Omaha--Physicians Lab
O'Neill--Avera St. Anthony's Hospital
Ord--Valley County Hospital
Osceola--Annie Jeffrey Memorial County Health Ctr.
Oshkosh--Garden County Health Services
Osmond--Osmond General Hospital
Papillion--Alegent Health Midlands Community Hosp.
Pawnee City--Pawnee County Memorial Hospital
Pender--Pender Community Hospital
Plainview--Plainview Area Health System
Red Cloud--Webster County Community Hospital
Schuyler--Alegent Health Memorial Hospital
Scottsbluff--Regional West Medical Center
Scottsbluff--Western Pathology Consultants
Seward--Memorial Hospital
Sidney--Memorial Health Center
St. Paul--Howard County Community Hospital
Superior--Brodstone Memorial Hospital
Syracuse--Community Memorial Hospital
Tecumseh--Johnson County Hospital
Tilden--Tilden Community Hospital
Valentine--Cherry County Hospital
Wahoo--Saunders County Health Services
Wayne--Providence Medical Center
West Point--St. Francis Memorial Hospital
Winnebago--USPHS Indian Hospital
York--York General Hospital

Other States:
Sioux City, IA--Mercy Medical Center

State cancer registries of Colorado, Iowa, Kansas, Missouri, South Dakota, and Wyoming, North Dakota, Arizona, Arkansas, Alaska, Oklahoma

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