

Cancer Incidence and Mortality in Nebraska: 2007



May, 2010

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 CST and 5 PM CST

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 2007 ANNUAL REPORT

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This publication was supported by Cooperative Agreement Grant Number 5U58DP000811 from the Centers for Disease Control and Prevention (CDC). Its contents are solely the responsibility of the authors and do not necessarily represent the official view of CDC.

A special thank you to the Nebraska Cancer Registry Advisory Committee members who provided advice and assistance to the Nebraska Cancer Registry, and also reviewed this report.

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EXECUTIVE SUMMARY

- In 2007, there were 9,030 diagnoses of malignant cancer among Nebraska residents. This number is almost identical to the number of malignancies that were diagnosed in Nebraska in 2006 (9,029).
- 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 2007, while lung, kidney, and colorectal cancer were diagnosed significantly more frequently.
- In 2007, prostate, lung, and colorectal cancers were the most frequently diagnosed malignancies among Nebraska men, while breast, lung, and colorectal 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 2007.
- During the past five years (2003-2007), 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 (1998-2007), African-Americans in Nebraska were significantly more likely to be diagnosed with and die from cancers of the lung, prostate, and pancreas than were whites. They were also significantly more likely to die from female breast and colorectal cancers than were whites even though they were not more likely to be diagnosed with either type.
- In 2007, 3,477 Nebraska residents died from cancer, which is a slight increase from the state's 2006 cancer death total of 3,426.
- Cancer was the second leading cause of death in Nebraska in 2007, accounting for just 40 fewer deaths than the #1 cause, heart disease. Among Nebraska men, cancer claimed more lives than heart disease for the first time in 2006 and again in 2007.
- Cancer deaths in general occurred significantly less often in Nebraska in 2007 than in the U.S. as a whole. By specific body site, deaths from melanoma of the skin and cancers of the oral cavity, liver, cervix, and stomach occurred significantly less often in Nebraska in 2007 when compared to the most recent national rates, while brain cancer deaths occurred significantly more often.
- Lung cancer was the leading cause of cancer mortality in Nebraska in 2007, accounting for more than 25% of the state's cancer deaths. Colorectal cancer was the second leading cause of cancer deaths in Nebraska in 2007.
- Since 1990, the annual rate of breast cancer deaths among Nebraska women has declined by almost 40%, closely following the national trend.
- Since the early 1990s, the annual rate of prostate cancer deaths among Nebraska men has declined by over 25%, closely following the national trend.

- Counties where cancer incidence during 2003-2007 was significantly different ($p < .01$) from the state:

<i>Significantly lower ▼</i>		<i>Significantly higher ▲</i>	
<i>County</i>	<i>Primary Sites</i>	<i>County</i>	<i>Primary Sites</i>
Cedar	All, lung & bronchus, colorectal	Colfax	Prostate
Cuming	All, lung & bronchus, urinary bladder	Dodge	All, colorectal, prostate
Dawes	All	Douglas	All, lung & bronchus
Dawson	All, lung & bronchus, prostate	Hall	All
Dixon	Prostate	Lancaster	Melanoma of the skin
Gage	Prostate, leukemia	Sarpy	All
Hayes	All		
Kearney	All		
Keith	All		
Morrill	Colorectal		
Phelps	Colorectal, Non-Hodgkin lymphoma		
Seward	Prostate		
Scotts Bluff	Lung & bronchus		
Sheridan	All, lung & bronchus		
Sioux	All		
Stanton	All, lung & bronchus, female breast		
Wayne	Lung & bronchus		
York	Melanoma of the skin		

- Counties where cancer mortality during 2003-2007 was significantly different ($p < .01$) from the state:

<i>Significantly lower ▼</i>		<i>Significantly higher ▲</i>	
<i>County</i>	<i>Primary Sites</i>	<i>County</i>	<i>Primary Sites</i>
Butler	All, lung & bronchus	Douglas	All, lung & bronchus
Cuming	Lung & bronchus	Thurston	All
Furnas	Lung & bronchus		
Wayne	All		

INTRODUCTION

This publication represents the 21st 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, 2007 and December 31, 2007, as well as during the past five years (January 1, 2003-December 31, 2007).

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 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, excluding facilities operated by the U.S. Department of Veteran's Affairs. The registry also includes Nebraska residents who are diagnosed with and/or treated for cancer out of state, as well as 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.naacr.org/index.asp>)
- 2) *United States Cancer Statistics*
(<http://apps.nccd.cdc.gov/uscs/>)
- 3) *Cancer Facts & Figures 2009*
(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 per year.

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 2007 and 2003-2007 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 2007 were calculated using the 2007 population estimates developed by the United States Bureau of the Census, while the 2003-2007 rates were calculated using 2005 population estimates prepared by the Census Bureau. The rates in Tables 3 and 7, which are based on data for the years 1998-2007, were calculated using the Census Bureau's 2003 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, 2010. However, because some cases diagnosed during or even before 2007 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 $CI = r \pm (RC \times SE)$, 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 9,030 diagnoses of malignant cancer among Nebraska residents in 2007, and this number translates into a statewide annual incidence rate of 475.7 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 (53.7%) of all diagnoses. The number of malignant diagnoses for 2007 is nearly equal to the 2006 number (9,029), but recent registry experience suggests that, as the registry continues to find cases, the final count of 2007 cases will probably increase by about 2-4%.

Table 1 presents the number and rate of malignant cancers diagnosed among Nebraska residents during 2007 and 2003-2007, for all sites combined and for cancers of specific sites. The most current estimates

of U.S. cancer incidence, which cover the year 2007, are also included. 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 lung and colorectal cancers occurred significantly more frequently. Table 2 presents the number of malignant cancers diagnosed and the incidence rates for 2007 and 2003-2007 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 1998-2007. Table 4 presents the number of malignant cancers diagnosed in Nebraska during 2003-2007 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 (1995-2007)**

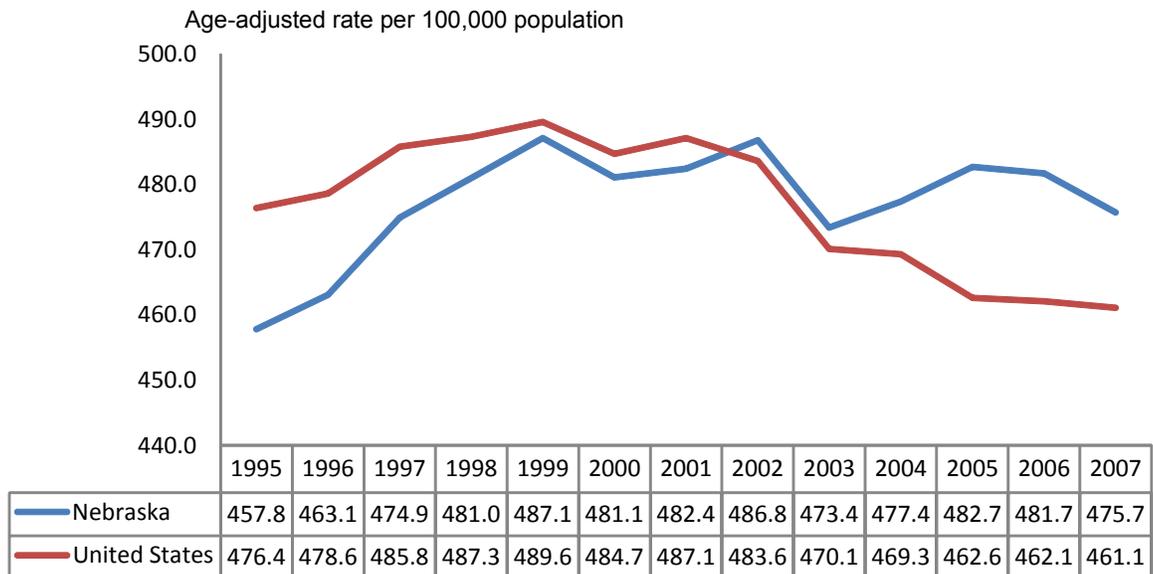


TABLE 1: Cancer Incidence
Number of Cases and Rates, by Site and Gender
Nebraska (2007 and 2003-2007) and US (2007)

SITE	NEBRASKA 2007						NEBRASKA 2003-2007						US 2007		
	MALE NO.	MALE RATE	FEMALE NO.	FEMALE RATE	TOTAL NO.	TOTAL RATE	MALE NO.	MALE RATE	FEMALE NO.	FEMALE RATE	TOTAL NO.	TOTAL RATE	MALE RATE	FEMALE RATE	TOTAL RATE
All Sites	4,697	549.9	4,332	422.8	9,030	475.7	23,173	562.2	21,123	420.4	44,300	478.8	536.6	407.2	461.1
Oral Cavity & Pharynx	135	15.4	75	7.1	210	11.0	663	15.6	320	6.2	983	10.6	15.3	6.1	10.4
Esophagus	77	9.0	21	1.8	98	5.0	353	8.5	83	1.5	436	4.7	7.9	1.9	4.6
Stomach	55	6.3	43	3.8	98	5.1	326	7.9	158	2.9	484	5.2	10.0	4.7	7.0
Colon & Rectum (Colorectal)	536	63.3	514	46.6	1,050	54.4	2,719	66.5	2,586	47.7	5,305	56.2	50.9	39.6	44.7
Liver & Intra- hepatic Bile Duct	57	6.3	18	1.6	75	3.9	272	6.4	112	2.2	384	4.1	10.7	3.6	6.9
Pancreas	90	10.8	112	10.4	201	10.4	528	12.9	492	9.2	1,020	10.8	13.6	10.5	11.9
Lung & Bronchus	667	79.0	571	54.5	1,238	65.0	3,420	84.0	2,613	51.2	6,035	65.2	69.9	51.6	59.3
Melanoma of the Skin	162	19.0	142	15.3	304	16.7	869	20.9	676	14.5	1,545	17.1	26.0	17.3	20.8
Breast	6	0.8	1,159	115.9	1,165	61.8	39	1.0	6,018	123.2	6,057	66.0	1.1	124.7	67.1
Uterine Cervix	---	---	68	8.1	---	---	---	---	312	7.2	---	---	---	6.4	---

TABLE 1: Cancer Incidence (Continued)
Number of Cases and Rates, by Site and Gender
Nebraska (2007 and 2003-2007) and US (2007)

SITE	NEBRASKA 2007						NEBRASKA 2003-2007						US 2007		
	MALE NO.	MALE RATE	FEMALE NO.	FEMALE RATE	TOTAL NO.	TOTAL RATE	MALE NO.	MALE RATE	FEMALE NO.	FEMALE RATE	TOTAL NO.	TOTAL RATE	MALE RATE	FEMALE RATE	TOTAL RATE
Uterine Corpus & Unspecified (Endometrium)	---	---	279	27.2	---	---	---	---	1,341	27.1	---	---	---	24.7	---
Ovary	---	---	110	10.5	---	---	---	---	577	11.6	---	---	---	12.5	---
Prostate	1,400	161.8	---	---	---	---	6,583	158.9	---	---	---	---	165.8	---	---
Urinary Bladder	305	36.6	113	10.2	418	21.4	1,492	37.1	519	9.6	2,011	21.3	37.0	8.7	20.8
Brain & Other Nervous System	70	8.0	63	6.5	133	7.2	342	8.1	282	5.9	624	7.0	7.5	5.4	6.4
Kidney & Renal Pelvis	176	20.1	122	12.3	298	15.9	830	19.7	536	10.8	1,366	14.8	19.9	10.3	14.7
Non-Hodgkin Lymphoma	210	24.8	178	17.4	388	20.7	1,003	24.4	926	17.8	1,929	20.8	24.6	16.7	20.2
Myeloma	52	6.2	42	4.0	94	4.9	296	7.2	248	4.8	544	5.8	7.2	4.2	5.5
Leukemia	149	17.5	108	10.3	257	13.5	772	18.8	570	11.1	1,343	14.4	15.5	9.2	11.9
Thyroid	45	5.3	176	19.8	221	12.6	208	4.9	749	17.0	957	11.0	5.8	18.1	12.0

Total rates are per 100,000 population and are age-adjusted to the 2000 U.S. population
 Gender-specific rates are 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 (2007 and 2003-2007)

	<u>2007</u>		<u>2003-2007</u>	
	<u># Cases</u>	<u>Rate</u>	<u># Cases</u>	<u>Rate</u>
US	Not available	461.1	Not available	464.9
NEBRASKA	9,030	475.7	44,300	478.8
<u>COUNTY</u>				
ADAMS	166	438.3	857	454.8
ANTELOPE	40	395.0	205	431.9
ARTHUR	*	*	12	440.5
BANNER	*	*	24	488.2
BLAINE	*	*	16	404.6
BOONE	44	564.2	218	533.9
BOX BUTTE	57	444.4	287	443.4
BOYD	6	▼170.0	78	438.8
BROWN	27	542.9	116	453.1
BUFFALO	198	456.1	982	481.9
BURT	49	433.6	261	467.5
BUTLER	49	453.1	237	429.0
CASS	146	543.6	682	520.4
CEDAR	22	▼215.5	197	▼319.3
CHASE	32	536.2	119	411.3
CHERRY	37	451.7	182	466.8
CHEYENNE	53	433.9	258	▽421.3
CLAY	58	△668.4	235	523.3
COLFAX	56	515.9	333	△558.7
CUMING	55	432.6	277	▼404.8
CUSTER	80	482.5	351	431.7
DAKOTA	81	458.1	400	449.5
DAWES	33	357.9	187	▼397.7
DAWSON	108	421.8	502	▼395.5
DEUEL	9	295.7	71	446.7
DIXON	29	▽320.8	160	▼389.1
DODGE	264	▲582.3	1,274	▲570.7
DOUGLAS	2,327	△499.9	11,281	▲502.4
DUNDY	10	292.6	77	490.5
FILLMORE	60	△667.9	231	500.0
FRANKLIN	15	▽287.2	116	466.3
FRONTIER	24	659.7	87	481.2
FURNAS	42	506.2	198	498.7
GAGE	150	476.2	684	450.7
GARDEN	13	514.7	70	440.7
GARFIELD	20	642.2	81	540.9
GOSPER	24	△820.3	73	488.0
GRANT	7	1,036.5	29	△788.7
GREELEY	18	474.9	100	551.4
HALL	330	△549.9	1,539	▲523.5
HAMILTON	52	473.4	229	423.9
HARLAN	26	478.9	128	422.3
HAYES	7	417.1	18	▼260.1
HITCHCOCK	17	349.8	121	521.4
HOLT	50	▼325.5	378	493.3
HOOKER	*	*	23	430.9
HOWARD	43	481.7	232	538.4

TABLE 2: Cancer (All Sites) Incidence (Continued)
Number of Cases and Rates, by County of Residence
 Nebraska and US (2007 and 2003-2007)

COUNTY	2007		2003-2007	
	# Cases	Rate	# Cases	Rate
JEFFERSON	58	505.8	256	428.5
JOHNSON	35	553.8	150	466.0
KEARNEY	28	352.1	163	▼393.3
KEITH	43	▽348.3	239	▼404.6
KEYA PAHA	*	*	23	▽334.9
KIMBALL	28	575.6	142	520.6
KNOX	43	▼302.6	284	▽421.8
LANCASTER	1,193	476.6	5,790	485.1
LINCOLN	223	541.3	1,004	489.6
LOGAN	*	*	16	352.3
LOUP	*	*	18	378.3
McPHERSON	6	1081.1	21	668.8
MADISON	210	545.8	961	502.2
MERRICK	36	352.3	228	449.1
MORRILL	32	482.0	158	469.3
NANCE	15	▽288.0	115	442.1
NEMAHA	52	564.3	200	431.6
NUCKOLLS	29	368.1	187	502.3
OTOE	79	▽375.4	423	▽427.9
PAWNEE	26	559.1	92	▽373.3
PERKINS	23	485.8	96	417.9
PHELPS	44	▽344.1	240	▼376.3
PIERCE	33	375.0	213	477.8
PLATTE	168	449.4	807	472.8
POLK	34	448.8	181	474.1
RED WILLOW	73	489.4	369	499.3
RICHARDSON	67	545.5	315	488.9
ROCK	10	402.9	63	506.3
SALINE	80	501.8	403	508.0
SARPY	556	488.5	2,641	▲511.9
SAUNDERS	108	449.6	569	479.1
SCOTTS BLUFF	213	460.2	1,070	479.3
SEWARD	81	434.7	447	482.3
SHERIDAN	16	▼181.4	155	▼363.5
SHERMAN	34	△769.7	117	480.5
SIOUX	*	*	24	▼261.1
STANTON	11	▼169.6	98	▼294.3
THAYER	45	491.3	205	436.4
THOMAS	*	*	18	412.3
THURSTON	41	630.4	167	504.9
VALLEY	41	640.3	166	491.8
WASHINGTON	84	▽373.9	465	436.4
WAYNE	44	499.4	193	415.7
WEBSTER	35	558.6	167	544.6
WHEELER	*	*	19	365.4
YORK	85	482.1	405	449.8

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

▽ county rate is significantly lower than the state rate (95% confidence level)

▼ county rate is significantly lower than the state rate (99% confidence level)

△ county rate is significantly higher than the state rate (95% confidence level)

▲ county rate is significantly higher than the state rate (99% confidence level)

TABLE 3: Cancer Incidence
Number of Cases and Rates, All Sites and Top Ten Sites, by Race and Ethnicity
 Nebraska (1998-2007)

Rank	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	82,419	475.1	All	2,297	499.5	All	366	443.4	All	406	273.6	All	1,187	279.8
1	Prostate	12,271	158.9	Prostate	399	205.3	Lung & Bronchus	46	68.5	Lung & Bronchus	53	40.8	Colon & Rectum (Colorectal)	130	36.7
2	Female Breast	11,987	130.3	Lung & Bronchus	399	92.2	Colon & Rectum (Colorectal)	44	53.8	Colon & Rectum (Colorectal)	52	43.2	Female Breast	124	54.0
3	Lung & Bronchus	11,092	63.7	Female Breast	305	114.0	Female Breast	43	81.4	Female Breast	48	54.3	Lung & Bronchus	113	35.1
4	Colon & Rectum (Colorectal)	10,269	57.7	Colon & Rectum (Colorectal)	264	62.4	Prostate	38	125.1	Prostate	26	57.6	Prostate	102	66.3
5	Urinary Bladder	3,851	21.7	Kidney & Renal Pelvis	81	17.3	Kidney & Renal Pelvis	34	36.1	Liver & Intrahepatic Bile Duct	24	14.7	Kidney & Renal Pelvis	57	13.5
6	Non-Hodgkin Lymphoma	3,566	20.5	Non-Hodgkin Lymphoma	79	15.9	Oral Cavity & Pharynx	15	18.5	Non-Hodgkin Lymphoma	21	12.2	Leukemia	57	7.6
7	Uterine Corpus & Unspecified (Endometrium)	2,551	27.7	Pancreas	66	15.7	Non-Hodgkin Lymphoma	14	16.2	Thyroid	20	8.1	Non-Hodgkin Lymphoma	56	11.8
8	Leukemia	2,456	14.1	Uterine Corpus & Unspecified (Endometrium)	53	20.9	Liver & Intrahepatic Bile Duct	12	15.2	Uterine Cervix	19	15.1	Thyroid	54	7.6
9	Melanoma of the Skin	2,436	14.5	Leukemia	50	9.4	Uterine Corpus & Unspecified (Endometrium)	11	21.2	Pancreas	16	12.5	Stomach	45	12.8
10	Kidney & Renal Pelvis	2,411	14.0	Oral Cavity & Pharynx	49	9.2	Leukemia	9	9.7	Oral Cavity & Pharynx	16	8.5	Uterine Cervix	39	12.1

Rates are per 100,000 population, excluding gender-specific sites (prostate, female breast, cervix, endometrium), which are 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 (2003-2007)

	0-17 Yrs.		18-44 Yrs.		45-64 Yrs.		65 Yrs and Older		TOTAL	
	No.	%	No.	%	No.	%	No.	%	No.	%
All Sites	368	0.8	3,311	7.5	14,516	32.8	26,105	58.9	44,300	100.0
Oral Cavity & Pharynx	7	0.7	75	7.6	415	42.2	486	49.4	983	100.0
Esophagus	0	0.0	14	3.2	148	33.9	274	62.8	436	100.0
Stomach	1	0.2	19	3.9	142	29.3	322	66.5	484	100.0
Colon & Rectum (Colorectal)	3	0.1	195	3.7	1,391	26.2	3,716	70.0	5,305	100.0
Liver & Intrahepatic Bile Duct	4	1.0	21	5.5	153	39.8	206	53.7	384	100.0
Pancreas	0	0.0	19	1.9	269	26.4	732	71.8	1,020	100.0
Lung & Bronchus	2	<0.1	108	1.8	1,694	28.1	4,231	70.1	6,035	100.0
Melanoma of the Skin	7	0.5	342	22.1	574	37.2	622	40.3	1,545	100.0
Female Breast	0	0.0	634	10.5	2,611	43.4	2,773	46.1	6,018	100.0
Uterine Cervix	0	0.0	145	46.5	111	35.6	56	17.9	312	100.0
Uterine Corpus & Unspecified (Endometrium)	1	0.1	89	6.6	618	46.1	633	47.2	1,341	100.0
Ovary	3	0.5	55	9.5	227	39.3	292	50.6	577	100.0
Prostate	0	0.0	25	0.4	2,256	34.3	4,302	65.3	6,583	100.0
Urinary Bladder	0	0.0	41	2.0	475	23.6	1,495	74.3	2,011	100.0
Brain & Other Nervous System	82	13.1	116	18.6	186	29.8	240	38.6	624	100.0
Kidney & Renal Pelvis	15	1.1	107	7.8	541	39.6	703	51.5	1,366	100.0
Non-Hodgkin Lymphoma	26	1.4	165	8.6	577	29.9	1,161	60.2	1,929	100.0
Myeloma	1	0.2	25	4.6	161	29.6	357	65.6	544	100.0
Leukemia	104	7.7	103	7.7	323	24.1	813	60.5	1,343	100.0
Thyroid	10	1.0	369	38.6	401	41.9	177	18.5	957	100.0

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

CANCER MORTALITY IN NEBRASKA

In 2007, 3,477 Nebraska residents died from cancer, a number that translates into a rate of 177.2 cancer deaths per 100,000 population. These figures represent a slight increase from the state's 2006 figures of 3,426 (cancer deaths) and 176.9 (cancer mortality rate). Cancer was the second leading cause of mortality in Nebraska in 2007, although the #1 cause (heart disease) accounted for just 40 more deaths and ranked behind cancer as the state's leading cause of death among men in both 2006 and 2007. By primary site, cancers of the lung, breast, prostate, colon and rectum accounted for just over half of Nebraska's cancer deaths in 2007.

Table 5 presents the number and rate of cancer deaths that occurred among Nebraska residents during 2007 and 2003-2007, for all sites combined and for specific

sites. The most recent U.S. cancer mortality rates, which cover the year 2006, are also included. Compared to the nation as a whole, cancer deaths in general and deaths from melanoma of the skin and cancers of the oral cavity, liver, cervix, and stomach occurred significantly less often in Nebraska in 2007, while brain cancer deaths occurred significantly more often. Table 6 presents the number of cancer deaths and mortality rates for 2007 and 2003-2007 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 1998-2007. Table 8 presents the number of Nebraska cancer deaths during 2003-2007 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 (1995-2007)**

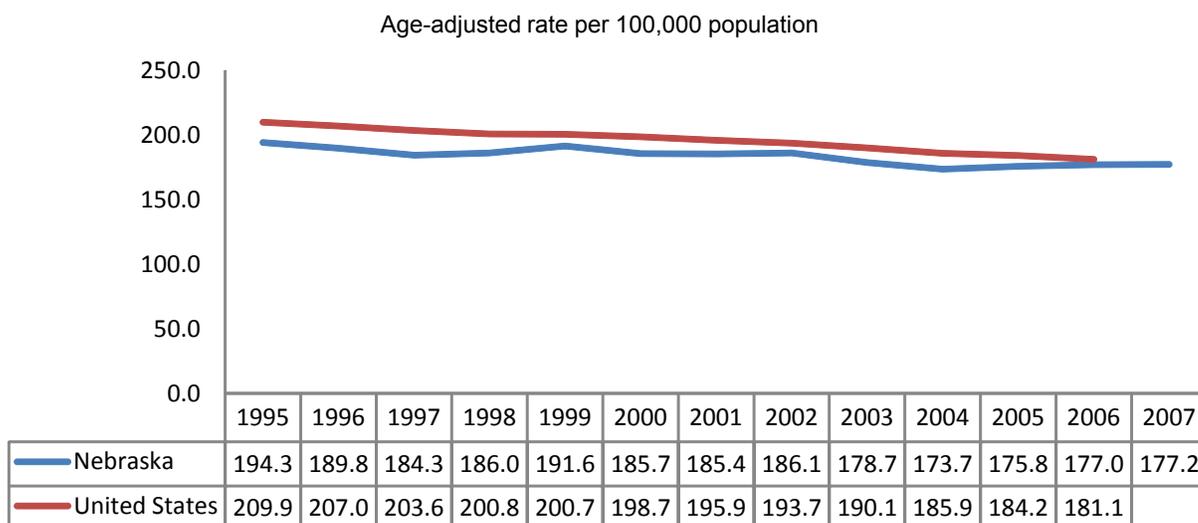


TABLE 5: Cancer Mortality
Number of Deaths and Rates, by Site and Gender
 Nebraska (2007 and 2003-2007) and US (2006)

SITE	NEBRASKA 2007						NEBRASKA 2003-2007						US 2006		
	MALE NO.	RATE	FEMALE NO.	RATE	TOTAL NO.	RATE	MALE NO.	RATE	FEMALE NO.	RATE	TOTAL NO.	RATE	MALE RATE	FEMALE RATE	TOTAL RATE
All Sites	1,800	217.0	1,677	150.0	3,477	177.2	8,779	218.5	8,077	148.4	16,856	176.8	221.1	153.7	181.1
Oral Cavity & Pharynx	20	2.4	16	1.4	36	1.8	120	2.9	69	1.3	189	2.0	3.8	1.4	2.5
Esophagus	65	7.6	13	1.2	78	4.1	332	8.1	76	1.4	408	4.4	7.9	1.7	4.4
Stomach	30	3.6	22	1.9	52	1.7	143	3.5	111	2.0	254	2.7	5.0	2.7	3.7
Colon & Rectum (Colorectal)	173	20.7	200	16.3	373	18.5	925	23.1	928	15.7	1,853	18.9	20.5	14.5	17.1
Liver & Intra- hepatic Bile Duct	51	6.0	23	2.0	74	3.9	239	5.8	122	2.3	361	3.9	7.7	3.3	5.3
Pancreas	98	11.7	110	10.0	208	10.7	490	12.1	457	8.4	947	9.9	12.4	9.5	10.8
Lung & Bronchus	545	65.5	394	36.2	939	48.8	2,641	65.4	1,858	35.6	4,499	48.2	67.5	40.2	51.7
Melanoma of the Skin	26	3.0	12	1.2	38	2.0	162	3.9	92	1.8	254	2.7	4.1	1.7	2.7
Breast	2	0.3	232	21.6	234	11.9	15	0.4	1,195	22.5	1,210	12.6	0.3	23.5	13.2
Uterine Cervix	---	---	15	1.5	---	---	---	---	83	1.7	---	---	---	2.4	---

TABLE 5: Cancer Mortality (Continued)
Number of Deaths and Rates, by Site and Gender
Nebraska (2007 and 2003-2007) and US (2006)

SITE	NEBRASKA 2007						NEBRASKA 2003-2007						US 2006		
	MALE NO.	MALE RATE	FEMALE NO.	FEMALE RATE	TOTAL NO.	TOTAL RATE	MALE NO.	MALE RATE	FEMALE NO.	FEMALE RATE	TOTAL NO.	TOTAL RATE	MALE RATE	FEMALE RATE	TOTAL RATE
Uterine Corpus & Unspecified (Endometrium)	---	---	59	5.3	---	---	---	---	279	5.1	---	---	---	4.2	---
Ovary	---	---	80	7.2	---	---	---	---	443	8.4	---	---	---	8.5	---
Prostate	197	24.8	---	---	---	---	940	24.5	---	---	---	---	23.6	---	---
Urinary Bladder	53	6.6	30	2.5	83	4.1	259	6.7	125	2.1	384	3.9	7.6	2.2	4.3
Brain & Other Nervous System	58	6.9	46	4.5	104	5.7	244	5.8	208	4.1	452	4.9	5.1	3.4	4.2
Kidney & Renal Pelvis	42	5.1	35	3.2	77	4.0	250	6.1	182	3.3	432	4.5	5.7	2.6	4.0
Non-Hodgkin Lymphoma	80	9.7	74	6.3	154	7.7	360	9.1	356	6.2	716	7.4	8.4	5.4	6.7
Myeloma	36	4.3	40	3.7	76	3.9	159	4.0	166	3.0	325	3.4	4.4	2.9	3.5
Leukemia	73	8.8	60	5.2	133	6.8	394	9.9	301	5.3	695	7.2	9.6	5.4	7.2
Thyroid	2	0.3	6	0.5	8	0.4	12	0.3	23	0.4	35	0.4	0.5	0.5	0.5

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

Gender-specific rates are 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 (2007 and 2003-2007) and US (2006 and 2002-2006)

	<u>2007</u>		<u>2003-2007</u>	
	<u># Death</u>	<u>Rate</u>	<u># Deaths</u>	<u>Rate</u>
US	559,880 (2006)	181.2 (2006)	2,787,217 (2002-6)	186.9 (2002-6)
NEBRASKA	3,477	177.2	16,856	176.8
<u>COUNTY</u>				
ADAMS	65	155.7	343	173.8
ANTELOPE	13	113.8	75	▽140.4
ARTHUR	*	*	5	**
BANNER	*	*	8	156.1
BLAINE	0	---	8	196.8
BOONE	21	211.9	90	197.8
BOX BUTTE	29	219.1	131	191.0
BOYD	*	*	26	▽122.5
BROWN	14	236.5	49	166.5
BUFFALO	82	183.0	377	181.5
BURT	24	194.7	104	173.8
BUTLER	11	▼95.0	77	▼132.8
CASS	52	198.5	252	196.2
CEDAR	23	169.8	95	▽139.7
CHASE	11	165.9	41	▽126.3
CHERRY	17	199.7	67	155.7
CHEYENNE	17	132.8	101	157.3
CLAY	20	206.5	79	162.8
COLFAX	19	162.8	104	163.2
CUMING	15	▼100.4	115	152.6
CUSTER	33	174.6	143	165.2
DAKOTA	42	235.9	172	194.5
DAWES	25	236.8	105	200.2
DAWSON	42	159.5	213	164.8
DEUEL	*	*	38	237.7
DIXON	16	159.5	76	166.0
DODGE	108	218.7	452	184.3
DOUGLAS	851	186.4	4,202	▲190.9
DUNDY	7	175.6	34	167.4
FILLMORE	26	234.8	100	182.6
FRANKLIN	9	164.8	52	194.2
FRONTIER	8	194.2	28	140.0
FURNAS	15	180.7	72	159.7
GAGE	70	214.2	290	172.4
GARDEN	7	233.5	36	207.9
GARFIELD	*	*	28	147.9
GOSPER	*	*	19	126.0
GRANT	0	---	6	177.9
GREELEY	*	*	32	132.8
HALL	89	143.3	534	174.6
HAMILTON	18	149.1	88	153.1
HARLAN	9	115.2	54	160.8
HAYES	*	*	10	138.4
HITCHCOCK	9	174.3	44	183.5
HOLT	27	159.4	126	▽146.6
HOOKER	*	*	16	211.0
HOWARD	21	223.3	80	174.6

TABLE 6: Cancer (All Sites) Mortality (Continued)
Number of Deaths and Rates, by County of Residence
 Nebraska (2007 and 2003-2007) and US (2006 and 2002-2006)

COUNTY	2007		2003-2007	
	# Deaths	Rate	# Deaths	Rate
JEFFERSON	31	226.4	119	166.6
JOHNSON	13	153.9	68	168.3
KEARNEY	15	174.7	86	194.9
KEITH	31	258.0	115	192.1
KEYA PAHA	*	*	10	131.4
KIMBALL	10	166.4	67	215.3
KNOX	30	201.1	133	175.3
LANCASTER	438	178.7	2,079	176.8
LINCOLN	66	152.9	386	182.3
LOGAN	*	*	9	159.2
LOUP	*	*	11	211.7
McPHERSON	*	*	5	**
MADISON	74	187.1	329	161.5
MERRICK	19	174.5	92	164.7
MORRILL	16	227.8	65	184.3
NANCE	9	191.5	58	206.7
NEMAHA	14	149.8	77	152.8
NUCKOLLS	8	▼82.3	67	152.8
OTOE	43	199.1	193	178.8
PAWNEE	11	205.5	41	158.9
PERKINS	12	223.1	49	195.8
PHELPS	22	163.6	123	175.1
PIERCE	21	207.7	92	201.8
PLATTE	66	167.6	304	173.8
POLK	*	*	62	148.0
RED WILLOW	29	166.8	153	192.7
RICHARDSON	28	189.9	132	183.6
ROCK	6	209.5	24	168.5
SALINE	26	157.3	148	174.0
SARPY	186	187.6	812	176.7
SAUNDERS	52	209.7	227	184.6
SCOTTS BLUFF	68	140.1	393	164.4
SEWARD	37	179.8	203	198.9
SHERIDAN	12	115.9	74	159.2
SHERMAN	11	235.9	48	189.2
SIOUX	*	*	13	138.1
STANTON	9	113.2	59	169.2
THAYER	20	177.1	86	160.9
THOMAS	0	---	1	**
THURSTON	17	250.5	87	▲252.1
VALLEY	15	185.6	62	▲157.4
WASHINGTON	38	168.7	192	177.7
WAYNE	10	▽97.2	62	▼122.8
WEBSTER	17	241.7	67	186.8
WHEELER	0	---	10	207.6
YORK	39	195.3	166	170.2

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

▽ county rate is significantly lower than the state rate (95% confidence level)

▼ county rate is significantly lower than the state rate (99% confidence level)

△ county rate is significantly higher than the state rate (95% confidence level)

▲ county rate is significantly higher than the state rate (99% confidence level)

TABLE 7: Cancer Mortality
Number of Deaths and Rates, All Sites and Top Ten Sites, by Race and Ethnicity
Nebraska (1998-2007)

Rank	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	32,393	180.4	All	1,038	245.3	All	155	207.5	All	139	111.9	All	389	113.1
1	Lung & Bronchus	8,567	48.7	Lung & Bronchus	322	76.0	Lung & Bronchus	41	59.4	Lung & Bronchus	37	30.9	Lung & Bronchus	65	20.8
2	Colon & Rectum (Colorectal)	3,726	20.2	Colon & Rectum (Colorectal)	115	29.0	Female Breast	11	20.0	Liver & Intrahepatic Bile Duct	17	9.6	Colon & Rectum (Colorectal)	39	12.0
3	Female Breast	2,318	23.1	Female Breast	93	35.8	Colon & Rectum (Colorectal)	11	14.6	Colon & Rectum (Colorectal)	14	11.5	Liver & Intrahepatic Bile Duct	29	9.6
4	Prostate	1,853	25.6	Pancreas	59	14.1	Kidney & Renal Pelvis	11	14.1	Pancreas	11	8.9	Stomach	23	6.4
5	Pancreas	1,769	9.8	Prostate	54	39.6	Ovary	9	19.6	Female Breast	9	12.6	Female Breast	22	11.9
6	Non-Hodgkin Lymphoma	1,450	8.0	Leukemia	36	8.0	Pancreas	7	8.4	Stomach	7	3.3	Pancreas	19	6.3
7	Leukemia	1,395	7.7	Liver & Intrahepatic Bile Duct	33	6.9	Non-Hodgkin Lymphoma	6	11.6	Non-Hodgkin Lymphoma	6	6.9	Leukemia	19	4.5
8	Brain & Other Nervous System	891	5.2	Myeloma	30	7.8	Liver & Intrahepatic Bile Duct	6	6.1	Kidney & Renal Pelvis	5	*	Non-Hodgkin Lymphoma	15	4.4
9	Ovary	853	8.6	Stomach	26	6.0	Several sites	5	*	Brain & Other Nervous System	4	*	Prostate	14	13.4
10	Kidney & Renal Pelvis	815	4.6	Non-Hodgkin Lymphoma	23	5.6	---	---	---	Several sites	3	*	Kidney & Renal Pelvis	14	3.1

Rates are per 100,000 population, excluding gender-specific sites (prostate, female breast, cervix, ovary), which are 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 (2003-2007)

	0-17 Yrs.		18-44 Yrs.		45-64 Yrs.		65 Yrs and Older		TOTAL	
	No.	%	No.	%	No.	%	No.	%	No.	%
All Sites	60	0.4	445	2.6	3,887	23.1	12,464	73.9	16,856	100.0
Oral Cavity & Pharynx	2	1.1	6	3.2	58	30.7	123	65.1	189	100.0
Esophagus	0	0.0	7	1.7	117	28.7	284	69.6	408	100.0
Stomach	0	0.0	9	3.5	64	25.2	181	71.3	254	100.0
Colon & Rectum (Colorectal)	0	0.0	29	1.6	372	20.1	1,452	78.4	1,853	100.0
Liver & Intrahepatic Bile Duct	4	1.1	11	3.1	104	28.8	242	67.0	361	100.0
Pancreas	0	0.0	15	1.6	225	23.8	707	74.7	947	100.0
Lung & Bronchus	1	<0.1	61	1.4	1,117	24.8	3,320	73.8	4,499	100.0
Melanoma of the Skin	0	0.0	24	9.5	81	31.9	149	58.7	254	100.0
Female Breast	0	0.0	59	4.9	380	31.8	756	63.3	1,195	100.0
Uterine Cervix	0	0.0	12	14.5	38	45.8	33	39.8	83	100.0
Uterine Corpus & Unspecified (Endometrium)	0	0.0	5	1.8	58	20.8	216	77.4	279	100.0
Ovary	0	0.0	13	2.9	118	26.6	312	70.4	443	100.0
Prostate	0	0.0	0	0.0	69	7.3	871	92.7	940	100.0
Urinary Bladder	0	0.0	3	0.8	51	13.3	330	85.9	384	100.0
Brain & Other Nervous System	28	6.2	43	9.5	146	32.3	235	52.0	452	100.0
Kidney & Renal Pelvis	4	0.9	9	2.1	108	25.0	311	72.0	432	100.0
Non-Hodgkin Lymphoma	0	0.0	13	1.8	118	16.5	585	81.7	716	100.0
Myeloma	0	0.0	2	0.6	63	19.4	260	80.0	325	100.0
Leukemia	8	1.2	35	5.0	110	15.8	542	78.0	695	100.0

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

**INCIDENCE AND MORTALITY
FOR SELECTED SITES**

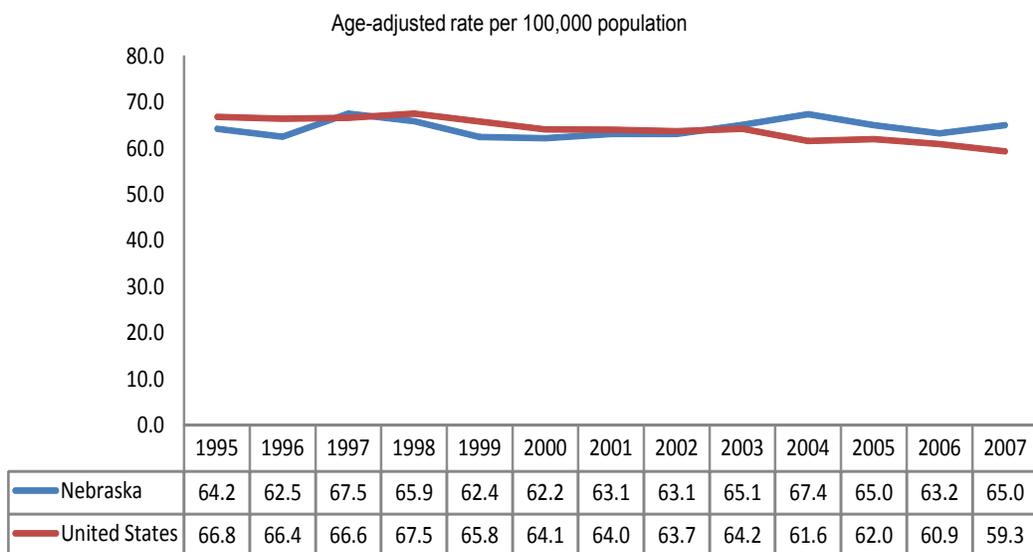
Lung and Bronchus

Although lung cancer was only the third most frequently diagnosed cancer among Nebraska residents in 2007, 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 (2003-7), lung cancer has averaged over 1,200 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 causes about 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 lung cancer although it takes 10-15 years for an ex-smoker's risk to drop to the level of a lifelong non-smoker. People who do not smoke but who breathe the smoke of others may also be at a higher risk for lung cancer. Exposure to radon (a radioactive gas) and asbestos are lung cancer risk factors for both smokers and non-smokers, although people who smoke are at far greater risk than those who do not.

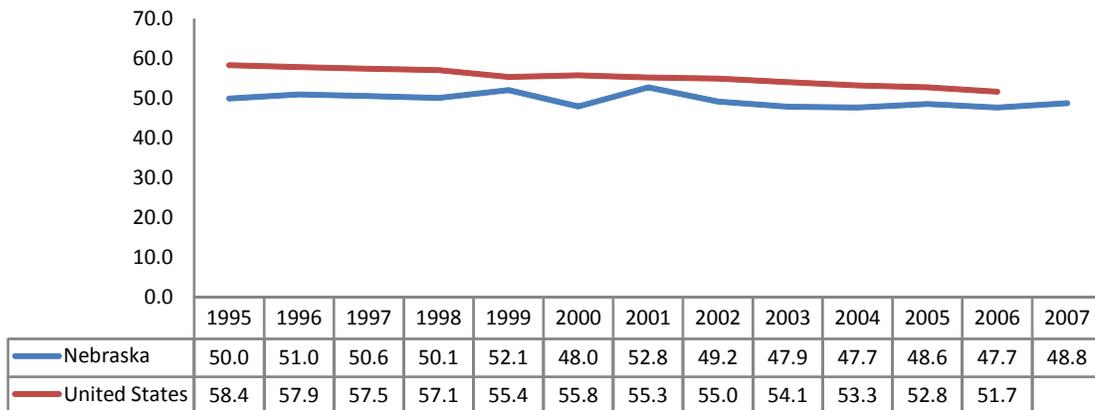
Lung and bronchus cancer incidence and mortality statistics by county of residence are presented in Appendix I (Table 9).

**Lung and Bronchus Cancer
Incidence Rates, by Year**
Nebraska and the United States (1995-2007)

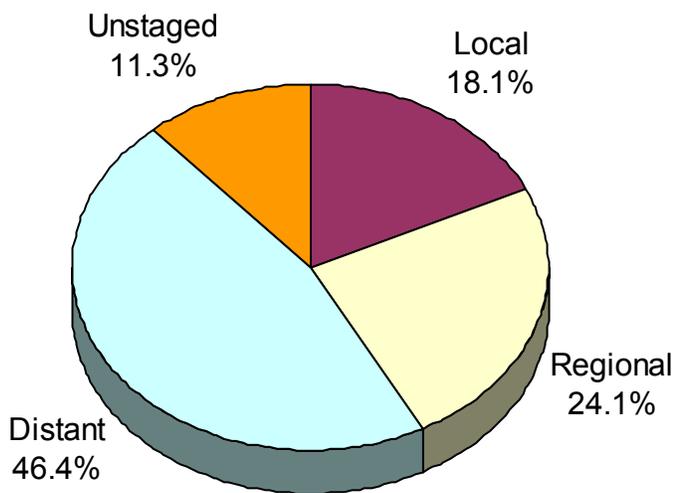


Lung and Bronchus Cancer Mortality Rates, by Year Nebraska and the United States (1995-2007)

Age-adjusted rate per 100,000 population



Lung and Bronchus Cancer Percentage of Cases, by Stage of Disease at Diagnosis Nebraska (2003-2007)



Breast (Female only)

Breast cancer is the most common malignancy diagnosed among women and the second most frequent cause of female cancer deaths. Between 2003 and 2007, over 6,000 Nebraska women were diagnosed with malignant breast cancer (and another 1,300 were diagnosed with in situ breast cancer) and almost 1,200 women died from it. Since 1990, the rate of breast cancer deaths in Nebraska and the U.S. has declined significantly. 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 is an important risk factor for breast cancer, with fewer than 20% of all malignancies occurring among women under the age of 50. 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

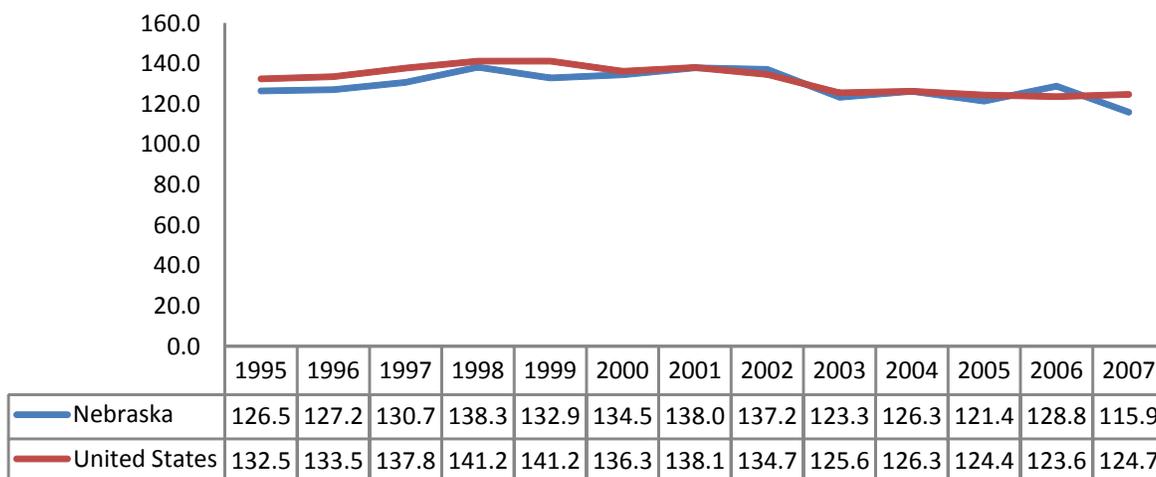
having a first child after age 30, and for post-menopausal women, obesity and long-term hormone replacement therapy.

Periodic screening for breast cancer is known to save lives, but there is now some controversy about how and when to screen. The ACS recommends that women 40 and older have an annual mammogram, but the U.S. Preventive Services Task Force (USPSTF) recommends mammography only for women 50-74 on an every other year schedule. The ACS guidelines also include a clinical breast exam every three years for women in their 20s and 30s and every year for women 40 and older, while the USPSTF does not include clinical breast exams in its recommendations. For women who have an increased risk of breast cancer, the ACS recommends magnetic resonance imaging (MRI) as an additional screening test.

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

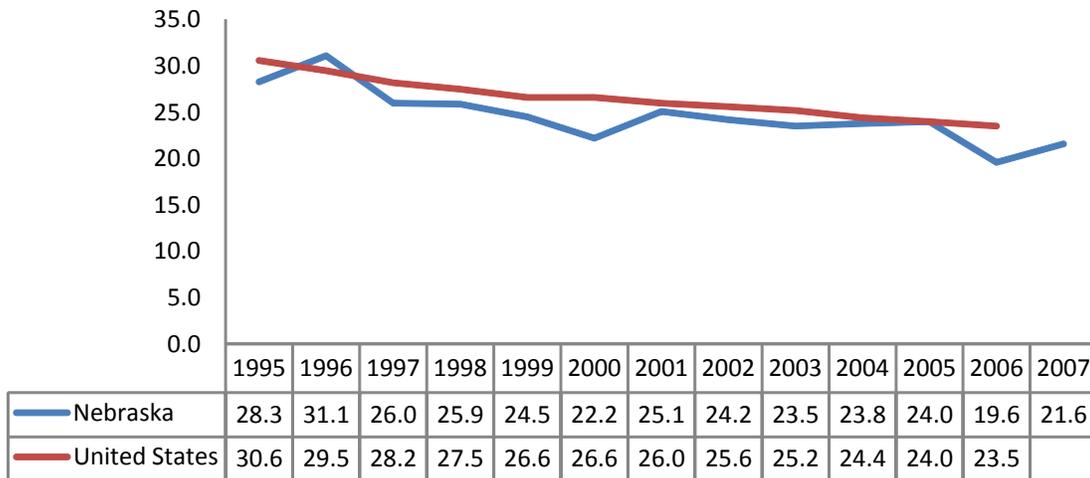
Female Breast Cancer Incidence Rates, by Year Nebraska and the United States (1995-2007)

Age-adjusted rate per 100,000 female population

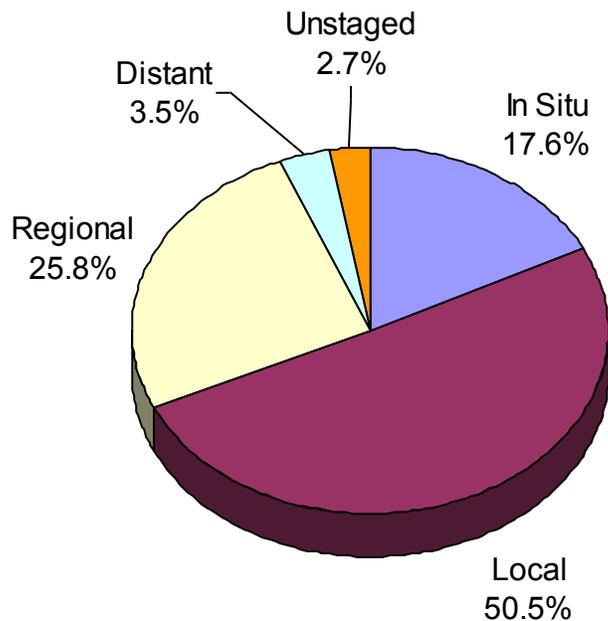


Female Breast Cancer Mortality Rates, by Year Nebraska and the United States (1995-2007)

Age-adjusted rate per 100,000 female population



Female Breast Cancer Percentage of Cases, by Stage of Disease at Diagnosis Nebraska (2003-2007)



Colon and Rectum (Colorectal)

In 2007, colorectal cancer was the fourth most frequently diagnosed cancer among Nebraska residents, accounting for 1,050 new cases. It was also the second leading cause of cancer mortality in the state, accounting for 373 deaths.

The risk of developing colorectal cancer increases with age. Seven of every ten colorectal cancer cases that occurred in Nebraska during 2003-7 were at least 65 years of age at diagnosis. 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.

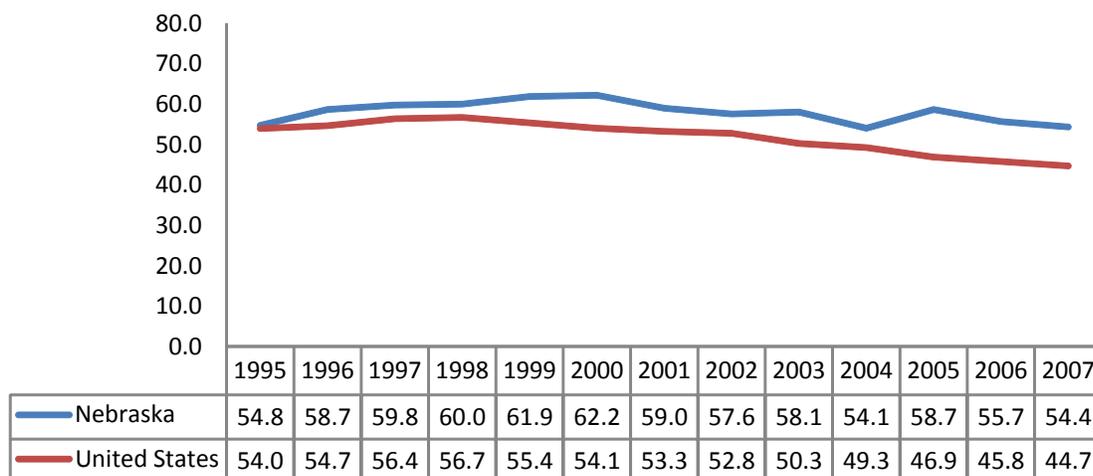
At present, screening for asymptomatic polyps and tumors remains the best method for preventing colorectal cancer cases and

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)

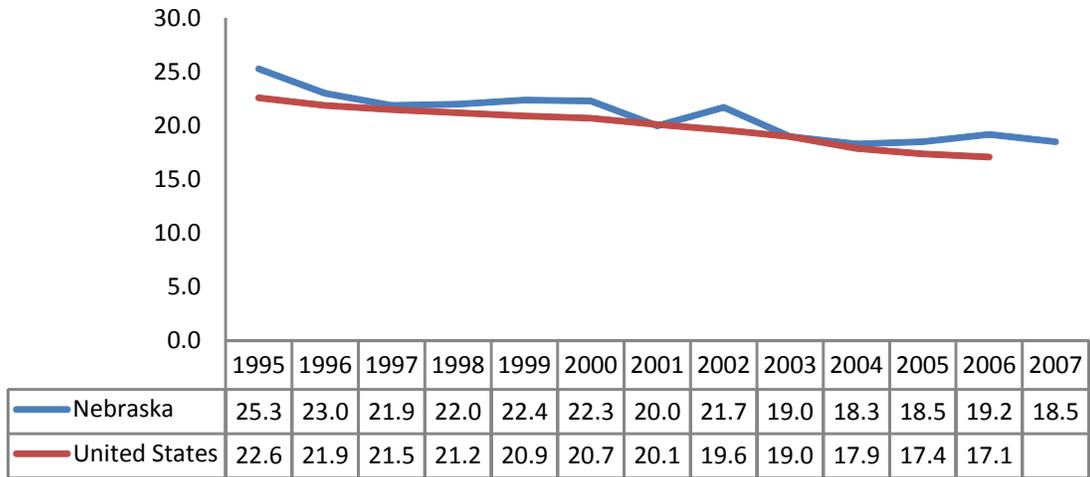
Colorectal Cancer Incidence Rates, by Year Nebraska and the United States (1995-2007)

Age-adjusted rate per 100,000 population

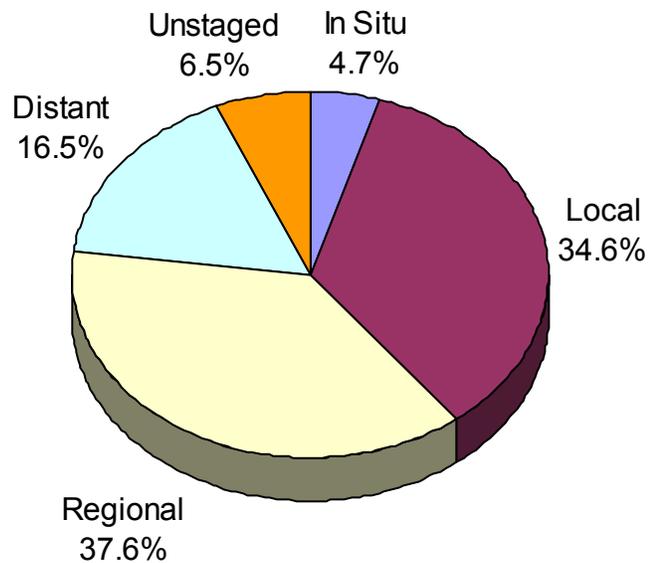


**Colorectal Cancer
Mortality Rates, by Year
Nebraska and the United States (1995-2007)**

Age-adjusted rate per 100,000 population



**Colorectal Cancer
Percentage of Cases, by Stage of Disease at Diagnosis
Nebraska (2003-2007)**



Prostate

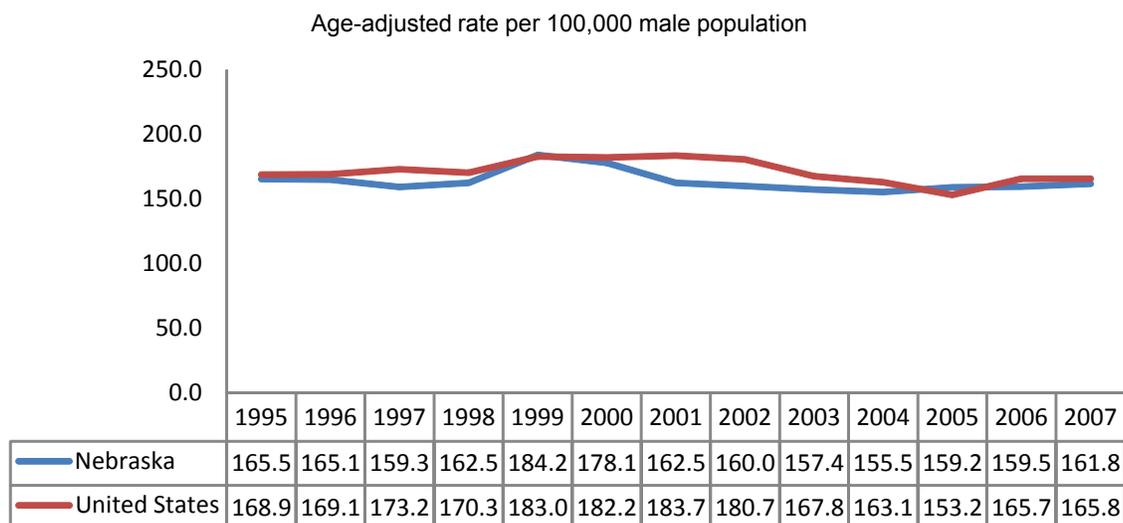
With 1,400 diagnoses in 2007, prostate cancer was the most common cancer among Nebraska men, accounting for almost 30% of all new cancer cases. Although survival rates are quite high, it is also the second leading cause of cancer deaths among men, and was responsible for over 900 deaths in Nebraska between 2003 and 2007. Since the mid-1990s, prostate cancer death rates have declined substantially, 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 all diagnoses in Nebraska during 2003-2007) and African-Americans. Men with a close relative (father, brother, or son) who have had prostate cancer, especially at a young age, are also at increased risk.

The most current ACS guidelines on prostate cancer screening recommend that health care providers begin to discuss the benefits and limitations of screening and treatment with men who are 50 years old, have a life expectancy of at least 10 years, and have an average risk of developing prostate cancer. This discussion should begin at age 45 for men at high risk (African-Americans and men with a father, brother, or son diagnosed with prostate cancer before age 65) and at age 40 for men of higher risk (men with several first-degree relatives diagnosed before age 65). For men who choose to be screened, the ACS recommends a prostate-specific antigen (PSA) test every year (less frequently depending on results) and an optional digital rectal exam.

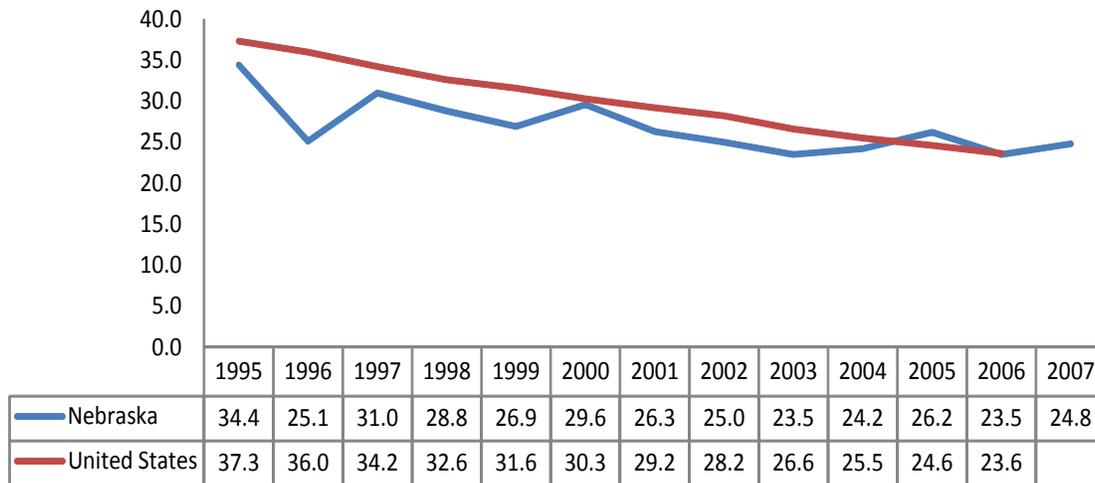
Prostate cancer incidence and mortality statistics by county of residence are presented in Appendix IV (Table 12).

**Prostate Cancer
Incidence Rates, by Year
Nebraska and the United States (1995-2007)**

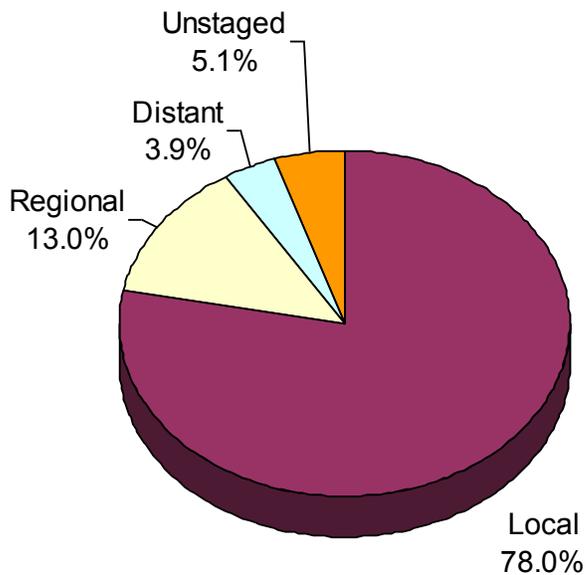


**Prostate Cancer
Mortality Rates, by Year
Nebraska and the United States (1995-2007)**

Age-adjusted rate per 100,000 male population



**Prostate Cancer
Percentage of Cases, by Stage of Disease at Diagnosis
Nebraska (2003-2007)**



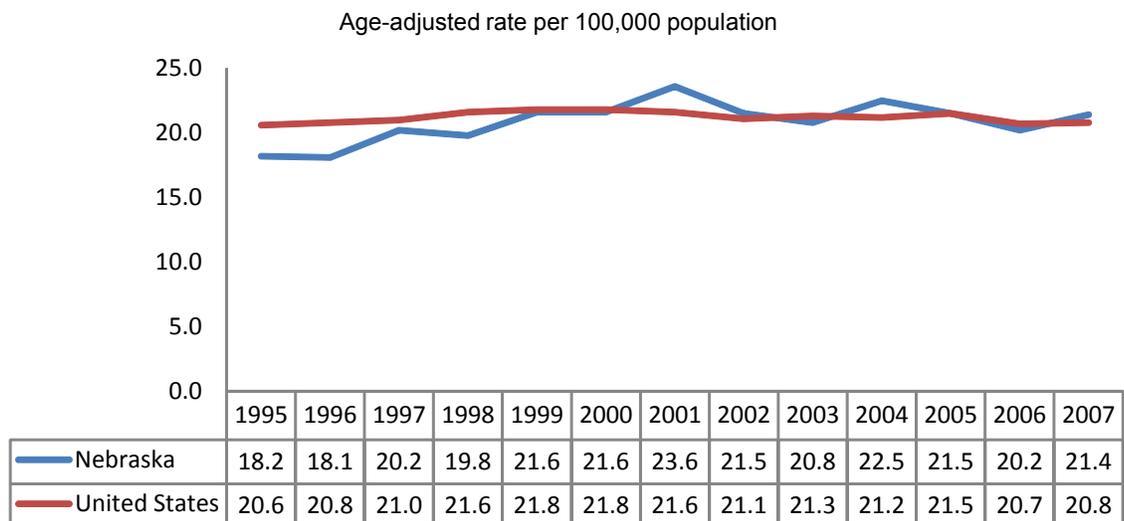
Urinary Bladder

Between 2003 and 2007, over 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 (384 Nebraska residents died from it during 2003-2007), 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 2003-2007 were at least 65 years old when diagnosed.

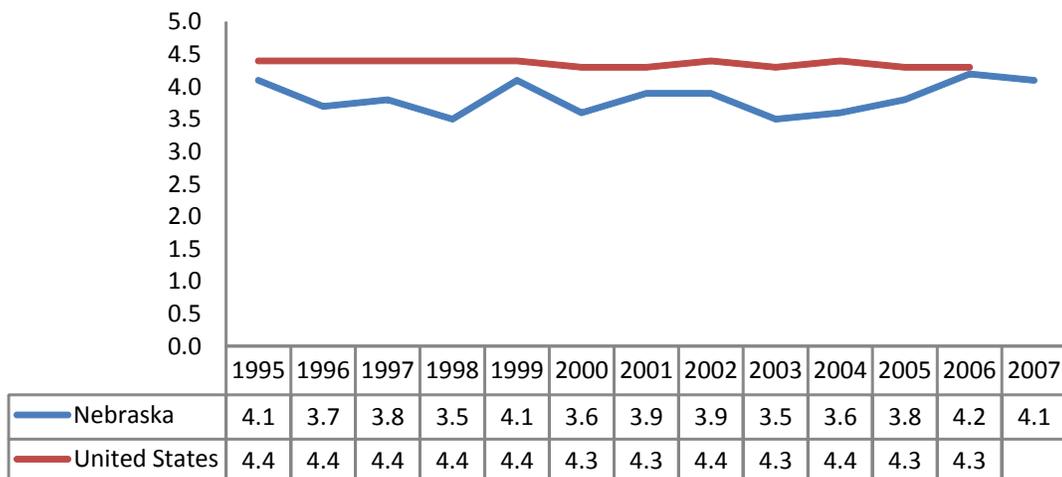
Urinary bladder cancer incidence and mortality statistics by county of residence are presented in Appendix V (Table 13).

**Urinary Bladder Cancer
Incidence Rates, by Year**
Nebraska and the United States (1995-2007)

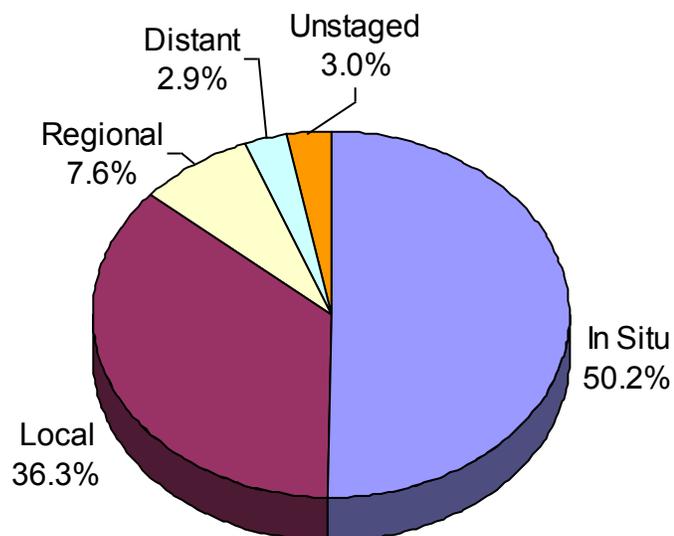


Urinary Bladder Cancer Mortality Rates, by Year Nebraska and the United States (1995-2007)

Age adjusted rate per 100,00 population



Urinary Bladder Cancer Percentage of Cases, by Stage of Disease at Diagnosis Nebraska (2003-2007)



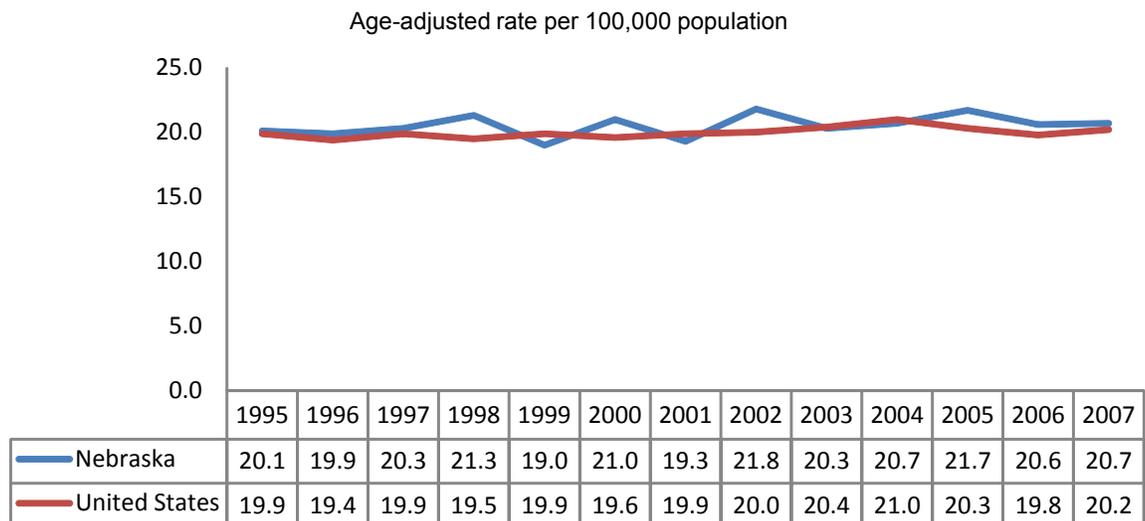
Non-Hodgkin Lymphoma

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 2003 and 2007 (for Hodgkin Disease, the comparable figures are 287 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.

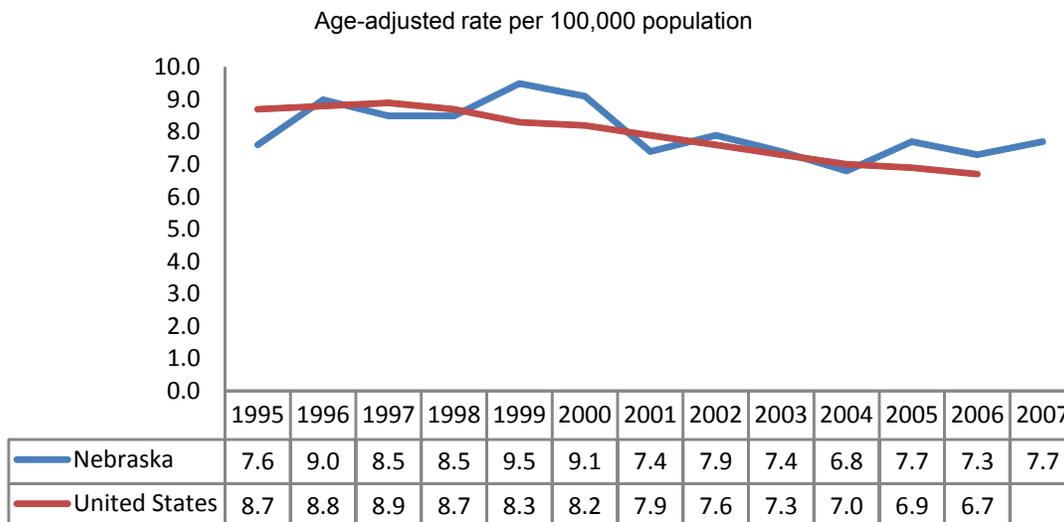
The causes of Non-Hodgkin lymphoma are unknown, although there is evidence that viral exposures and reduced immune function are associated with the disease. People whose immune systems have been suppressed by drugs, particularly those who have received an organ transplant, are at high risk of Non-Hodgkin 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).

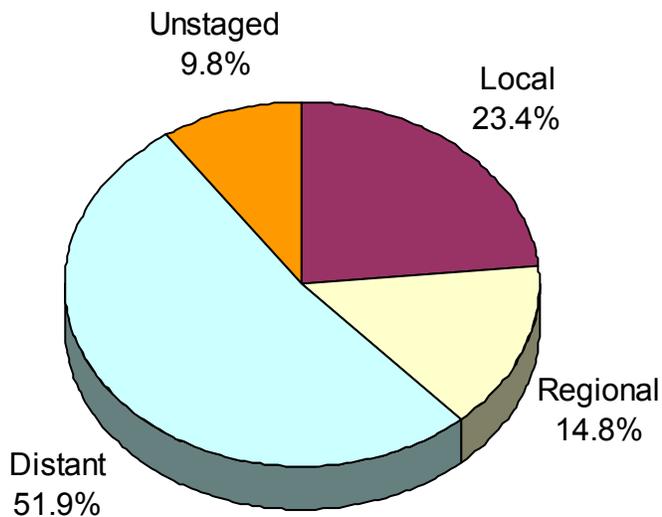
**Non-Hodgkin Lymphoma
Incidence Rates, by Year**
Nebraska and the United States (1995-2007)



Non-Hodgkin Lymphoma Mortality Rates, by Year Nebraska and the United States (1995-2007)



Non-Hodgkin Lymphoma Percentage of Cases, by Stage of Disease at Diagnosis Nebraska (2003-2007)



Leukemia

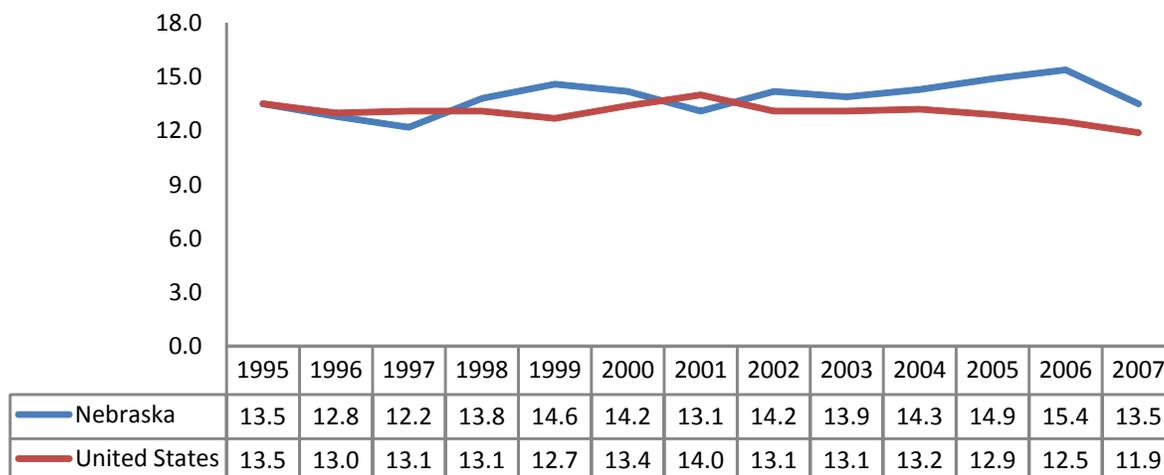
Between 2003 and 2007, leukemia accounted for more than 1,300 diagnoses and almost 700 deaths among Nebraska residents. Leukemia is the most common type of malignancy among children and adolescents, accounting for one of every four malignant cancers diagnosed among Nebraska residents under the age of 18. At the same time, however, more than six of every ten leukemia cases that occurred in Nebraska between 2003 and 2007 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.

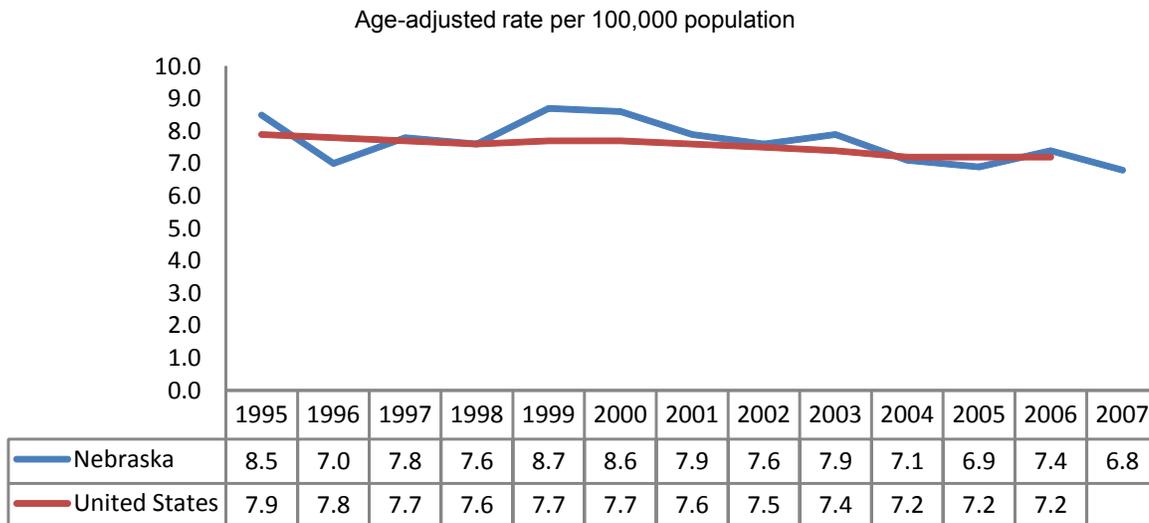
Leukemia incidence and mortality statistics by county of residence are presented in Appendix VII (Table 15).

**Leukemia
Incidence Rates, by Year
Nebraska and the United States (1995-2007)**

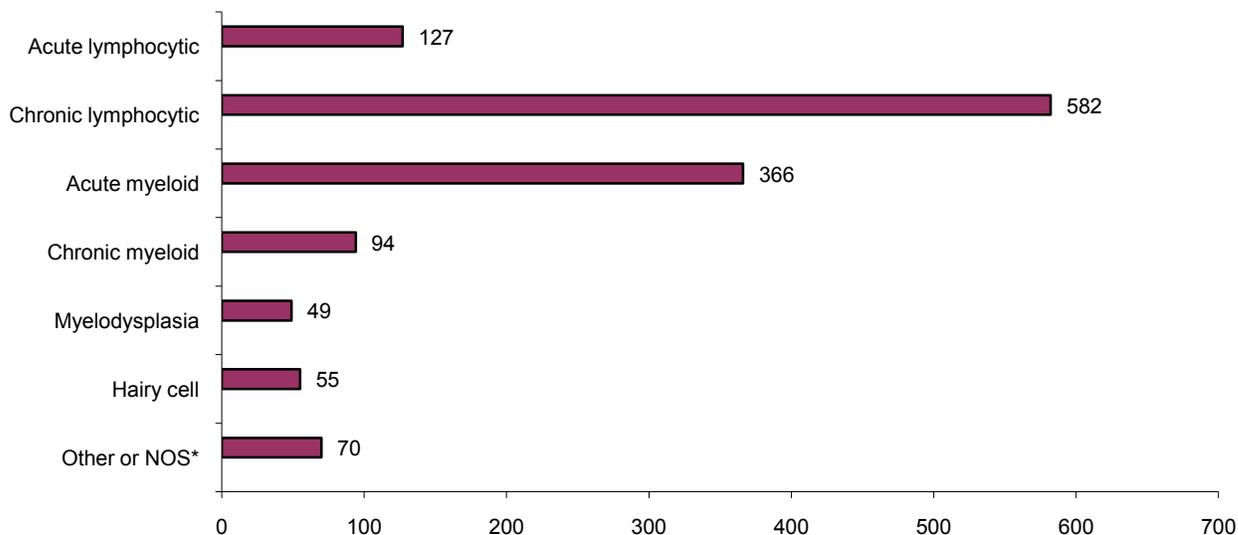
Age-adjusted rate per 100,000 population



**Leukemia
Mortality Rates, by Year
Nebraska and the United States (1995-2007)**



**Leukemia
Number of Cases, by Histologic Type
Nebraska (2003-2007)**



*includes plasma cell leukemia (3 cases); mast cell leukemia (1 case); acute biphenotypic leukemia (1 case); chronic eosinophilic leukemia (3 cases); acute leukemia, NOS (24 cases); lymphoid leukemia, NOS (4 cases); myeloid leukemia, NOS (15 cases); leukemia, NOS (19 cases)

Abbreviation: NOS, not otherwise specified

Kidney and Renal Pelvis

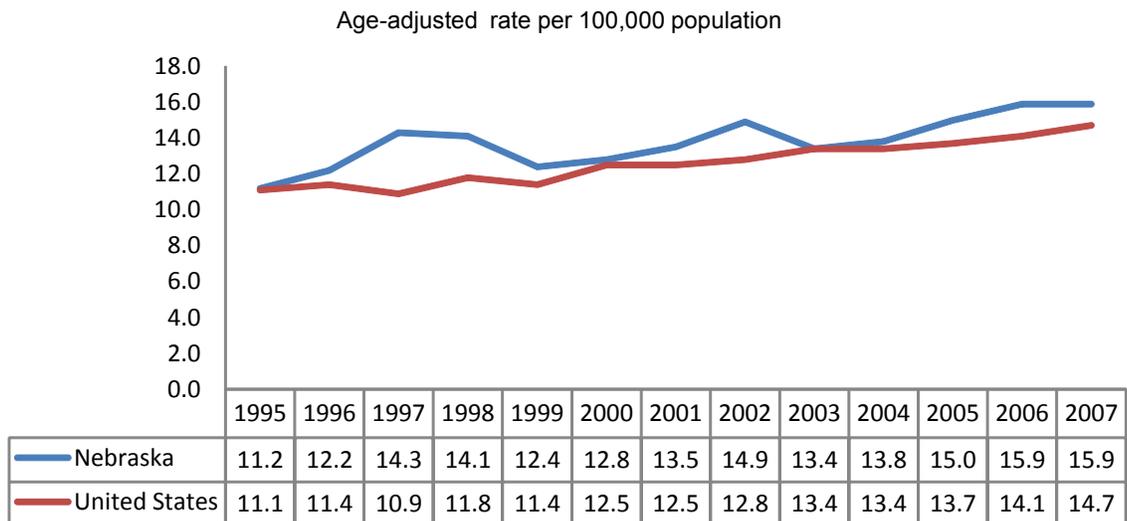
Cancers of the kidney and renal pelvis accounted for more than 1,300 diagnoses in Nebraska between 2003 and 2007, and also accounted for more than 400 deaths in Nebraska during the same years. State and national trends since 1990 show a significant increase in the rate of diagnosis of these cancers, 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.

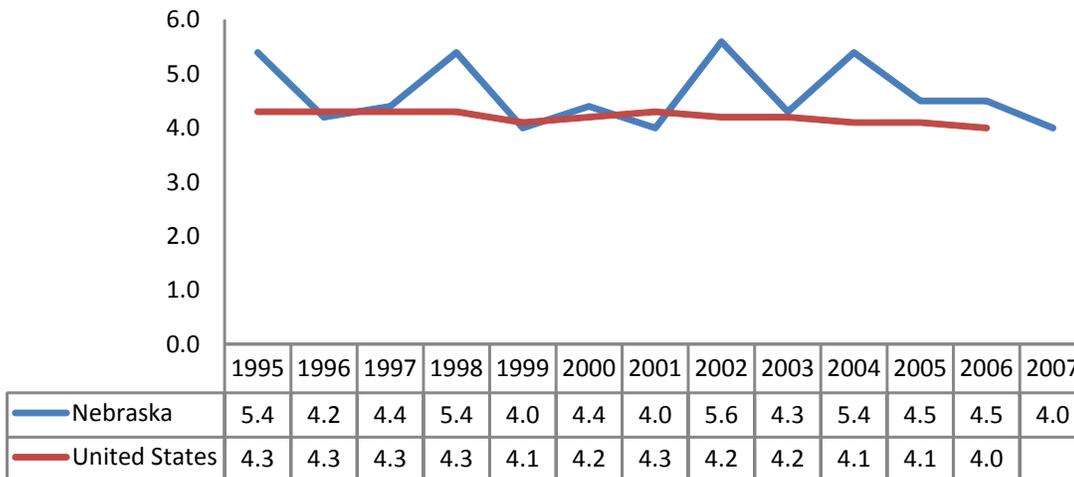
Kidney and renal pelvis cancer incidence and mortality statistics by county of residence are presented in Appendix VIII (Table 16).

**Kidney and Renal Pelvis Cancer
Incidence Rates, by Year**
Nebraska and the United States (1995-2007)

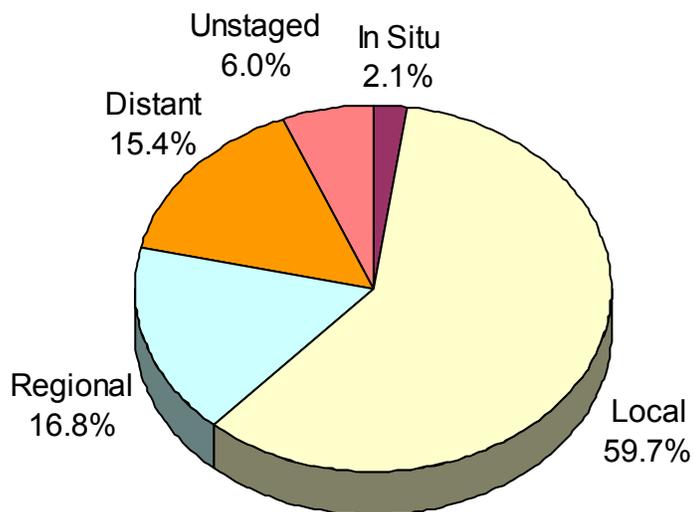


Kidney and Renal Pelvis Cancer Mortality Rates, by Year Nebraska and the United States (1995-2007)

Age-adjusted rate per 100,000 population



Kidney and Renal Pelvis Cancer Percentage of Cases, by Stage of Disease at Diagnosis Nebraska (2003-2007)



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 80% of all skin cancer deaths. In Nebraska, melanomas of the skin accounted for more than 1,500 diagnoses and 200 deaths between 2003 and 2007. 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%.

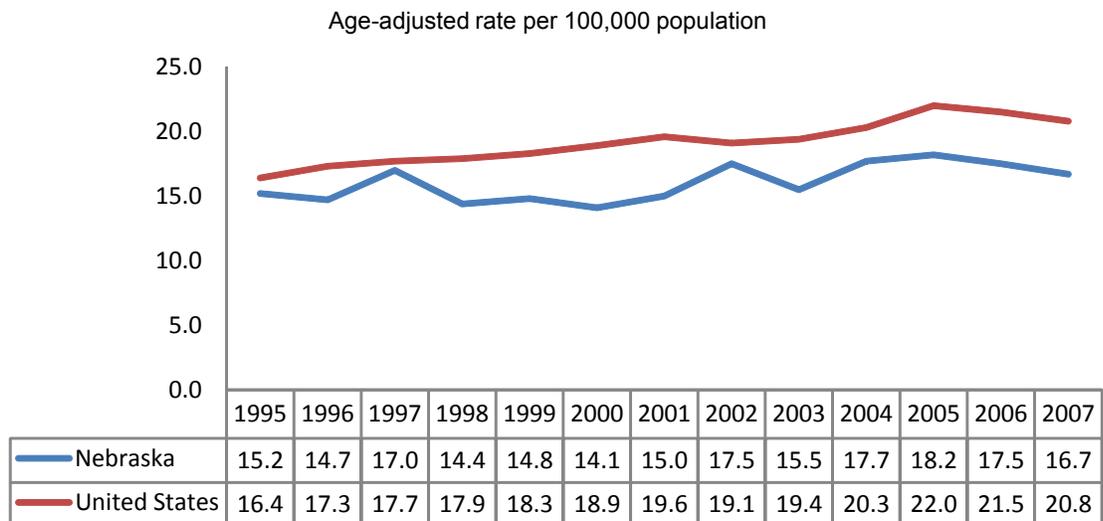
Melanoma is related to exposure to ultraviolet radiation (most of which comes from the sun), particularly exposures during childhood that resulted in severe sunburns. The risk of developing melanoma is particularly high among people with light skin. Sun exposure is not the only risk factor, however: 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.

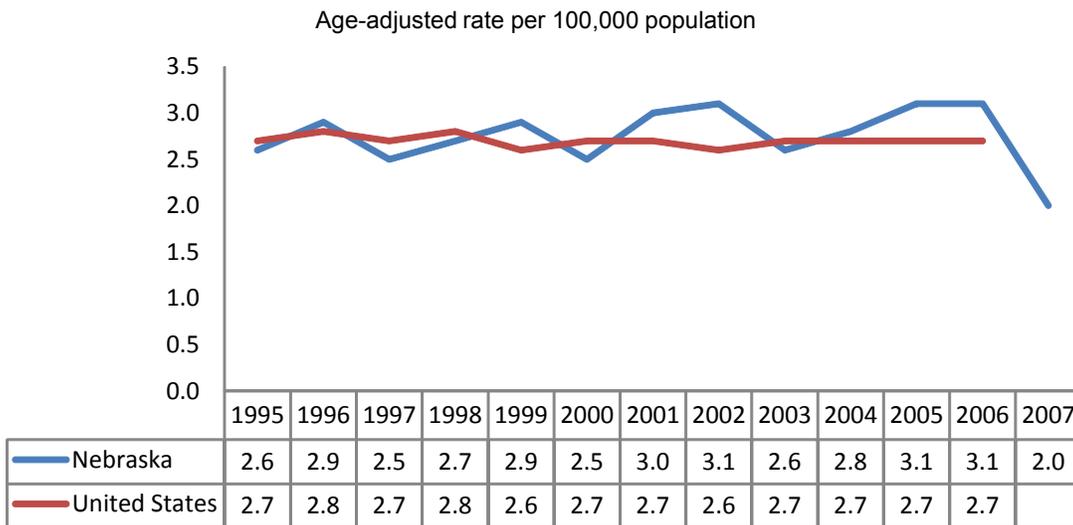
Skin melanomas are among the most preventable and treatable of all cancers. Wearing protective clothing and using sunscreen are the best methods for preventing the disease, and children in particular should have such protection. In addition, early detection can greatly reduce the risk of melanoma mortality. 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).

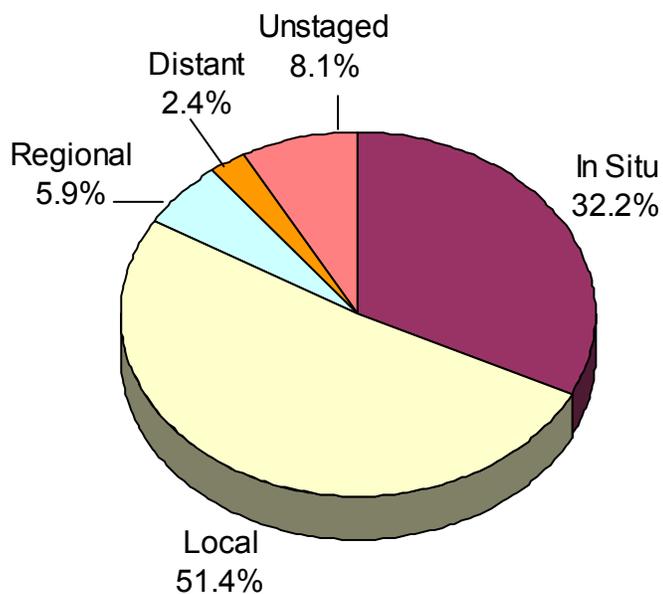
**Melanoma of the Skin
Incidence Rates, by Year**
Nebraska and the United States (1995-2007)



**Melanoma of the Skin
Mortality Rates, by Year
Nebraska and the United States (1995-2007)**



**Melanoma of the Skin
Percentage of Cases, by Stage of Disease at Diagnosis
Nebraska (2003-2007)**



Esophagus

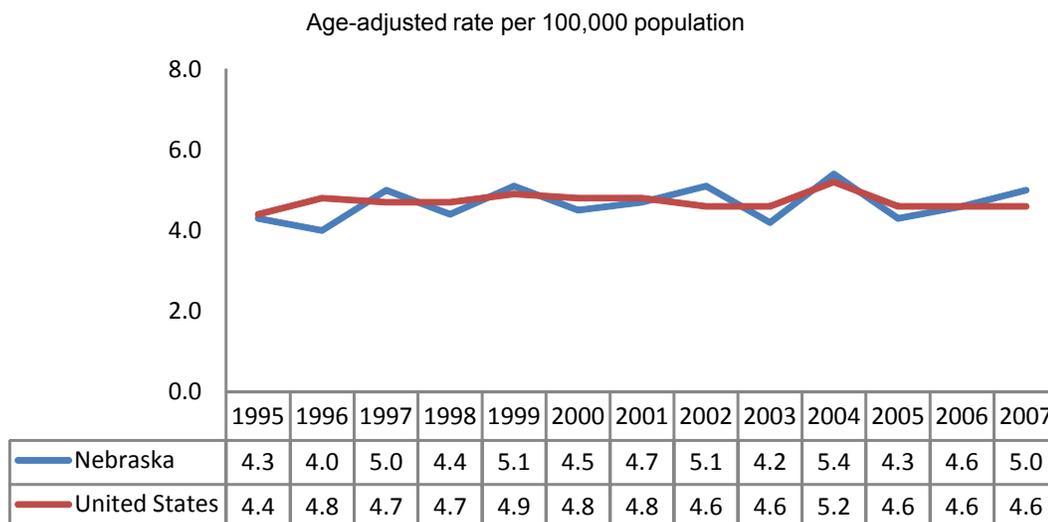
Between 2003 and 2007, cancer of the esophagus accounted for 436 malignant cases and 408 deaths among Nebraska residents. Esophageal cancer is diagnosed much more frequently among men than women, by a ratio of more than 3-to-1. Because most cases are not diagnosed in the earliest stages of the disease, the chances of survival for people with cancer of the esophagus are relatively poor, although the odds have been improving in recent years. However, the most current national statistics show that fewer than 20% of all cases remain alive at least five years after diagnosis.

There are two main types of esophageal cancer, squamous cell carcinoma and adenocarcinoma. Smoking is an important

risk factor for both of these types of esophageal cancer. Alcohol consumption is a risk factor for adenocarcinoma, with the effects of smoking and alcohol together being greater than either one separately. Another risk factor for adenocarcinoma is having Barrett's esophagus, a condition resulting from the escape of stomach acid into the esophagus (also known as reflux). During the past 20 years, Nebraska and national data have shown a large increase in the incidence of adenocarcinoma. As a result, squamous cell carcinoma, which used to be the predominant form of esophageal cancer, has been overtaken by adenocarcinoma, which now accounts for about 70% of all diagnoses in Nebraska.

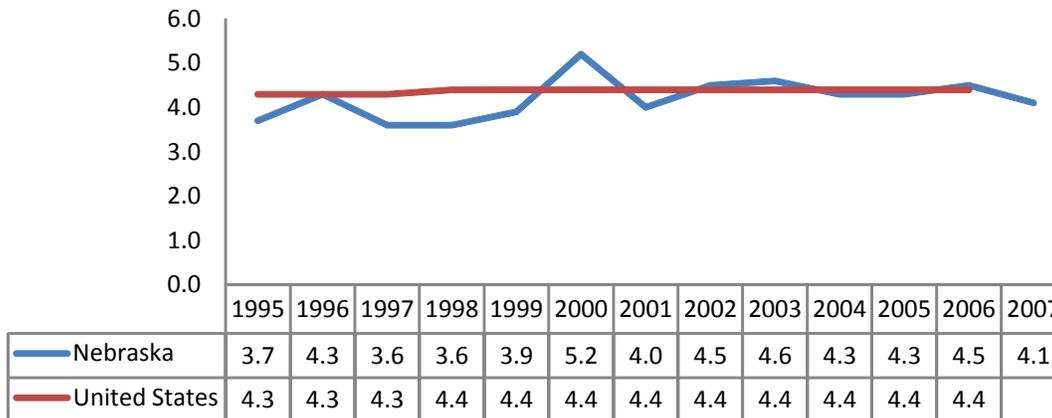
Esophageal cancer incidence and mortality statistics are presented in Appendix X (Table 18)

**Esophageal Cancer
Incidence Rates, by Year**
Nebraska and the United States (1995-2007)

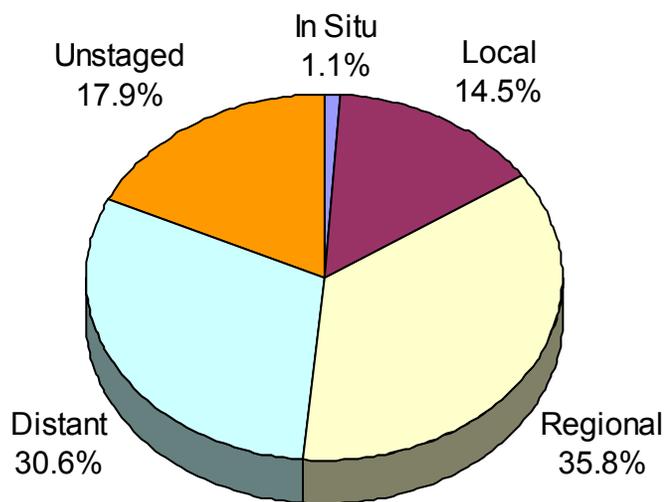


Esophageal Cancer Mortality Rates, by Year Nebraska and the United States (1995-2007)

Age-adjusted rate per 100,000 population



Esophageal Cancer Percentage of Cases, by Stage of Disease at Diagnosis Nebraska (2003-2007)



APPENDICES

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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 (2003-2007) and US (2003-2007 [incidence] & 2002-2006 [mortality])**

	<u>Incidence</u>		<u>Mortality</u>	
	<u># Cases</u>	<u>Rate</u>	<u># Deaths</u>	<u>Rate</u>
US	Not available	61.6	791,442	53.4
NEBRASKA	6,035	65.2	4,499	48.2
<u>COUNTY</u>				
ADAMS	125	66.6	102	54.5
ANTELOPE	24	45.6	16	▽30.4
ARTHUR	1	**	2	**
BANNER	3	**	2	**
BLAINE	0	---	1	**
BOONE	26	60.6	19	39.7
BOX BUTTE	35	52.8	31	46.1
BOYD	14	70.1	11	51.7
BROWN	12	44.7	19	68.2
BUFFALO	128	64.9	91	44.7
BURT	41	70.7	31	51.6
BUTLER	23	▽42.5	15	▼25.9
CASS	109	△83.1	76	58.4
CEDAR	24	▼35.4	23	33.9
CHASE	16	57.3	13	45.1
CHERRY	22	54.0	17	41.6
CHEYENNE	33	53.3	24	37.5
CLAY	38	82.6	25	52.7
COLFAX	39	66.6	26	42.1
CUMING	28	▼39.3	20	▼28.0
CUSTER	57	70.4	41	50.1
DAKOTA	66	75.9	45	51.3
DAWES	21	44.5	18	36.3
DAWSON	57	▼44.6	43	▽33.9
DEUEL	9	52.4	7	41.4
DIXON	20	47.9	14	32.4
DODGE	163	71.3	122	51.6
DOUGLAS	1,736	▲79.6	1,234	▲56.8
DUNDY	9	51.5	7	40.3
FILLMORE	31	60.1	23	45.1
FRANKLIN	19	74.1	16	57.6
FRONTIER	11	63.6	9	45.1
FURNAS	20	48.7	11	▼24.5
GAGE	95	62.3	65	42.2
GARDEN	10	52.3	10	51.8
GARFIELD	8	47.0	3	**
GOSPER	7	39.5	4	**
GRANT	3	**	0	---
GREELEY	12	53.8	10	38.9
HALL	193	65.4	141	46.9
HAMILTON	23	▽41.2	20	36.4
HARLAN	15	46.6	17	49.7
HAYES	3	**	4	**
HITCHCOCK	19	75.9	11	44.0
HOLT	48	60.1	35	42.8
HOOKER	3	**	1	**
HOWARD	40	91.9	21	47.2

TABLE 9: Cancer of the Lung and Bronchus Incidence and Mortality (Continued)
Number of Cases, Deaths, and Rates, by County of Residence
 Nebraska (2003-2007) and US (2003-2007 [incidence] & 2002-2006 [mortality])

COUNTY	Incidence		Mortality	
	# Cases	Rate	# Deaths	Rate
JEFFERSON	39	63.4	29	42.5
JOHNSON	15	▽40.9	16	39.0
KEARNEY	17	▽41.4	22	52.4
KEITH	26	▽42.0	28	44.9
KEYA PAHA	1	**	0	---
KIMBALL	25	83.7	14	45.6
KNOX	45	60.9	34	44.3
LANCASTER	749	64.5	577	49.9
LINCOLN	159	77.9	112	54.3
LOGAN	3	**	2	**
LOUP	1	**	1	**
McPHERSON	1	**	1	**
MADISON	131	69.2	93	48.5
MERRICK	23	▽43.1	25	46.0
MORRILL	26	74.5	21	59.2
NANCE	13	50.6	12	40.2
NEMAHA	22	46.3	18	34.2
NUCKOLLS	15	▽39.4	13	34.0
OTOE	74	72.1	61	58.8
PAWNEE	10	▽38.1	6	▽24.5
PERKINS	12	54.1	11	50.6
PHELPS	28	▽43.6	21	▽31.5
PIERCE	26	57.7	22	53.3
PLATTE	93	53.8	78	44.6
POLK	17	▽41.5	17	41.5
RED WILLOW	50	66.2	40	52.5
RICHARDSON	38	59.0	30	46.9
ROCK	7	49.4	10	77.9
SALINE	51	61.5	40	48.4
SARPY	354	72.5	225	47.3
SAUNDERS	79	65.9	56	46.6
SCOTTS BLUFF	109	▼46.5	98	40.8
SEWARD	69	71.4	50	51.5
SHERIDAN	18	▼37.8	18	38.3
SHERMAN	18	66.8	15	55.7
SIOUX	4	**	0	---
STANTON	10	▼29.7	12	34.5
THAYER	26	51.7	20	37.4
THOMAS	3	**	0	---
THURSTON	21	62.6	19	56.9
VALLEY	22	62.6	15	42.0
WASHINGTON	63	58.7	53	49.1
WAYNE	19	▼37.6	15	▽30.4
WEBSTER	22	69.1	16	44.8
WHEELER	0	---	1	**
YORK	42	▽45.2	36	39.1

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

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

▽ county rate is significantly lower than the state rate (95% confidence level)

▼ county rate is significantly lower than the state rate (99% confidence level)

△ county rate is significantly higher than the state rate (95% confidence level)

▲ county rate is significantly higher than the state rate (99% confidence level)

**TABLE 10: Cancer of the Female Breast Incidence and Mortality
Number of Cases, Deaths, and Rates, by County of Residence**
Nebraska (2003-2007) and US (2003-2007 [incidence] & 2002-2006 [mortality])

	<u>Incidence</u>		<u>Mortality</u>	
	<u># Cases</u>	<u>Rate</u>	<u># Deaths</u>	<u>Rate</u>
US	Not available	124.9	206,023	24.5
NEBRASKA	6,018	123.2	1,195	22.5
<u>COUNTY</u>				
ADAMS	127	133.7	25	23.0
ANTELOPE	36	153.4	5	**
ARTHUR	1	**	0	---
BANNER	1	**	1	**
BLAINE	2	**	0	---
BOONE	27	138.6	4	**
BOX BUTTE	39	112.6	11	30.0
BOYD	12	123.6	1	**
BROWN	11	80.8	1	**
BUFFALO	148	136.4	32	28.3
BURT	31	107.5	9	26.0
BUTLER	25	90.8	6	18.4
CASS	90	129.1	11	15.6
CEDAR	27	98.9	6	15.1
CHASE	21	156.9	3	**
CHERRY	27	141.2	3	**
CHEYENNE	48	155.3	7	22.5
CLAY	18	▽75.3	4	**
COLFAX	34	115.1	11	26.3
CUMING	36	97.9	8	14.5
CUSTER	49	120.9	15	25.6
DAKOTA	47	94.3	12	22.9
DAWES	26	107.4	8	30.0
DAWSON	68	100.4	21	28.9
DEUEL	8	101.4	1	**
DIXON	31	140.4	6	19.7
DODGE	158	132.5	27	18.4
DOUGLAS	1,479	118.6	303	23.6
DUNDY	10	104.7	1	**
FILLMORE	25	118.6	9	31.3
FRANKLIN	13	91.3	3	**
FRONTIER	12	156.1	5	**
FURNAS	18	91.8	1	**
GAGE	106	139.1	23	23.9
GARDEN	12	193.7	2	**
GARFIELD	14	186.4	1	**
GOSPER	8	130.4	0	---
GRANT	2	**	0	---
GREELEY	10	108.5	0	---
HALL	195	127.9	36	22.2
HAMILTON	32	115.6	9	28.1
HARLAN	20	144.3	6	36.0
HAYES	1	**	1	**
HITCHCOCK	13	92.3	3	**
HOLT	49	128.2	4	**
HOOKER	4	**	2	**
HOWARD	20	89.8	4	**

TABLE 10: Cancer of the Female Breast Incidence and Mortality (Continued)
Number of Cases, Deaths, and Rates, by County of Residence
 Nebraska (2003-2007) and US (2003-2007 [incidence] & 2002-2006 [mortality])

COUNTY	Incidence		Mortality	
	# Cases	Rate	# Deaths	Rate
JEFFERSON	31	102.4	8	25.0
JOHNSON	19	124.2	9	35.6
KEARNEY	26	120.6	5	**
KEITH	28	96.1	6	18.2
KEYA PAHA	2	**	1	**
KIMBALL	17	139.3	4	**
KNOX	31	90.0	6	21.1
LANCASTER	852	131.4	148	21.8
LINCOLN	130	123.9	27	23.9
LOGAN	2	**	2	**
LOUP	0	---	1	**
McPHERSON	5	**	0	---
MADISON	130	133.2	28	24.7
MERRICK	37	156.4	4	**
MORRILL	23	132.3	3	**
NANCE	16	142.4	6	51.2
NEMAHA	25	97.5	6	23.6
NUCKOLLS	31	161.0	5	**
OTOE	46	93.5	5	**
PAWNEE	12	▽76.1	4	**
PERKINS	15	118.2	4	**
PHELPS	44	128.1	14	38.0
PIERCE	27	120.4	8	33.6
PLATTE	115	127.6	26	29.1
POLK	31	167.3	3	**
RED WILLOW	45	118.6	13	33
RICHARDSON	56	168.3	9	24.2
ROCK	6	71.8	0	---
SALINE	47	113.9	4	**
SARPY	413	136.7	72	25.7
SAUNDERS	73	125.7	9	▽11.9
SCOTTS BLUFF	152	132.7	26	18.7
SEWARD	56	122.7	12	20.8
SHERIDAN	21	103.0	3	**
SHERMAN	11	98.9	2	**
SIOUX	4	**	3	**
STANTON	10	▼57.0	7	36.9
THAYER	15	▽71.8	4	**
THOMAS	2	**	0	---
THURSTON	17	97.8	5	**
VALLEY	19	115.5	4	**
WASHINGTON	64	112.9	13	21.7
WAYNE	22	103.4	4	**
WEBSTER	19	146.8	2	**
WHEELER	4	**	2	**
YORK	75	158.3	17	30.8

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

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

▽ county rate is significantly lower than the state rate (95% confidence level)

▼ county rate is significantly lower than the state rate (99% confidence level)

△ county rate is significantly higher than the state rate (95% confidence level)

▲ county rate is significantly higher than the state rate (99% confidence level)

**TABLE 11: Cancer of the Colon and Rectum (Colorectal) Incidence and Mortality
Number of Cases, Deaths, and Rates, by County of Residence
Nebraska (2003-2007) and US (2003-2007 [incidence] & 2002-2006 [mortality])**

	<u>Incidence</u>		<u>Mortality</u>	
	<u># Cases</u>	<u>Rate</u>	<u># Deaths</u>	<u>Rate</u>
US	Not available	47.3	272,167	18.2
NEBRASKA	5,305	56.2	1,853	18.9
<u>COUNTY</u>				
ADAMS	112	57.5	32	15.2
ANTELOPE	32	61.1	10	15.8
ARTHUR	3	**	2	**
BANNER	4	**	0	---
BLAINE	1	**	1	**
BOONE	29	67.1	15	32.0
BOX BUTTE	33	50.7	14	19.1
BOYD	10	52.6	5	**
BROWN	16	56.3	4	**
BUFFALO	113	55.3	34	15.5
BURT	45	72.1	17	27.5
BUTLER	44	74.0	15	24.6
CASS	82	62.7	32	24.1
CEDAR	24	▼34.7	9	11.7
CHASE	10	▽30.9	4	**
CHERRY	19	50.8	9	21.0
CHEYENNE	28	44.8	11	15.9
CLAY	35	71.2	4	**
COLFAX	44	70.3	17	27.9
CUMING	39	53.1	14	16.3
CUSTER	49	56.9	17	20.5
DAKOTA	47	53.9	15	17.6
DAWES	25	52.4	12	21.2
DAWSON	63	49.3	15	▽10.7
DEUEL	9	53.3	2	**
DIXON	14	▽34.2	9	19.3
DODGE	172	▲73.3	71	△26.6
DOUGLAS	1,220	55.1	420	19.0
DUNDY	7	43.8	6	27.2
FILLMORE	30	59.1	11	18.0
FRANKLIN	12	41.5	7	22.5
FRONTIER	8	43.2	4	**
FURNAS	32	74.7	8	19.3
GAGE	105	65.1	35	19.4
GARDEN	4	**	5	**
GARFIELD	12	65.6	6	24.8
GOSPER	8	54.1	1	**
GRANT	3	**	1	**
GREELEY	11	53.7	3	**
HALL	174	57.3	54	17.5
HAMILTON	26	45.4	5	**
HARLAN	23	73.4	6	18.6
HAYES	2	**	0	---
HITCHCOCK	7	▽28.4	3	**
HOLT	53	62.9	21	25.6
HOOKER	1	**	0	---
HOWARD	28	62.0	5	**

**TABLE 11: Cancer of the Colon and Rectum (Colorectal) Incidence and Mortality
(Continued)****Numbers of Cases, Deaths, and Rates, by County of Residence**
Nebraska (2003-2007) and US (2003-2007 [incidence] & 2002-2006 [mortality])

<u>COUNTY</u>	<u>Incidence</u>		<u>Mortality</u>	
	<u># Cases</u>	<u>Rate</u>	<u># Deaths</u>	<u>Rate</u>
JEFFERSON	31	45.5	15	19.0
JOHNSON	23	69.5	10	22.8
KEARNEY	19	46.3	11	24.5
KEITH	37	62.1	15	27.1
KEYA PAHA	2	**	1	**
KIMBALL	15	51.5	12	34.6
KNOX	29	▽38.6	18	22.2
LANCASTER	639	55.0	203	17.0
LINCOLN	107	50.3	41	18.2
LOGAN	0	---	0	---
LOUP	3	**	2	**
McPHERSON	2	**	0	---
MADISON	125	64.8	40	18.3
MERRICK	27	51.0	9	14.9
MORRILL	11	▼30.2	5	**
NANCE	18	63.4	11	37.1
NEMAHA	28	51.6	9	17.0
NUCKOLLS	28	66.8	6	12.7
OTOE	57	56.5	29	25.7
PAWNEE	17	73.0	6	28.7
PERKINS	15	64.2	6	26.5
PHELPS	24	▼35.0	14	18.4
PIERCE	34	72.4	15	31.1
PLATTE	107	61.6	43	24.2
POLK	34	86.2	7	18.2
RED WILLOW	57	71.6	17	19.3
RICHARDSON	50	69.2	21	24.4
ROCK	9	76.8	6	41.0
SALINE	57	67.8	24	26.7
SARPY	300	62.7	71	15.8
SAUNDERS	68	55.7	26	20.7
SCOTTS BLUFF	114	49.7	42	17.3
SEWARD	53	54.1	23	21.4
SHERIDAN	22	49.9	6	12.3
SHERMAN	19	74.3	8	31.6
SIOUX	1	**	1	**
STANTON	13	36.1	4	**
THAYER	31	55.9	7	13.8
THOMAS	2	**	0	---
THURSTON	24	72.1	15	△42.9
VALLEY	16	50.2	4	**
WASHINGTON	54	51.1	17	16.0
WAYNE	30	60.4	12	20.4
WEBSTER	32	△101.5	10	29.7
WHEELER	2	**	2	**
YORK	51	54.2	18	17.7

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

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

▽ county rate is significantly lower than the state rate (95% confidence level)

▼ county rate is significantly lower than the state rate (99% confidence level)

△ county rate is significantly higher than the state rate (95% confidence level)

▲ county rate is significantly higher than the state rate (99% confidence level)

TABLE 12: Cancer of the Prostate Incidence and Mortality
Number of Cases, Deaths, and Rates, by County of Residence
 Nebraska (2003-2007) and US (2003-2007 [incidence] & 2002-2006 [mortality])

	<u>Incidence</u>		<u>Mortality</u>	
	<u># Cases</u>	<u>Rate</u>	<u># Deaths</u>	<u>Rate</u>
US	Not available	163.1	146,279	25.6
NEBRASKA	6,583	158.9	940	24.5
<u>COUNTY</u>				
ADAMS	125	150.3	19	22.6
ANTELOPE	30	130.2	7	28.5
ARTHUR	1	**	0	---
BANNER	6	224.3	0	---
BLAINE	2	**	0	---
BOONE	48	△255.0	6	24.7
BOX BUTTE	40	136.3	2	**
BOYD	18	213.6	0	---
BROWN	31	260.0	5	**
BUFFALO	147	162.5	21	26.1
BURT	39	150.9	6	21.9
BUTLER	49	183.3	6	21.2
CASS	83	134.6	10	20.7
CEDAR	38	130.7	9	29.3
CHASE	27	201.2	0	---
CHERRY	37	197.8	3	**
CHEYENNE	36	132.0	5	**
CLAY	48	225.5	5	**
COLFAX	71	▲267.2	3	**
CUMING	50	150.6	8	20.7
CUSTER	61	162.4	6	15.6
DAKOTA	49	▽114.2	11	32.3
DAWES	28	126.1	13	△57.8
DAWSON	63	▼106.6	19	34.7
DEUEL	11	142.4	3	**
DIXON	18	▼95.2	4	**
DODGE	282	▲280.9	16	16.1
DOUGLAS	1,512	157.8	206	25.9
DUNDY	11	143.3	3	**
FILLMORE	31	153.6	5	**
FRANKLIN	20	161.8	2	**
FRONTIER	17	175.2	2	**
FURNAS	30	180.3	7	37.1
GAGE	79	▼115.7	22	30.1
GARDEN	12	139.2	3	**
GARFIELD	13	177.2	4	**
GOSPER	10	124.9	1	**
GRANT	4	**	0	---
GREELEY	21	214.3	7	64.4
HALL	264	△192.2	23	18.7
HAMILTON	38	148.0	6	24.6
HARLAN	26	176.6	5	**
HAYES	5	**	0	---
HITCHCOCK	18	158.6	0	---
HOLT	81	△226.8	6	15.1
HOOKER	5	**	1	**
HOWARD	44	215.1	3	**

TABLE 12: Cancer of the Prostate Incidence and Mortality (Continued)
Number of Cases, Deaths, and Rates, by County of Residence
 Nebraska (2003-2007) and US (2003-2007 [incidence] & 2002-2006 [mortality])

COUNTY	Incidence		Mortality	
	# Cases	Rate	# Deaths	Rate
JEFFERSON	32	▽108.5	10	31.1
JOHNSON	17	▽105.0	4	**
KEARNEY	20	108.8	6	36.4
KEITH	36	125.7	5	**
KEYA PAHA	6	168.4	1	**
KIMBALL	22	163.1	6	42.8
KNOX	50	156.5	10	29.8
LANCASTER	765	▽146.1	100	24.1
LINCOLN	123	▽129.9	23	26.7
LOGAN	3	**	1	**
LOUP	2	**	1	**
McPHERSON	3	**	0	---
MADISON	166	△197.1	13	15.6
MERRICK	45	183.2	8	32.3
MORRILL	29	182.7	5	**
NANCE	21	161.8	2	**
NEMAHA	31	147.5	6	28.0
NUCKOLLS	25	130.3	5	**
OTOE	54	▽117.2	11	21.6
PAWNEE	14	120.0	4	**
PERKINS	11	104.7	4	**
PHELPS	45	154.1	18	△58.0
PIERCE	47	221.8	6	26.7
PLATTE	144	185.7	15	21.1
POLK	27	147.6	2	**
RED WILLOW	46	135.8	8	22.5
RICHARDSON	43	142.8	10	30.7
ROCK	13	236.5	3	**
SALINE	55	149.1	13	33.0
SARPY	334	152.4	37	25.9
SAUNDERS	102	185.3	14	28.3
SCOTTS BLUFF	196	△192.2	23	22.6
SEWARD	43	▼98.9	10	21.8
SHERIDAN	22	109.5	5	**
SHERMAN	16	134.6	1	**
SIOUX	6	127.0	0	---
STANTON	15	▽97.2	5	**
THAYER	31	133.9	9	31.8
THOMAS	2	**	0	---
THURSTON	21	140.1	5	**
VALLEY	38	238.2	6	30.8
WASHINGTON	67	137.2	16	38.1
WAYNE	34	155.8	1	**
WEBSTER	23	152.6	3	**
WHEELER	5	**	0	---
YORK	54	132.1	12	27.6

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

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

▽ county rate is significantly lower than the state rate (95% confidence level)

▼ county rate is significantly lower than the state rate (99% confidence level)

△ county rate is significantly higher than the state rate (95% confidence level)

▲ county rate is significantly higher than the state rate (99% confidence level)

**TABLE 13: Cancer of the Urinary Bladder Incidence and Mortality
Numbers of Cases, Deaths, and Rates, by County of Residence
Nebraska (2003-2007) and US (2003-2007 [incidence] & 2002-2006 [mortality])**

	<u>Incidence</u>		<u>Mortality</u>	
	<u># Cases</u>	<u>Rate</u>	<u># Deaths</u>	<u>Rate</u>
US	Not available	21.1	64,867	4.3
NEBRASKA	2,011	21.3	384	3.9
<u>COUNTY</u>				
ADAMS	44	21.4	12	5.4
ANTELOPE	13	26.8	1	**
ARTHUR	0	---	0	---
BANNER	1	**	1	**
BLAINE	2	**	0	---
BOONE	12	25.2	2	**
BOX BUTTE	8	12.1	3	**
BOYD	1	**	0	---
BROWN	5	**	0	---
BUFFALO	38	17.7	8	3.5
BURT	8	12.9	0	---
BUTLER	9	14.9	1	**
CASS	28	22.0	5	**
CEDAR	10	13.6	1	**
CHASE	6	18.4	1	**
CHERRY	17	41.2	4	**
CHEYENNE	18	26.3	3	**
CLAY	4	**	1	**
COLFAX	18	27.8	1	**
CUMING	8	▼9.6	1	**
CUSTER	20	23.5	2	**
DAKOTA	13	15.6	2	**
DAWES	8	16.8	2	**
DAWSON	34	27.1	3	**
DEUEL	4	**	2	**
DIXON	5	**	1	**
DODGE	54	23.2	11	4.3
DOUGLAS	508	23.1	109	△5.0
DUNDY	7	33.7	2	**
FILLMORE	8	13.7	3	**
FRANKLIN	7	22.6	0	---
FRONTIER	8	39.6	0	---
FURNAS	16	38.2	2	**
GAGE	35	21.1	5	**
GARDEN	5	**	0	---
GARFIELD	5	**	0	---
GOSPER	5	**	0	---
GRANT	2	**	0	---
GREELEY	3	**	0	---
HALL	69	22.2	22	7.1
HAMILTON	4	**	3	**
HARLAN	4	**	1	**
HAYES	1	**	0	---
HITCHCOCK	10	40.0	3	**
HOLT	21	24.3	1	**
HOOKER	1	**	0	---
HOWARD	12	27.5	2	**

TABLE 13: Cancer of the Urinary Bladder Incidence and Mortality (Continued)
Number of Cases, Deaths, and Rates, by County of Residence
 Nebraska (2003-2007) and US (2003-2007 [incidence] & 2002-2006 [mortality])

COUNTY	Incidence		Mortality	
	# Cases	Rate	# Deaths	Rate
JEFFERSON	14	22.3	3	**
JOHNSON	7	19.2	1	**
KEARNEY	9	21.0	1	**
KEITH	15	25.1	6	10.1
KEYA PAHA	2	**	0	---
KIMBALL	8	24.7	3	**
KNOX	10	13.1	4	**
LANCASTER	237	20.5	37	3.1
LINCOLN	46	21.6	8	3.7
LOGAN	1	**	0	---
LOUP	2	**	1	**
McPHERSON	2	**	1	**
MADISON	35	16.6	6	2.5
MERRICK	8	14.5	1	**
MORRILL	10	28.0	1	**
NANCE	5	**	1	**
NEMAHA	10	20.7	1	**
NUCKOLLS	9	21.3	2	**
OTOE	16	14.5	0	---
PAWNEE	2	**	1	**
PERKINS	3	**	2	**
PHELPS	13	18.9	2	**
PIERCE	10	23.3	2	**
PLATTE	42	24.3	6	3.2
POLK	10	24.7	3	**
RED WILLOW	21	25.4	3	**
RICHARDSON	14	22.4	1	**
ROCK	3	**	0	---
SALINE	14	15.7	6	5.6
SARPY	110	24.0	16	4.2
SAUNDERS	23	19.2	9	7.0
SCOTTS BLUFF	50	21.0	8	3.7
SEWARD	26	26.8	7	6.4
SHERIDAN	4	**	1	**
SHERMAN	4	**	1	**
SIOUX	0	---	0	---
STANTON	7	20.0	0	---
THAYER	8	13.5	3	**
THOMAS	0	---	0	---
THURSTON	9	26.0	2	**
VALLEY	9	19.1	2	**
WASHINGTON	27	25.2	4	**
WAYNE	10	19.8	1	**
WEBSTER	9	24.4	0	---
WHEELER	1	**	0	---
YORK	17	17.0	6	5.2

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

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

▽ county rate is significantly lower than the state rate (95% confidence level)

▼ county rate is significantly lower than the state rate (99% confidence level)

△ county rate is significantly higher than the state rate (95% confidence level)

▲ county rate is significantly higher than the state rate (99% confidence level)

TABLE 14: Non-Hodgkin Lymphoma Incidence and Mortality
Number of Cases, Deaths, and Rates, by County of Residence
 Nebraska (2003-2007) and US (2003-2007 [incidence] & 2002-2006 [mortality])

	<u>Incidence</u>		<u>Mortality</u>	
	<u># Cases</u>	<u>Rate</u>	<u># Deaths</u>	<u>Rate</u>
US	Not available	20.3	105,789	7.1
NEBRASKA	1,929	20.8	716	7.4
<u>COUNTY</u>				
ADAMS	46	23.6	17	7.9
ANTELOPE	9	18.4	7	11.6
ARTHUR	1	**	0	---
BANNER	0	---	0	---
BLAINE	0	---	0	---
BOONE	10	25.4	4	**
BOX BUTTE	12	17.0	5	**
BOYD	1	**	3	**
BROWN	3	**	2	**
BUFFALO	45	22.3	12	5.7
BURT	11	23.0	7	11.6
BUTLER	8	15.0	4	**
CASS	28	21.1	11	7.9
CEDAR	6	▼9.5	6	9.4
CHASE	8	27.4	4	**
CHERRY	4	**	0	---
CHEYENNE	13	19.2	5	**
CLAY	10	24.2	2	**
COLFAX	12	21.7	4	**
CUMING	18	27.8	5	**
CUSTER	11	13.0	5	**
DAKOTA	20	22.8	9	10.4
DAWES	11	25.4	7	14.5
DAWSON	18	13.9	12	9.7
DEUEL	3	**	3	**
DIXON	9	20.4	4	**
DODGE	72	△31.1	30	11.9
DOUGLAS	490	21.8	154	7.0
DUNDY	6	33.8	3	**
FILLMORE	17	29.8	6	9.3
FRANKLIN	3	**	1	**
FRONTIER	2	**	1	**
FURNAS	11	29.3	7	17.9
GAGE	26	16.1	18	10.0
GARDEN	3	**	0	---
GARFIELD	4	**	1	**
GOSPER	4	**	0	---
GRANT	0	---	0	---
GREELEY	1	**	0	---
HALL	66	22.5	24	7.5
HAMILTON	18	34.0	3	**
HARLAN	2	**	1	**
HAYES	1	**	1	**
HITCHCOCK	6	23.4	1	**
HOLT	11	14.3	3	**
HOOKER	0	---	0	---
HOWARD	8	19.7	3	**

TABLE 14: Non-Hodgkin Lymphoma Incidence and Mortality (Continued)
Number of Cases, Deaths, and Rates, by County of Residence
 Nebraska (2003-2007) and US (2003-2007 [incidence] & 2002-2006 [mortality])

COUNTY	Incidence		Mortality	
	# Cases	Rate	# Deaths	Rate
JEFFERSON	9	17.2	4	**
JOHNSON	10	31.5	7	20.5
KEARNEY	8	18.8	3	**
KEITH	11	18.5	2	**
KEYA PAHA	1	**	1	**
KIMBALL	3	**	1	**
KNOX	14	19.0	2	**
LANCASTER	262	22.0	99	8.5
LINCOLN	50	24.8	15	6.9
LOGAN	1	**	0	---
LOUP	1	**	0	---
McPHERSON	0	---	0	---
MADISON	31	15.1	10	4.8
MERRICK	12	22.4	8	14.0
MORRILL	4	**	2	**
NANCE	6	22.6	3	**
NEMAHA	10	21.1	5	**
NUCKOLLS	8	19.2	2	**
OTOE	17	16.4	5	**
PAWNEE	5	**	3	**
PERKINS	4	**	1	**
PHELPS	6	▼8.8	4	**
PIERCE	13	29.1	2	**
PLATTE	31	18.7	14	7.8
POLK	3	**	3	**
RED WILLOW	24	30.1	14	15.3
RICHARDSON	10	15.5	4	**
ROCK	3	**	1	**
SALINE	14	16.7	2	**
SARPY	111	21.9	29	6.2
SAUNDERS	27	23.1	10	8.1
SCOTTS BLUFF	42	18.3	18	7.4
SEWARD	24	25.5	12	10.5
SHERIDAN	3	**	3	**
SHERMAN	4	**	0	---
SIOUX	0	---	0	---
STANTON	3	**	2	**
THAYER	8	18.1	2	**
THOMAS	1	**	0	---
THURSTON	4	**	1	**
VALLEY	8	25.0	2	**
WASHINGTON	22	20.2	9	8.5
WAYNE	9	17.9	3	**
WEBSTER	7	23.4	4	**
WHEELER	1	**	0	---
YORK	16	17.0	9	8.4

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

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

▽ county rate is significantly lower than the state rate (95% confidence level)

▼ county rate is significantly lower than the state rate (99% confidence level)

△ county rate is significantly higher than the state rate (95% confidence level)

▲ county rate is significantly higher than the state rate (99% confidence level)

TABLE 15: Leukemia Incidence and Mortality
Number of Cases, Deaths, and Rates, by County of Residence
 Nebraska (2003-2007) and US (2003-2007 [incidence] & 2002-2006 [mortality])

	<u>Incidence</u>		<u>Mortality</u>	
	<u># Cases</u>	<u>Rate</u>	<u># Deaths</u>	<u>Rate</u>
US	Not available	12.7	108,393	7.3
NEBRASKA	1,343	14.4	695	7.2
<u>COUNTY</u>				
ADAMS	26	13.5	15	6.8
ANTELOPE	7	13.2	2	**
ARTHUR	0	---	0	---
BANNER	0	---	0	---
BLAINE	0	---	0	---
BOONE	5	**	6	11.1
BOX BUTTE	9	13.6	5	**
BOYD	4	**	0	---
BROWN	5	**	2	**
BUFFALO	23	11.0	21	10.0
BURT	10	19.9	2	**
BUTLER	3	**	3	**
CASS	20	15.4	10	7.6
CEDAR	6	9.1	4	**
CHASE	5	**	2	**
CHERRY	12	32.9	4	**
CHEYENNE	7	11.1	4	**
CLAY	5	**	2	**
COLFAX	16	25.2	6	7.9
CUMING	10	14.9	7	9.3
CUSTER	8	8.9	6	6.4
DAKOTA	15	16.3	11	11.7
DAWES	7	12.4	8	14.8
DAWSON	15	11.8	8	6.9
DEUEL	0	---	0	---
DIXON	6	14.2	5	**
DODGE	29	12.8	9	▽3.7
DOUGLAS	330	14.5	154	7.0
DUNDY	3	**	4	**
FILLMORE	4	**	2	**
FRANKLIN	6	19.4	6	19.4
FRONTIER	2	**	0	---
FURNAS	4	**	3	**
GAGE	11	▼7.1	5	**
GARDEN	3	**	2	**
GARFIELD	2	**	2	**
GOSPER	3	**	1	**
GRANT	2	**	0	---
GREELEY	4	**	1	**
HALL	53	17.7	28	8.7
HAMILTON	9	16.0	4	**
HARLAN	4	**	1	**
HAYES	0	---	0	---
HITCHCOCK	4	**	1	**
HOLT	11	19.2	2	**
HOOKER	0	---	0	---
HOWARD	14	29.7	8	16.6

TABLE 15: Leukemia Incidence and Mortality (Continued)
Number of Cases, Deaths, and Rates, by County of Residence
 Nebraska (2003-2007) and US (2003-2007 [incidence] & 2002-2006 [mortality])

COUNTY	Incidence		Mortality	
	# Cases	Rate	# Deaths	Rate
JEFFERSON	7	11.2	6	7.7
JOHNSON	6	12.6	3	**
KEARNEY	7	17.1	5	**
KEITH	11	18.9	7	10.8
KEYA PAHA	1	**	0	---
KIMBALL	4	**	5	**
KNOX	10	13.2	9	9.8
LANCASTER	170	14.1	89	7.5
LINCOLN	41	19.9	16	7.7
LOGAN	0	---	0	---
LOUP	2	**	1	**
McPHERSON	0	---	0	---
MADISON	33	17.1	12	5.8
MERRICK	3	**	1	**
MORRILL	13	△42.6	7	22.9
NANCE	3	**	3	**
NEMAHA	2	**	2	**
NUCKOLLS	5	**	1	**
OTOE	19	17.1	12	10.2
PAWNEE	1	**	1	**
PERKINS	3	**	2	**
PHELPS	9	16.6	5	**
PIERCE	5	**	3	**
PLATTE	19	11.4	6	▽3.5
POLK	7	20.1	1	**
RED WILLOW	14	20.0	12	15.0
RICHARDSON	13	19.6	9	10.9
ROCK	0	---	0	---
SALINE	14	16.0	4	**
SARPY	71	14.1	33	7.0
SAUNDERS	25	20.5	14	11.7
SCOTTS BLUFF	21	▽9.5	14	5.8
SEWARD	14	14.7	8	7.1
SHERIDAN	5	**	3	**
SHERMAN	5	**	5	**
SIOUX	0	---	1	**
STANTON	4	**	1	**
THAYER	10	22.4	7	14.7
THOMAS	2	**	0	---
THURSTON	3	**	3	**
VALLEY	4	**	1	**
WASHINGTON	11	10.5	5	**
WAYNE	6	9.8	0	---
WEBSTER	6	17.9	3	**
WHEELER	1	**	1	**
YORK	11	11.5	8	8.0

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

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

▽ county rate is significantly lower than the state rate (95% confidence level)

▼ county rate is significantly lower than the state rate (99% confidence level)

△ county rate is significantly higher than the state rate (95% confidence level)

▲ county rate is significantly higher than the state rate (99% confidence level)

TABLE 16: Cancer of the Kidney and Renal Pelvis Incidence and Mortality
Number of Cases, Deaths, and Rates, by County of Residence
 Nebraska (2003-2007) and US (2003-2007 [incidence] & 2002-2006 [mortality])

	<u>Incidence</u>		<u>Mortality</u>	
	<u># Cases</u>	<u>Rate</u>	<u># Deaths</u>	<u>Rate</u>
US	Not available	13.9	61,660	4.1
NEBRASKA	1,366	14.8	432	4.5
<u>COUNTY</u>				
ADAMS	17	▽9.1	10	5.4
ANTELOPE	2	**	1	**
ARTHUR	0	---	0	---
BANNER	2	**	1	**
BLAINE	0	---	0	---
BOONE	7	19.6	1	**
BOX BUTTE	8	12.6	3	**
BOYD	4	**	0	---
BROWN	2	**	0	---
BUFFALO	30	14.5	7	3.4
BURT	2	**	1	**
BUTLER	10	16.7	3	**
CASS	27	21.0	10	8.1
CEDAR	10	15.1	3	**
CHASE	1	**	0	---
CHERRY	4	**	0	---
CHEYENNE	4	**	0	---
CLAY	5	**	0	---
COLFAX	11	20.3	3	**
CUMING	4	**	3	**
CUSTER	8	9.6	6	6.8
DAKOTA	12	13.7	7	8.3
DAWES	6	12.0	3	**
DAWSON	18	14.0	7	5.3
DEUEL	3	**	0	---
DIXON	5	**	3	**
DODGE	33	15.7	13	5.0
DOUGLAS	382	△16.7	102	4.6
DUNDY	3	**	1	**
FILLMORE	6	12.8	2	**
FRANKLIN	3	**	0	---
FRONTIER	3	**	0	---
FURNAS	4	**	3	**
GAGE	20	13.1	13	8.2
GARDEN	1	**	1	**
GARFIELD	2	**	0	---
GOSPER	2	**	0	---
GRANT	0	---	0	---
GREELEY	3	**	1	**
HALL	52	17.8	12	3.8
HAMILTON	5	**	2	**
HARLAN	3	**	1	**
HAYES	3	**	2	**
HITCHCOCK	8	41.4	3	**
HOLT	8	10.4	5	**
HOOKER	0	---	0	---
HOWARD	8	19.9	4	**

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

Nebraska (2003-2007) and US (2003-2007 [incidence] & 2002-2006 [mortality])

COUNTY	Incidence		Mortality	
	# Cases	Rate	# Deaths	Rate
JEFFERSON	3	**	3	**
JOHNSON	1	**	1	**
KEARNEY	10	22.8	4	**
KEITH	7	12.4	1	**
KEYA PAHA	2	**	1	**
KIMBALL	4	**	3	**
KNOX	15	25.3	4	**
LANCASTER	173	14.3	48	4.0
LINCOLN	33	16.2	8	3.7
LOGAN	1	**	1	**
LOUP	0	---	0	---
McPHERSON	2	**	0	---
MADISON	28	14.5	11	5.2
MERRICK	6	14.3	2	**
MORRILL	7	22.0	3	**
NANCE	7	23.5	2	**
NEMAHA	3	**	0	---
NUCKOLLS	3	**	2	**
OTOE	10	9.8	4	**
PAWNEE	2	**	1	**
PERKINS	2	**	2	**
PHELPS	8	14.9	6	8.8
PIERCE	2	**	2	**
PLATTE	25	14.4	3	**
POLK	9	22.5	4	**
RED WILLOW	9	12.8	3	**
RICHARDSON	3	**	5	**
ROCK	3	**	0	---
SALINE	13	17.4	7	8.9
SARPY	87	15.4	19	4.2
SAUNDERS	15	12.9	2	**
SCOTTS BLUFF	40	18.2	14	6.0
SEWARD	15	16.9	6	6.4
SHERIDAN	6	16.4	3	**
SHERMAN	3	**	1	**
SIOUX	1	**	1	**
STANTON	2	**	1	**
THAYER	4	**	1	**
THOMAS	1	**	0	---
THURSTON	9	28.6	4	**
VALLEY	2	**	1	**
WASHINGTON	17	16.1	5	**
WAYNE	6	12.5	2	**
WEBSTER	4	**	0	---
WHEELER	0	---	1	**
YORK	12	14.4	3	**

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

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

▽ county rate is significantly lower than the state rate (95% confidence level)

▼ county rate is significantly lower than the state rate (99% confidence level)

△ county rate is significantly higher than the state rate (95% confidence level)

▲ county rate is significantly higher than the state rate (99% confidence level)

TABLE 17: Melanoma of the Skin Incidence and Mortality
Number of Cases, Deaths, and Rates, by County of Residence
 Nebraska (2003-2007) and US (2003-2007 [incidence] & 2002-2006 [mortality])

	<u>Incidence</u>		<u>Mortality</u>	
	<u># Cases</u>	<u>Rate</u>	<u># Deaths</u>	<u>Rate</u>
US	Not available	20.8	40,069	2.7
NEBRASKA	1,545	17.1	254	2.7
<u>COUNTY</u>				
ADAMS	33	18.2	6	3.4
ANTELOPE	6	11.8	1	**
ARTHUR	1	**	0	---
BANNER	0	---	0	---
BLAINE	0	---	0	---
BOONE	4	**	0	---
BOX BUTTE	11	18.5	3	**
BOYD	0	---	0	---
BROWN	2	**	0	---
BUFFALO	26	12.3	10	5.2
BURT	15	29.3	0	---
BUTLER	9	17.2	1	**
CASS	29	22.3	3	**
CEDAR	9	18.0	1	**
CHASE	5	**	1	**
CHERRY	1	**	1	**
CHEYENNE	8	14.8	1	**
CLAY	7	22.3	1	**
COLFAX	10	17.1	3	**
CUMING	7	11.6	3	**
CUSTER	11	15.0	2	**
DAKOTA	11	13.0	0	---
DAWES	7	17.9	1	**
DAWSON	12	▽9.7	3	**
DEUEL	2	**	0	---
DIXON	10	25.3	3	**
DODGE	25	12.4	9	4.0
DOUGLAS	391	17.0	63	2.8
DUNDY	1	**	0	---
FILLMORE	8	22.3	3	**
FRANKLIN	2	**	0	---
FRONTIER	1	**	0	---
FURNAS	8	20.4	0	---
GAGE	16	▽10.7	6	3.1
GARDEN	4	**	0	---
GARFIELD	5	**	0	---
GOSPER	1	**	0	---
GRANT	2	**	0	---
GREELEY	2	**	0	---
HALL	34	▽11.5	9	3.0
HAMILTON	6	11.0	2	**
HARLAN	4	**	1	**
HAYES	0	---	0	---
HITCHCOCK	5	**	1	**
HOLT	16	24.1	1	**
HOOKER	1	**	0	---
HOWARD	5	**	0	---

TABLE 17: Melanoma of the Skin Incidence and Mortality (Continued)
Number of Cases, Deaths, and Rates, by County of Residence
 Nebraska (2003-2007) and US (2003-2007 [incidence] & 2002-2006 [mortality])

COUNTY	Incidence		Mortality	
	# Cases	Rate	# Deaths	Rate
JEFFERSON	10	18.6	1	**
JOHNSON	2	**	0	---
KEARNEY	2	**	1	**
KEITH	5	**	2	**
KEYA PAHA	0	---	0	---
KIMBALL	6	24.8	1	**
KNOX	4	**	0	---
LANCASTER	263	▲20.9	37	3.1
LINCOLN	33	16.7	5	**
LOGAN	0	---	0	---
LOUP	0	---	0	---
McPHERSON	0	---	0	---
MADISON	27	14.1	3	**
MERRICK	5	**	1	**
MORRILL	5	**	1	**
NANCE	3	**	0	---
NEMAHA	8	18.1	1	**
NUCKOLLS	9	23.2	0	---
OTOE	9	10.2	2	**
PAWNEE	3	**	2	**
PERKINS	4	**	1	**
PHELPS	10	14.8	5	**
PIERCE	10	23.2	1	**
PLATTE	19	▽11.1	3	**
POLK	9	26.2	2	**
RED WILLOW	11	16.7	2	**
RICHARDSON	8	▽9.1	4	**
ROCK	0	---	0	---
SALINE	21	29.1	6	7.3
SARPY	125	21.1	11	2.2
SAUNDERS	17	14.5	5	**
SCOTTS BLUFF	58	△26.7	5	**
SEWARD	18	22.1	5	**
SHERIDAN	9	22.7	1	**
SHERMAN	2	**	0	---
SIOUX	0	---	0	---
STANTON	6	19.1	0	---
THAYER	12	32.2	3	**
THOMAS	0	---	0	---
THURSTON	6	19.4	0	---
VALLEY	2	**	1	**
WASHINGTON	16	15.5	1	**
WAYNE	5	**	0	---
WEBSTER	3	**	1	**
WHEELER	0	---	0	---
YORK	7	▼7.8	1	**

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

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

▽ county rate is significantly lower than the state rate (95% confidence level)

▼ county rate is significantly lower than the state rate (99% confidence level)

△ county rate is significantly higher than the state rate (95% confidence level)

▲ county rate is significantly higher than the state rate (99% confidence level)

TABLE 18: Cancer of the Esophagus Incidence and Mortality
Number of Cases, Deaths, and Rates, by County of Residence
 Nebraska (2003-2007) and US (2003-2007 [incidence] & 2002-2006 [mortality])

	<u>Incidence</u>		<u>Mortality</u>	
	<u># Cases</u>	<u>Rate</u>	<u># Deaths</u>	<u>Rate</u>
US	Not available	4.7	65,767	4.4
NEBRASKA	436	4.7	408	4.4
<u>COUNTY</u>				
ADAMS	10	5.9	5	**
ANTELOPE	1	**	2	**
ARTHUR	1	**	0	---
BANNER	0	---	0	---
BLAINE	0	---	0	---
BOONE	3	**	5	**
BOX BUTTE	5	**	2	**
BOYD	0	---	0	---
BROWN	1	**	0	---
BUFFALO	18	8.9	14	6.8
BURT	1	**	1	**
BUTLER	3	**	1	**
CASS	4	**	10	7.9
CEDAR	3	**	4	**
CHASE	0	---	0	---
CHERRY	2	**	1	**
CHEYENNE	4	**	4	**
CLAY	2	**	3	**
COLFAX	4	**	2	**
CUMING	2	**	3	**
CUSTER	6	9.4	5	**
DAKOTA	4	**	5	**
DAWES	1	**	1	**
DAWSON	6	4.8	5	**
DEUEL	2	**	3	**
DIXON	1	**	2	**
DODGE	15	7.1	10	4.2
DOUGLAS	125	5.6	95	4.3
DUNDY	2	**	1	**
FILLMORE	3	**	4	**
FRANKLIN	1	**	1	**
FRONTIER	0	---	0	---
FURNAS	0	---	0	---
GAGE	6	3.4	8	4.9
GARDEN	1	**	1	**
GARFIELD	3	**	2	**
GOSPER	0	---	0	---
GRANT	1	**	0	---
GREELEY	0	---	0	---
HALL	13	4.5	18	6.2
HAMILTON	1	**	0	---
HARLAN	1	**	1	**
HAYES	0	---	0	---
HITCHCOCK	0	---	0	---
HOLT	2	**	3	**
HOOKER	0	---	0	---
HOWARD	1	**	4	**

TABLE 18: Cancer of the Esophagus Incidence and Mortality (Continued)
Number of Cases, Deaths, and Rates, by County of Residence
 Nebraska (2003-2007) and US (2003-2007 [incidence] & 2002-2006 [mortality])

COUNTY	Incidence		Mortality	
	<u># Cases</u>	<u>Rate</u>	<u># Deaths</u>	<u>Rate</u>
JEFFERSON	2	**	4	**
JOHNSON	2	**	0	---
KEARNEY	1	**	0	---
KEITH	1	**	3	**
KEYA PAHA	0	---	0	---
KIMBALL	2	**	1	**
KNOX	6	8.8	5	**
LANCASTER	33	▽2.9	45	3.9
LINCOLN	14	6.6	16	8.1
LOGAN	0	---	0	---
LOUP	0	---	1	**
McPHERSON	0	---	0	---
MADISON	12	6.7	8	4.2
MERRICK	2	**	0	---
MORRILL	0	---	0	---
NANCE	1	**	2	**
NEMAHA	1	**	3	**
NUCKOLLS	1	**	0	---
OTOE	7	7.2	6	5.7
PAWNEE	0	---	0	---
PERKINS	0	---	0	---
PHELPS	0	---	1	**
PIERCE	4	**	3	**
PLATTE	9	5.1	7	4.1
POLK	0	---	1	**
RED WILLOW	2	**	3	**
RICHARDSON	1	**	1	**
ROCK	2	**	2	**
SALINE	4	**	1	**
SARPY	28	5.7	28	5.7
SAUNDERS	5	**	3	**
SCOTTS BLUFF	12	6.2	12	5.5
SEWARD	4	**	5	**
SHERIDAN	0	---	1	**
SHERMAN	0	---	0	---
SIOUX	1	**	1	**
STANTON	2	**	1	**
THAYER	3	**	3	**
THOMAS	0	---	0	---
THURSTON	2	**	2	**
VALLEY	2	**	2	**
WASHINGTON	4	**	3	**
WAYNE	1	**	1	**
WEBSTER	1	**	1	**
WHEELER	0	---	0	---
YORK	5	**	6	6.5

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

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

▽ county rate is significantly lower than the state rate (95% confidence level)

▼ county rate is significantly lower than the state rate (99% confidence level)

△ county rate is significantly higher than the state rate (95% confidence level)

▲ county rate is significantly higher than the state rate (99% confidence level)

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. 72-73)
 Nebraska (2003-2007)

Central		
	Number	Rate
All Sites	1,996	500.0
Prostate	347	△185.8
Female Breast	264	129.4
Lung & Bronchus	239	59.1
Colon & Rectum (Colorectal)	227	54.8
Non-Hodgkin Lymphoma	96	24.1
Urinary Bladder	81	19.2
Uterine Corpus & Unspecified (Endometrium)	70	34.7
Leukemia	65	16.0
Kidney & Renal Pelvis	63	16.1
Thyroid	53	15.3
Oral Cavity & Pharynx	53	13.1

East Central		
	Number	Rate
All Sites	1,473	494.5
Prostate	284	▲209.6
Colon & Rectum (Colorectal)	198	63.9
Female Breast	192	127.1
Lung & Bronchus	171	56.5
Urinary Bladder	77	24.8
Non-Hodgkin Lymphoma	59	20.5
Kidney & Renal Pelvis	50	16.8
Leukemia	43	14.5
Uterine Corpus & Unspecified (Endometrium)	40	25.8
Thyroid	37	13.8

Dakota County		
	Number	Rate
All Sites	400	449.5
Lung & Bronchus	66	75.9
Prostate	49	▽114.2
Female Breast	47	94.3
Colon & Rectum (Colorectal)	47	53.9
Non-Hodgkin Lymphoma	20	22.8
Leukemia	15	16.3
Uterine Corpus & Unspecified (Endometrium)	14	29.8
Urinary Bladder	13	15.6
Kidney & Renal Pelvis	12	13.7
Melanoma of the Skin	11	13.0
Oral Cavity & Pharynx	11	12.4

Elkhorn Logan Valley		
	Number	Rate
All Sites	1,597	459.3
Prostate	270	170.5
Colon & Rectum (Colorectal)	222	61.0
Lung & Bronchus	210	60.1
Female Breast	207	116.8
Non-Hodgkin Lymphoma	63	18.0
Urinary Bladder	58	▽15.0
Leukemia	57	16.9
Melanoma of the Skin	55	16.6
Pancreas	41	11.4
Uterine Corpus & Unspecified (Endometrium)	38	21.7

Douglas County		
	Number	Rate
All Sites	11,281	▲502.4
Lung & Bronchus	1,736	▲79.6
Prostate	1,512	157.8
Female Breast	1,479	118.6
Colon & Rectum (Colorectal)	1,220	55.1
Urinary Bladder	508	23.1
Non-Hodgkin Lymphoma	490	21.8
Melanoma of the Skin	391	17.0
Kidney & Renal Pelvis	382	△16.7
Leukemia	330	14.5
Uterine Corpus & Unspecified (Endometrium)	289	▽23.0

Four Corners		
	Number	Rate
All Sites	1,270	459.4
Female Breast	187	133.5
Colon & Rectum (Colorectal)	182	61.9
Prostate	173	▽133.9
Lung & Bronchus	151	▽52.9
Urinary Bladder	62	20.7
Non-Hodgkin Lymphoma	51	18.3
Kidney & Renal Pelvis	46	17.0
Melanoma of the Skin	43	17.1
Uterine Corpus & Unspecified (Endometrium)	41	26.6
Leukemia	35	12.6

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. 72-73)
 Nebraska (2003-2007)

Lincoln-Lancaster County		
	Number	Rate
All Sites	5,790	485.1
Female Breast	852	131.4
Prostate	765	▼146.1
Lung & Bronchus	749	64.5
Colon & Rectum (Colorectal)	639	55.0
Melanoma of the Skin	263	▲20.9
Non-Hodgkin Lymphoma	262	22.0
Urinary Bladder	237	20.5
Uterine Corpus & Unspecified (Endometrium)	214	△32.8
Thyroid	198	▲15.4
Kidney & Renal Pelvis	173	14.3

Northeast Nebraska		
	Number	Rate
All Sites	717	▼393.9
Prostate	111	131.1
Female Breast	97	108.1
Colon & Rectum (Colorectal)	92	48.6
Lung & Bronchus	84	▼43.8
Urinary Bladder	34	16.9
Melanoma of the Skin	30	17.8
Kidney & Renal Pelvis	30	16.5
Uterine Corpus & Unspecified (Endometrium)	28	31.4
Non-Hodgkin Lymphoma	28	14.6
Leukemia	21	10.2

Loup Basin		
	Number	Rate
All Sites	1,100	475.5
Prostate	202	183.0
Lung & Bronchus	158	65.8
Colon & Rectum (Colorectal)	141	57.2
Female Breast	129	112.9
Urinary Bladder	58	22.7
Leukemia	40	16.1
Non-Hodgkin Lymphoma	38	17.2
Uterine Corpus & Unspecified (Endometrium)	28	25.7
Oral Cavity & Pharynx	28	11.5
Melanoma of the Skin	27	13.3

Panhandle		
	Number	Rate
All Sites	1,376	▼423.9
Prostate	212	138.9
Female Breast	199	123.8
Lung & Bronchus	184	▼54.3
Colon & Rectum (Colorectal)	152	▼44.5
Urinary Bladder	66	18.6
Uterine Corpus & Unspecified (Endometrium)	55	32.9
Melanoma of the Skin	52	18.5
Non-Hodgkin Lymphoma	52	▼15.3
Leukemia	48	14.6
Oral Cavity & Pharynx	46	14.1

North Central		
	Number	Rate
All Sites	1,542	454.1
Prostate	313	▲194.6
Colon & Rectum (Colorectal)	204	55.9
Female Breast	201	118.5
Lung & Bronchus	199	▼54.9
Urinary Bladder	82	22.5
Non-Hodgkin Lymphoma	59	16.9
Leukemia	55	16.9
Kidney & Renal Pelvis	42	13.2
Uterine Corpus & Unspecified (Endometrium)	39	23.6
Melanoma of the Skin	39	12.7

Public Health Solutions		
	Number	Rate
All Sites	1,779	463.3
Colon & Rectum (Colorectal)	254	60.9
Lung & Bronchus	242	60.9
Prostate	228	▼129.3
Female Breast	224	117.8
Urinary Bladder	79	18.5
Non-Hodgkin Lymphoma	74	18.5
Melanoma of the Skin	67	19.4
Uterine Corpus & Unspecified (Endometrium)	54	27.7
Thyroid	50	△16.9
Oral Cavity & Pharynx	50	13.1

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. 72-73)
 Nebraska (2003-2007)

Sarpy Cass		
	Number	Rate
All Sites	3,323	▲512.4
Female Breast	503	134.9
Lung & Bronchus	463	△74.3
Prostate	417	148.1
Colon & Rectum (Colorectal)	382	62.4
Melanoma of the Skin	154	▲21.2
Non-Hodgkin Lymphoma	139	21.8
Urinary Bladder	138	23.3
Kidney & Renal Pelvis	114	16.7
Uterine Corpus & Unspecified (Endometrium)	101	27.1
Thyroid	92	11.7

Southeast		
	Number	Rate
All Sites	1,180	▽442.2
Colon & Rectum (Colorectal)	175	61.3
Prostate	159	▽128.9
Lung & Bronchus	159	58.1
Female Breast	158	114.0
Non-Hodgkin Lymphoma	52	19.2
Urinary Bladder	49	17.0
Leukemia	41	13.7
Uterine Corpus & Unspecified (Endometrium)	40	29.4
Melanoma of the Skin	30	▽11.2
Oral Cavity & Pharynx	26	10.2

Scotts Bluff County		
	Number	Rate
All Sites	1,070	479.3
Prostate	196	△192.2
Female Breast	152	132.7
Colon & Rectum (Colorectal)	114	49.7
Lung & Bronchus	109	▼46.5
Melanoma of the Skin	58	△26.7
Urinary Bladder	50	21.0
Non-Hodgkin Lymphoma	42	▽18.3
Uterine Corpus & Unspecified (Endometrium)	40	33.0
Kidney & Renal Pelvis	40	18.2
Oral Cavity & Pharynx	33	14.6

Southwest Nebraska		
	Number	Rate
All Sites	1,085	473.1
Prostate	165	155.2
Lung & Bronchus	140	59.9
Colon & Rectum (Colorectal)	138	56.5
Female Breast	135	115.8
Urinary Bladder	72	28.1
Non-Hodgkin Lymphoma	62	25.3
Melanoma of the Skin	35	17.1
Leukemia	35	16.1
Kidney & Renal Pelvis	33	15.3
Pancreas	28	11.3

South Heartland		
	Number	Rate
All Sites	1,446	477.3
Prostate	221	161.3
Colon & Rectum (Colorectal)	207	64.7
Lung & Bronchus	200	65.5
Female Breast	195	128.9
Non-Hodgkin Lymphoma	71	23.0
Urinary Bladder	66	19.9
Melanoma of the Skin	52	18.5
Uterine Corpus & Unspecified (Endometrium)	51	31.4
Leukemia	42	13.5
Pancreas	32	10.1

Three Rivers		
	Number	Rate
All Sites	2,308	▲512.4
Prostate	451	▲219.3
Lung & Bronchus	305	66.7
Female Breast	295	126.6
Colon & Rectum (Colorectal)	294	62.9
Non-Hodgkin Lymphoma	121	△26.5
Urinary Bladder	104	22.6
Kidney & Renal Pelvis	65	15.0
Leukemia	65	14.3
Uterine Corpus & Unspecified (Endometrium)	62	27.5
Melanoma of the Skin	58	13.5

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. 72-73)
 Nebraska (2003-2007)

Two Rivers			West Central		
	Number	Rate		Number	Rate
All Sites	2,204	▼434.8	All Sites	1,362	469.3
Prostate	331	143.7	Lung & Bronchus	199	68.0
Female Breast	327	123.1	Prostate	177	▽131.1
Lung & Bronchus	271	▼53.6	Female Breast	174	117.3
Colon & Rectum (Colorectal)	262	50.8	Colon & Rectum (Colorectal)	155	51.3
Urinary Bladder	110	21.0	Urinary Bladder	67	22.3
Non-Hodgkin Lymphoma	86	17.0	Non-Hodgkin Lymphoma	64	22.3
Uterine Corpus & Unspecified (Endometrium)	74	27.6	Leukemia	56	19.1
Kidney & Renal Pelvis	74	14.4	Kidney & Renal Pelvis	44	15.3
Leukemia	67	13.3	Melanoma of the Skin	42	15.2
Oral Cavity & Pharynx	61	12.3	Uterine Corpus & Unspecified (Endometrium)	36	22.8
Pancreas	61	11.0			

- ▽ local rate is significantly lower than the state rate (95% confidence level)
- ▼ local rate is significantly lower than the state rate (99% confidence level)
- △ local rate is significantly higher than the state rate (95% confidence level)
- ▲ local rate is significantly higher than the state rate (99% confidence level)

Excluding gender-specific sites, all rates are 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 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. 72-73)
 Nebraska (2003-2007)

Central		
	Number	Rate
All Sites	714	170.2
Lung & Bronchus	186	45.5
Colon & Rectum (Colorectal)	68	15.9
Female Breast	49	22.1
Pancreas	38	9.3
Prostate	37	21.4
Non-Hodgkin Lymphoma	35	8.0
Leukemia	33	7.5
Urinary Bladder	26	6.1
Myeloma	22	5.2
Ovary	21	9.0

East Central		
	Number	Rate
All Sites	556	177.0
Lung & Bronchus	135	43.2
Colon & Rectum (Colorectal)	86	△26.9
Female Breast	47	28.7
Pancreas	31	10.0
Prostate	26	19.4
Non-Hodgkin Lymphoma	25	7.7
Leukemia	21	6.4
Ovary	16	10.2
Esophagus	16	5.2
Brain & Other Nervous System	15	5.5

Dakota County		
	Number	Rate
All Sites	172	194.5
Lung & Bronchus	45	51.3
Colon & Rectum (Colorectal)	15	17.6
Female Breast	12	22.9
Prostate	11	32.3
Leukemia	11	11.7
Liver & Intrahepatic Bile Duct	9	10.7
Non-Hodgkin Lymphoma	9	10.4
Pancreas	8	9.3
Kidney & Renal Pelvis	7	8.3
Esophagus	5	**
Oral Cavity & Pharynx	5	**

Elkhorn Logan Valley		
	Number	Rate
All Sites	607	162.7
Lung & Bronchus	156	43.9
Colon & Rectum (Colorectal)	75	19.0
Female Breast	52	24.4
Pancreas	36	9.8
Prostate	32	19.7
Non-Hodgkin Lymphoma	24	6.8
Leukemia	22	5.9
Brain & Other Nervous System	19	5.6
Kidney & Renal Pelvis	16	4.2
Ovary	15	7.6

Douglas County		
	Number	Rate
All Sites	4,202	▲190.9
Lung & Bronchus	1,234	▲56.8
Colon & Rectum (Colorectal)	420	19.0
Female Breast	303	23.6
Pancreas	245	11.3
Prostate	206	25.9
Leukemia	154	7.0
Non-Hodgkin Lymphoma	154	7.0
Urinary Bladder	109	△5.0
Liver & Intrahepatic Bile Duct	106	4.7
Ovary	104	8.2

Four Corners		
	Number	Rate
All Sites	508	168.4
Lung & Bronchus	118	40.7
Colon & Rectum (Colorectal)	63	20.0
Female Breast	38	21.7
Prostate	30	21.9
Pancreas	29	9.9
Non-Hodgkin Lymphoma	28	8.4
Ovary	20	13.2
Leukemia	20	6.4
Urinary Bladder	17	4.9
Kidney & Renal Pelvis	16	5.6

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. 72-73)
 Nebraska (2003-2007)

Lincoln-Lancaster County		
	Number	Rate
All Sites	2,079	176.8
Lung & Bronchus	577	49.9
Colon & Rectum (Colorectal)	203	17.0
Female Breast	148	21.8
Pancreas	131	11.3
Prostate	100	24.1
Non-Hodgkin Leukemia	99	8.5
Leukemia	89	7.5
Brain & Other Nervous System	68	5.6
Ovary	59	8.9
Kidney & Renal Pelvis	48	4.0

Northeast Nebraska		
	Number	Rate
All Sites	320	160.2
Lung & Bronchus	71	▽36.8
Colon & Rectum (Colorectal)	45	21.1
Female Breast	21	16.2
Prostate	19	21.0
Myeloma	15	7.3
Non-Hodgkin Lymphoma	14	7.2
Pancreas	13	6.4
Kidney & Renal Pelvis	12	6.4
Leukemia	12	5.6
Brain & Other Nervous System	10	5.6

Loup Basin		
	Number	Rate
All Sites	422	166.3
Lung & Bronchus	108	44.4
Colon & Rectum (Colorectal)	48	18.5
Female Breast	29	18.6
Prostate	28	24.0
Leukemia	25	9.7
Pancreas	20	8.0
Esophagus	14	6.0
Kidney & Renal Pelvis	14	5.0
Ovary	12	8.9
Myeloma	12	4.5

Panhandle		
	Number	Rate
All Sites	638	183.1
Lung & Bronchus	145	41.7
Colon & Rectum (Colorectal)	68	18.1
Female Breast	43	24.8
Prostate	42	27.6
Pancreas	37	10.7
Leukemia	35	10.3
Ovary	27	△15.5
Non-Hodgkin Lymphoma	26	7.4
Uterine Corpus & Unspecified (Endometrium)	18	8.8
Kidney & Renal Pelvis	18	5.4

North Central		
	Number	Rate
All Sites	602	▽159.2
Lung & Bronchus	164	45.1
Colon & Rectum (Colorectal)	89	22.6
Prostate	41	23.4
Female Breast	29	▽15.2
Pancreas	28	7.7
Leukemia	22	5.5
Non-Hodgkin Lymphoma	21	5.3
Uterine Corpus & Unspecified (Endometrium)	17	7.8
Brain & Other Nervous System	17	4.9
Esophagus	16	4.8

Public Health Solutions		
	Number	Rate
All Sites	743	172.1
Lung & Bronchus	177	43.5
Colon & Rectum (Colorectal)	92	20.0
Prostate	59	30.3
Female Breast	48	21.2
Pancreas	42	9.7
Non-Hodgkin Lymphoma	32	7.1
Kidney & Renal Pelvis	26	6.2
Ovary	24	9.6
Leukemia	24	5.3
Esophagus	20	4.8
Urinary Bladder	20	4.0

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. 72-73)
 Nebraska (2003-2007)

Sarpy Cass		
	Number	Rate
All Sites	1,064	181.6
Lung & Bronchus	301	49.7
Colon & Rectum (Colorectal)	103	18.0
Female Breast	83	23.4
Pancreas	58	10.4
Prostate	47	24.4
Leukemia	43	7.3
Non-Hodgkin Lymphoma	40	6.8
Brain & Other Nervous System	39	5.8
Esophagus	38	6.2
Liver & Intrahepatic Bile Duct	34	6.1

Southeast		
	Number	Rate
All Sites	511	171.2
Lung & Bronchus	131	46.2
Colon & Rectum (Colorectal)	75	23.3
Prostate	35	25.7
Female Breast	33	19.3
Leukemia	27	7.9
Non-Hodgkin Lymphoma	24	8.2
Pancreas	23	7.7
Brain & Other Nervous System	20	8.1
Uterine Corpus & Unspecified (Endometrium)	11	5.5
Kidney & Renal Pelvis	11	3.6

Scotts Bluff County		
	Number	Rate
All Sites	393	164.4
Lung & Bronchus	98	40.8
Colon & Rectum (Colorectal)	42	17.3
Prostate	26	18.7
Female Breast	23	22.6
Pancreas	20	8.6
Non-Hodgkin Lymphoma	18	7.4
Kidney & Renal Pelvis	14	6.0
Leukemia	14	5.8
Esophagus	12	5.5
Ovary	11	8.0

Southwest Nebraska		
	Number	Rate
All Sites	431	170.4
Lung & Bronchus	106	44.8
Colon & Rectum (Colorectal)	48	18.4
Non-Hodgkin Lymphoma	32	11.6
Female Breast	31	23.1
Pancreas	29	11.4
Prostate	24	21.0
Leukemia	24	8.9
Kidney & Renal Pelvis	14	5.4
Urinary Bladder	13	4.9
Ovary	9	5.4

South Heartland		
	Number	Rate
All Sites	556	170.7
Lung & Bronchus	156	50.5
Colon & Rectum (Colorectal)	52	14.9
Female Breast	36	19.7
Prostate	32	22.6
Non-Hodgkin Lymphoma	25	7.3
Pancreas	23	6.9
Leukemia	21	6.1
Ovary	20	11.2
Brain & Other Nervous System	15	5.1
Urinary Bladder	15	4.1

Three Rivers		
	Number	Rate
All Sites	871	181.9
Lung & Bronchus	231	49.9
Colon & Rectum (Colorectal)	114	22.8
Pancreas	53	10.8
Female Breast	49	17.8
Non-Hodgkin Lymphoma	49	10.0
Prostate	46	24.1
Leukemia	28	6.0
Brain & Other Nervous System	24	5.8
Urinary Bladder	24	4.7
Myeloma	21	4.2

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. 72-73)
 Nebraska (2003-2007)

Two Rivers		
	Number	Rate
All Sites	924	174.6
Lung & Bronchus	214	41.5
Colon & Rectum (Colorectal)	88	15.7
Female Breast	81	28.2
Prostate	72	32.4
Pancreas	58	10.6
Leukemia	47	9.0
Non-Hodgkin Lymphoma	33	6.2
Brain & Other Nervous System	30	6.0
Kidney & Renal Pelvis	25	4.6
Ovary	22	4.2

West Central		
	Number	Rate
All Sites	543	180.0
Lung & Bronchus	146	49.3
Colon & Rectum (Colorectal)	59	18.7
Female Breast	37	23.0
Prostate	30	24.0
Pancreas	25	8.1
Leukemia	23	7.5
Esophagus	19	6.7
Non-Hodgkin Lymphoma	17	5.6
Brain & Other Nervous System	15	5.6
Urinary Bladder	15	4.9

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

- ▽ local rate is significantly lower than the state rate (95% confidence level)
- ▼ local rate is significantly lower than the state rate (99% confidence level)
- △ local rate is significantly higher than the state rate (95% confidence level)
- ▲ local rate is significantly higher than the state rate (99% confidence level)

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

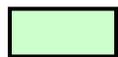
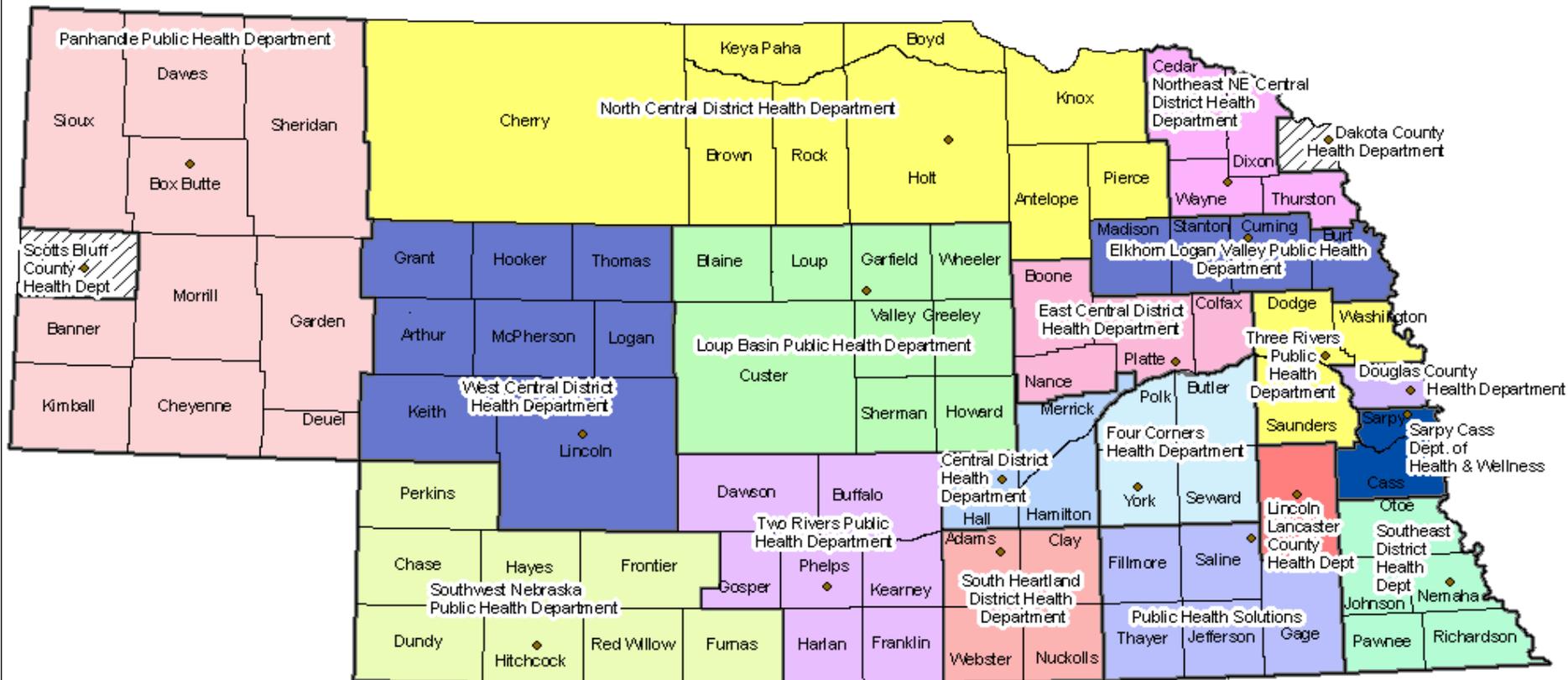
Local Public Health Department Regions in Nebraska

<u>#</u>	<u>Health Department</u>	<u>Area of Coverage, by County</u>
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 2007

Nebraska Department of Health and Human Services



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

Cancer Registry

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

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

Other States:

Sioux City, IA--Mercy Medical Center

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

THE NEBRASKA DEPARTMENT OF HEALTH AND HUMAN SERVICES
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