Success Stories

**Kentucky Cancer Registry: Using Data for Colorectal Cancer Control**

In Kentucky, acute care hospitals and their associated outpatient facilities are required to report all diagnosed cases of cancer to the Kentucky Cancer Registry. In 2001, the data indicated that colorectal cancer incidence and deaths were increasing in the state and that colorectal cancer was the second most common cause of cancer death among men and women combined in Kentucky. The data also indicated that only about one-third of Kentuckians were receiving screening tests as recommended by national guidelines.

Screening tests for colorectal cancer, including colonoscopy and sigmoidoscopy, can detect precancerous polyps and early-stage colorectal cancer when it is more treatable. To help reduce colorectal cancer rates in Kentucky, registry staff collaborated with representatives from comprehensive cancer control (CCC) programs at the state and regional level, including the Kentucky Cancer Consortium and Kentucky Cancer Program. Registry data can be used to support the need to implement interventions proven to prevent and control cancer.

Since 2001, state officials in Kentucky have been working together to use the data provided by the Kentucky Cancer Registry to reduce the state’s burden of colorectal cancer. In 1999, only 34.7% of eligible Kentuckians were screened by colonoscopy or sigmoidoscopy. In 2008, the percentage had nearly doubled, to 63.7%. Colorectal cancer incidence among men and women combined was 68.5 per 100,000 people in 2001, but had declined to 57.1 in 2006. Death rates in 2001 were 22.4 per 100,000, but declined to 18.9 in 2006.

Registry data helped to guide the decision of state officials to focus on colorectal cancer, which has resulted in fewer diagnoses of colorectal cancer among Kentuckians and fewer deaths. This success should encourage public health officials to use registry data to address other types of cancer. Registry staff continue to use the data collected each year to highlight the need for effective interventions to reduce cancer rates in the state and to monitor progress toward meeting this goal.

**Delaware Cancer Consortium: Using Strategic Planning and Sustained Partnerships**

In 2009, the CDC-funded Delaware Cancer Consortium (DCC) received the 2009 Exemplary State Comprehensive Cancer Control Implementation Award for its cancer prevention initiatives. The DCC has achieved major milestones in cancer prevention by implementing a strategic 4-year plan and partnering with the American Cancer Society, hospitals and medical practices throughout Delaware, and state policy makers.
Delaware now leads the nation in the percentage of people who have received a colonoscopy or sigmoidoscopy in the last 5 years. Screening rates for colorectal cancer in Delaware are more than 12 points higher than national rates. In addition, the state ranks 7th in the country for the percentage of women older than age 50 who have had a mammogram in the last 2 years and 11th for the percentage of women aged 18 or older who have had a Pap smear in the last 3 years.

The DCC’s efforts also have helped to reduce health disparities and cancer risk factors among population groups at higher risk. For example, smoking among Delaware adults is at an all-time low of 18.9%, and cancer incidence is declining three times faster among African Americans than among whites. By implementing a strategic plan and creating sustainable partnerships with other groups, public health officials in Delaware have been able to make tangible policy and system changes. The state serves as a model for other CCC programs throughout the United States.

**Texas Cancer Programs: Working Together to Expand Breast Cancer Screening Services**

The Texas Cancer Registry is a statewide, population-based registry that collects data to measure the state’s cancer burden, as well as its progress in preventing, diagnosing, and treating cancer among residents. In 2009, data from the registry showed that six counties in the western Dallas-Fort Worth area had the highest incidence of invasive breast cancer in the state. These counties are Tarrant (which includes the city of Fort Worth), Denton, Wise, Parker, Hood, and Johnson. These 6 counties cover about 5,000 square miles and have a combined population of nearly 3 million people. Registry data also indicated that access to mammography screening in these counties was limited and that screening rates for breast cancer were low.

To address this public health problem, researchers at the University of Texas Southwestern Medical Center’s Moncrief Cancer Institute proposed expanding the institute’s Breast Cancer Screening and Patient Navigation (BSPAN) program. The BSPAN program works to remove geographic and financial barriers that prevent women from getting the services they need and helps patients navigate the health care system. It was developed on the basis of guidelines from the 2005 Texas Cancer Plan, which is the foundation of the Texas CCC Program.

Because of the BSPAN program’s success in the primarily urban Tarrant County, researchers proposed expanding it into Tarrant’s rural, underserved neighboring counties. Staff working in the BSPAN program and the Moncrief Cancer Institute met with epidemiologists in the Texas Cancer Registry and the Texas Breast and Cervical Cancer Screening program to discuss the best way to analyze registry data and coordinate their efforts. BSPAN program staff also applied for funding from the new Cancer Prevention and Research Institute of Texas.

The application for this funding highlighted the program’s collaborations with other state organizations and provided data from the Texas Cancer Registry to demonstrate the need for expanded services in areas with high rates of disease and low rates of screening. It also proposed that registry data be used to monitor and evaluate the program’s success.

The application was successful, and the BSPAN program received more than $900,000 to expand its services into Denton, Wise, Parker, Hood, and Johnson counties. This expansion will increase access to breast cancer screening, diagnostic mammograms, and biopsies, which should help to reduce cancer rates among women in these counties.

### Breast Cancer Screening Prevalence, 2008

![Breast Cancer Screening Prevalence Map](image)

* Mammogram use in past 2 years among women aged 50–74 years in the United States.