

The purpose of this report is to summarize lung cancer incidence and mortality data and trends for the City of Cleveland from 2017-2021. The brief also summarizes the distribution of events by demographics such as age, race, sex, and neighborhood of residence and can aid to develop targeted programming.

What is Lung Cancer?

Cancer is a disease in which some of the body's cells grow uncontrollably. When cancer starts in the lungs, it is called lung cancer. Of all cancers, lung cancer accounts for highest number of cancer deaths in the US and the world. Lung cancer is often detected when the disease is advanced since it can be symptomless in the early stages. The two general types of lung cancer are Small cell lung cancer and Non-small cell lung cancer.

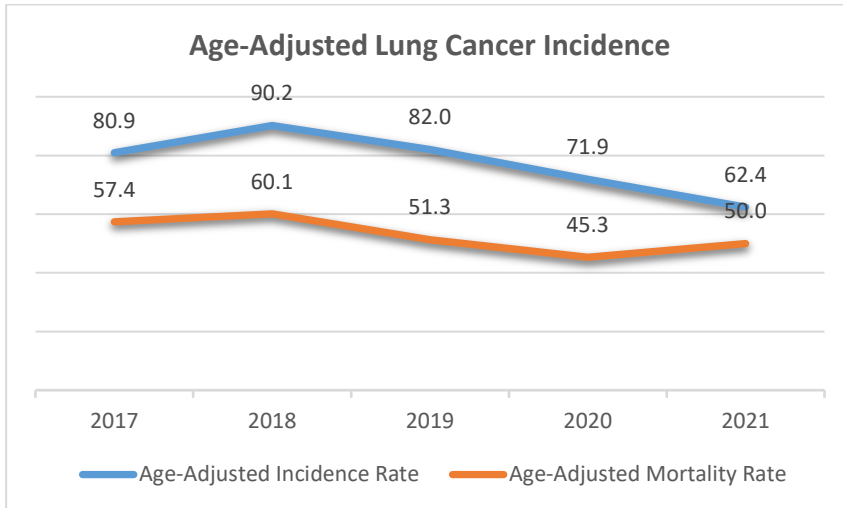
Between 2017 and 2021

1,764

Cleveland residents were diagnosed with lung cancer

1,165

Cleveland residents died from lung cancer



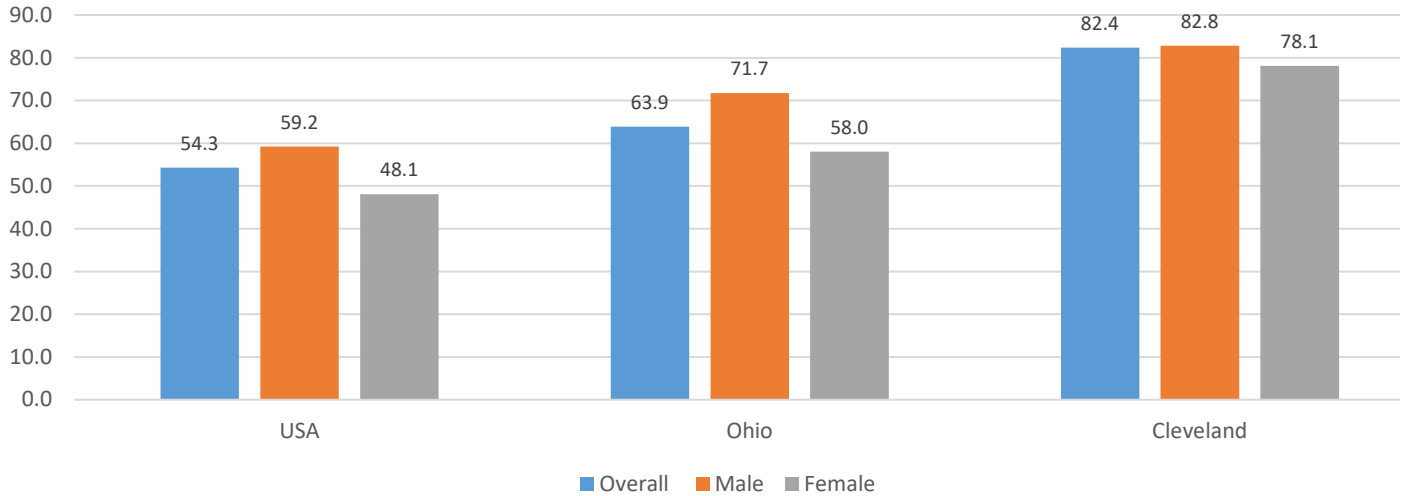
Between the years of 2017 and 2021, Cleveland saw an average of 352 new lung cancer diagnoses and 233 lung cancer deaths per year.

Although still high, there was a 22% decrease in the age-adjusted incidence rate of cancer between 2017 and 2021. Age-adjusted cancer mortality saw a more modest decrease of 12% in the same period.

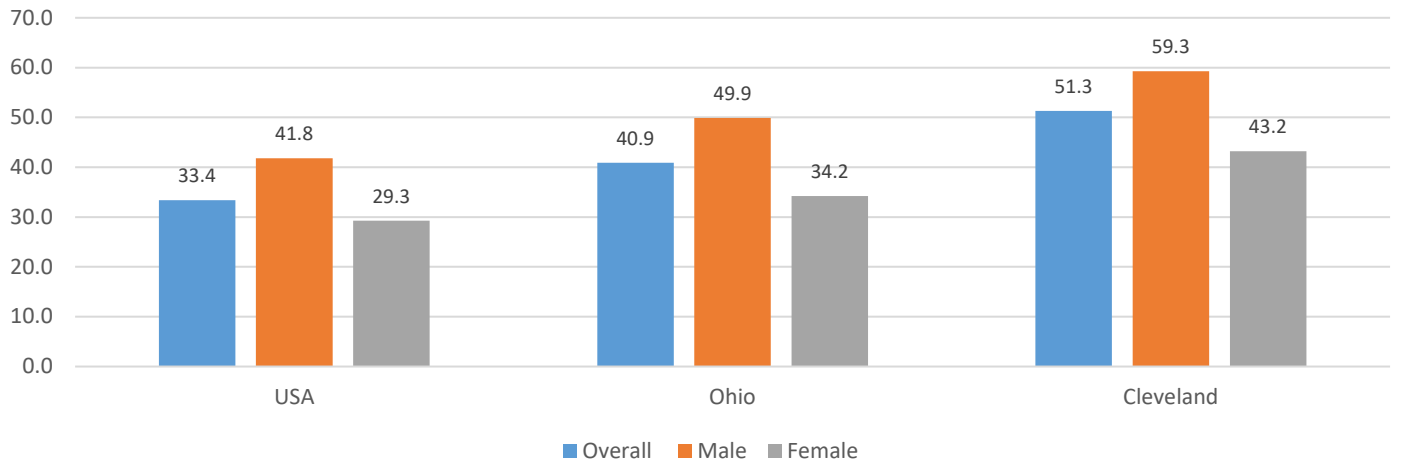
Source: Ohio Cancer Incidence Surveillance System, Ohio Department of Health; Surveillance, Epidemiology, and End Results Program, National Cancer Institute.
*Rates calculated per 100,000 residents and adjusted to the 2000 U.S. standard population. Mayo Clinic <https://www.mayoclinic.org/diseases-conditions/lung-cancer/symptoms-causes/syc-20374620>

Comparison of Lung Cancer Rates 2019

Age-Adjusted Incidence Rates



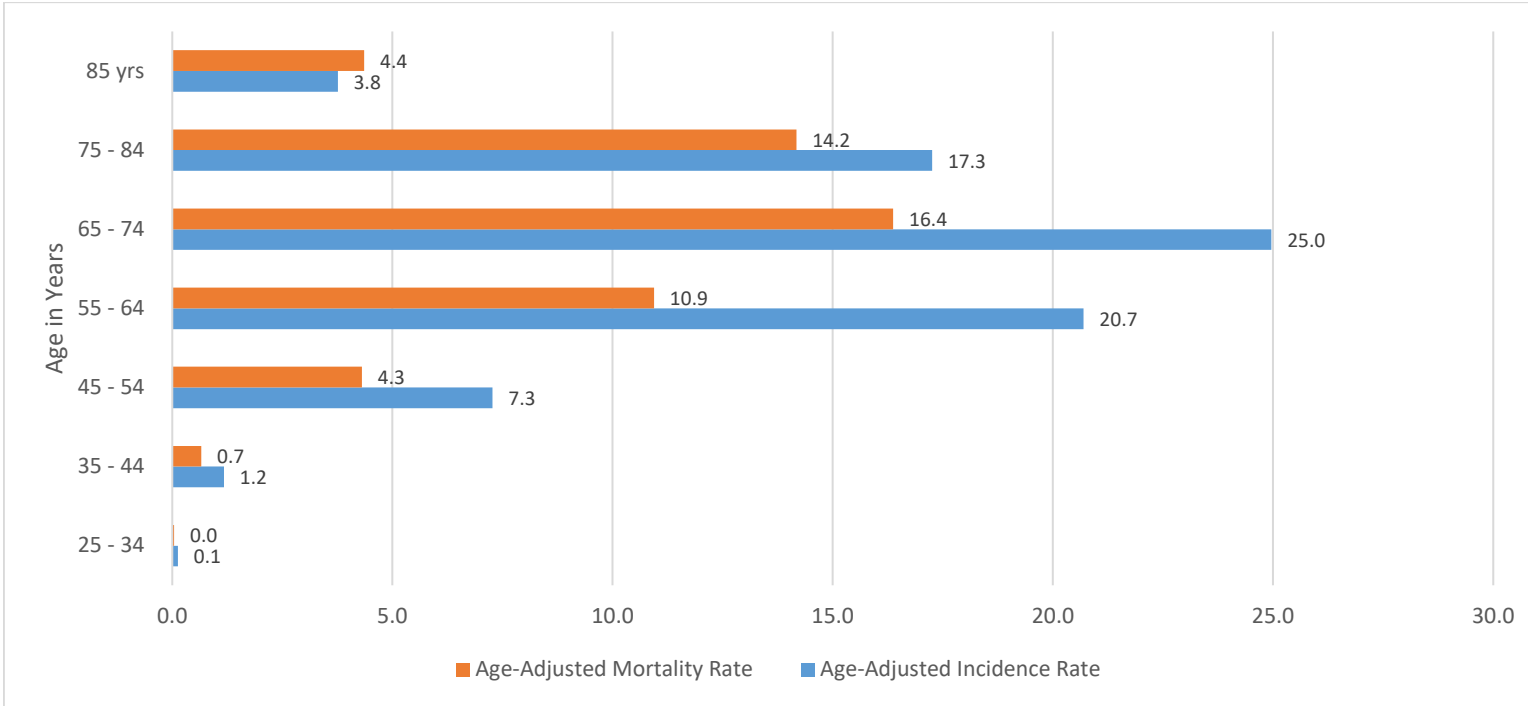
Age-Adjusted Mortality Rates



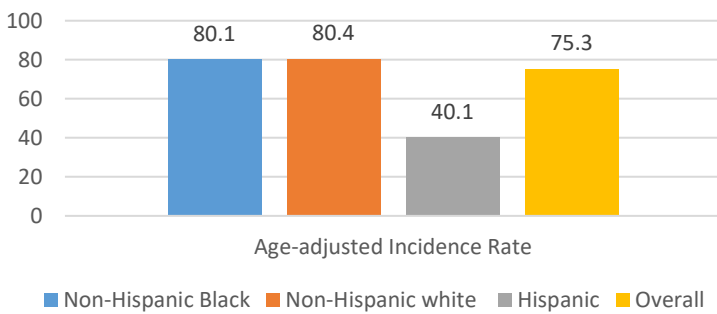
When compared to the country and the State of Ohio, Cleveland has a higher age-adjusted incidence and mortality rate for lung cancers.

Source: Ohio Cancer Incidence Surveillance System, Ohio Department of Health; Surveillance, Epidemiology, and End Results Program, National Cancer Institute for Cleveland numbers; CDC/National Center for Health Statistics/Division of Analysis and Epidemiology; Ohio Annual Cancer Report 2022. Ohio Department of Health, Bureau of Health Improvement.

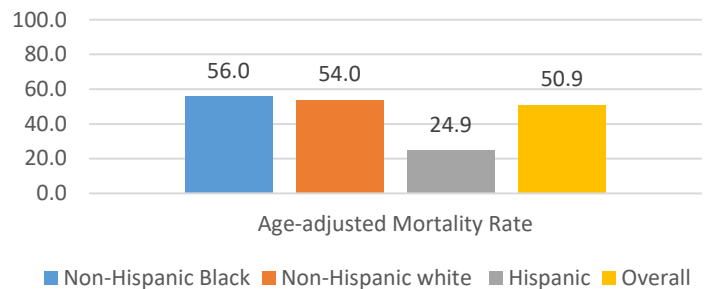
Demographic Distribution of Lung Cancer Incidence and Mortality



**Lung Cancer Incidence
2017-21**



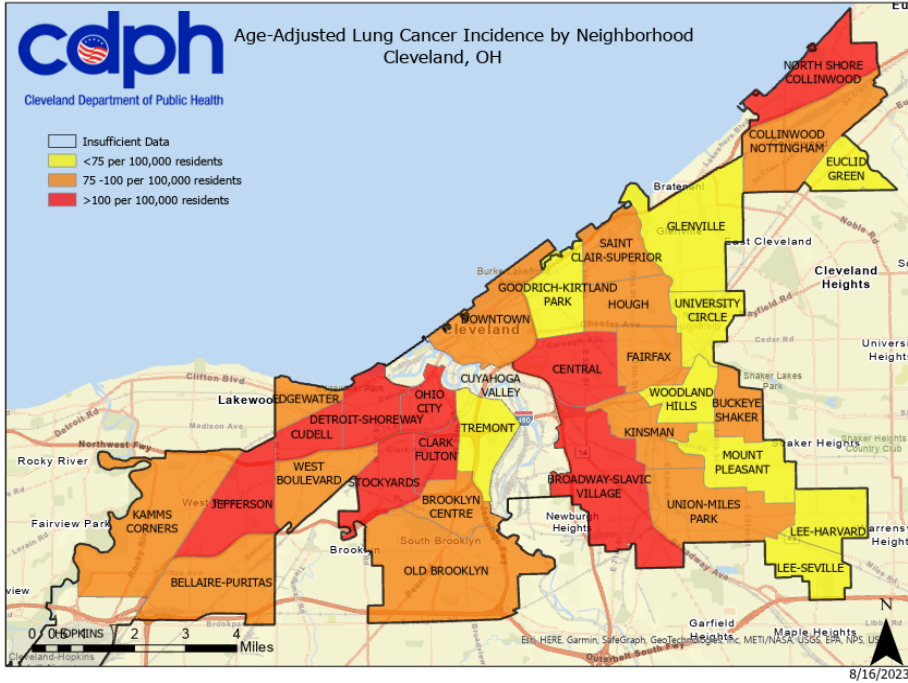
**Lung Cancer Mortality by Race
2017-21**



Between 2017 and 2021, cancer incidence and mortality was highest in the 65-74 age group. There is not a significant difference between incidence and mortality rates between the Non-Hispanic white population and Non-Hispanic Black population. Incidence and mortality rates for the Hispanic population is lowest of all race/ethnic categories.

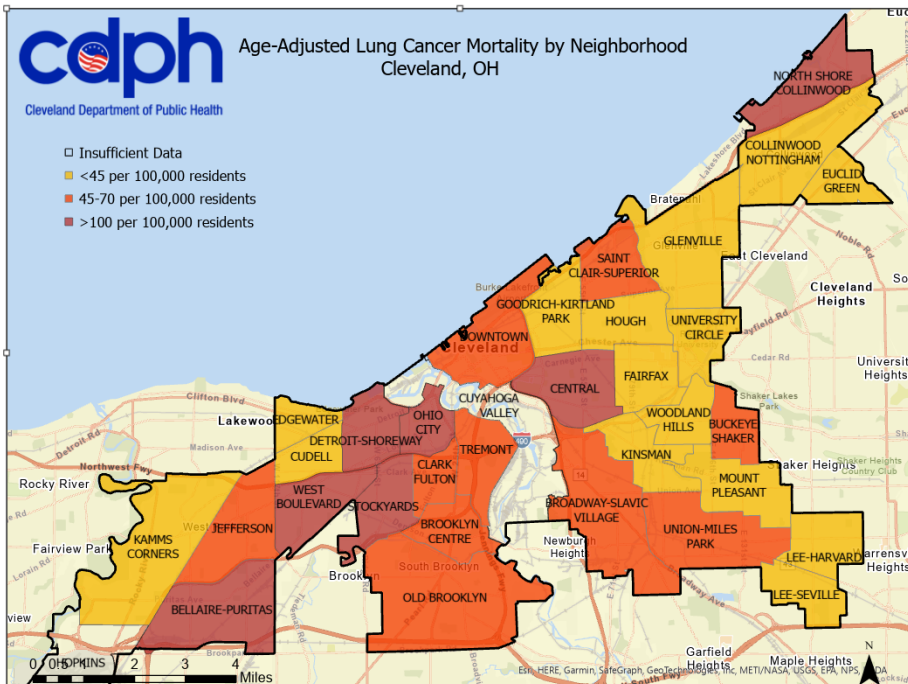
*No one under the age of 25 years was diagnosed or died from lung cancer.

Neighborhood Distribution of Cancer Incidence and Mortality



Neighborhoods that saw the highest number of new cancer cases between 2017 and 2021:

- Ohio City
- Jefferson
- North Shore Collinwood
- Central
- Stockyards
- Detroit Shoreway

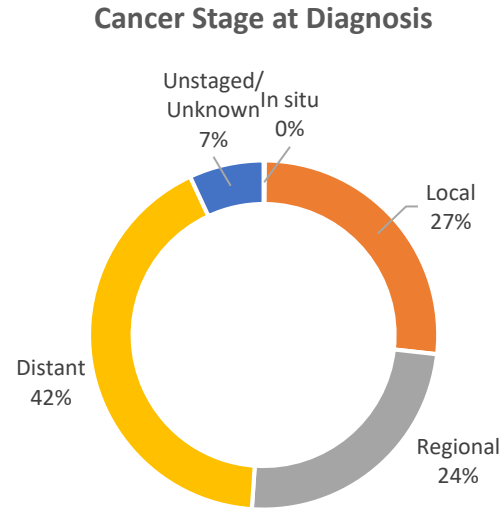


Neighborhoods that saw the highest number of deaths from cancer between 2017 and 2021:

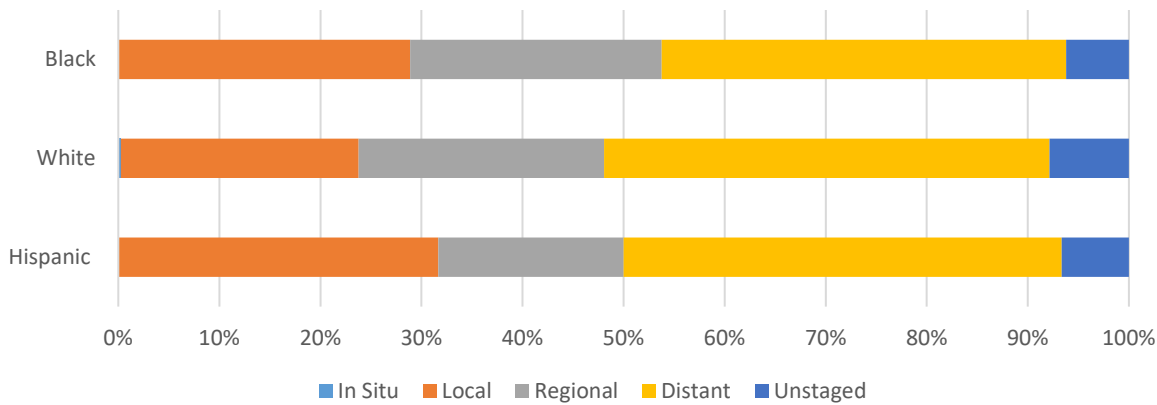
- Ohio City
- Bellaire-Puritas
- Central
- Stockyards
- North Shore Collinwood
- West Boulevard

Cancer Stage at Diagnosis

Early detection of cancer usually results in better outcomes. In Cleveland, over 65% of lung cancer was diagnosed when the cancer had already spread. Of the cases in which the cancer had spread, 42% had distant spread. This is the likely reason for a high lung cancer mortality.



Cancer Stage at Diagnosis by Race



Across the racial and ethnic groups, regional and distant cancers together comprised the majority of lung cancer cases by stage.

In situ: Abnormal cells are present but not spread to nearby tissue
 Local: Cancer is limited to the place where it started, with no sign that it has spread
 Regional: Cancer has spread to nearby lymph nodes, tissues, or organs
 Distant: Cancer has spread to distant parts of the body
 Unknown/Missing: There is not enough information to determine the stage

Risk Factors for Lung Cancer

Things we can change that affect lung cancer risk	Things we cannot change that increase lung cancer risk
<ul style="list-style-type: none"> • Smoking • Secondhand smoke • Timely screening when eligible/recommended by doctor 	<ul style="list-style-type: none"> • Family history of lung cancer • Previous radiation therapy

Environmental Risk Factors

- Air pollution
- In-home or work-related exposure to radon, asbestos, radioactive ores (e.g., uranium), arsenic, beryllium, cadmium, silica, vinyl chloride, nickel compounds, chromium compounds, coal products, mustard gas, chloromethyl ether, and diesel exhaust.

Smoking as a Risk

- Smoking is one of the greatest risk factors for lung cancer and lung cancer accounts for one third of all cancer deaths. Small cell lung cancer is generally seen among smokers.
- Smoking cessation helps reduce your risk for cancer regardless of your age or how long and how much you smoked in the past.
- Smoking causes a variety of other cancers like mouth, throat, acute myeloid leukemia, colon, rectum, liver, larynx, cervix, esophagus, stomach, bladder and pancreatic cancers.
- Two to 12 weeks after quitting, your lung function increases and coughing and shortness of breathe decreases. 10 years after quitting smoking, the risk of lung cancer risk is halved.
- Secondhand smoke (smoke from burning tobacco products, like cigarettes, cigars, hookahs, or pipes) and third-hand smoke (residue from tobacco smoke that lingers in materials like hair, clothes, and carpet long after smoking stops) also causes cancer.

Help is available! One option is the Ohio Tobacco Quit Line. Call 1-800-QUIT-NOW (1-800-784-8669) and speak with an intake specialist to help you quit all forms of tobacco.

