

# CANYON COUNTY CANCER PROFILE

*A publication from the Cancer Data Registry of Idaho,  
Idaho Hospital Association.*

## **Cancer Incidence 2017–2021 Cancer Mortality 2018–2022 BRFSS 2011–2022**

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### CANCER

Cancer is a group of over 100 different diseases, each characterized by the uncontrolled growth and spread of abnormal cells. Cancer risk increases with age and varies by gender and race. As the average age of the population increases, the incidence of cancer will increase as well.

An estimated 42% of all cancers in the United States are due to personal lifestyle factors, such as smoking and sedentary lifestyle, and are preventable (10.3322/caac.21440). Cancers are also attributable to environmental factors and gene-environment interactions. Other non-modifiable factors, such as age, sex, and family history of specific cancers, are also associated with cancer risk and can help identify people at elevated risk for developing cancer.

For some cancers, early detection can save lives. For example, colorectal cancer screening reduces mortality in adults aged 50–75 years (10.1001/jama.2017.3332). Improved primary prevention, early detection, and effective treatment can reduce the burden of cancer in Idaho.

### RISK FACTORS AND INTERVENTIONS

#### **Aging:**

As the population ages, the number of new cancer cases and cancer deaths that occur each year will continue to increase. This trend could be reversed through significant improvements in primary prevention, early detection, and treatment.

#### **Smoking:**

Smoking and the use of smokeless tobacco are responsible for most cancers of the lung, trachea, bronchus, larynx, pharynx, oral cavity, and esophagus. Smoking is the leading cause of preventable death in the United States (PMID: 24455788).

#### **Diet:**

The U.S. Departments of Agriculture and Health and Human Services recommend the following dietary guidelines: eat a variety of foods; choose a diet with plenty of fruits, vegetables, and whole-grain products; limit the use of sugar, salt, and solid fats; and minimize alcoholic beverage consumption. For details, see <https://www.dietaryguidelines.gov>

#### **Screening:**

Early detection through screening reduces morbidity and mortality for cancers that can be diagnosed early and treated.

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### FOR MORE INFORMATION

Cancer Data Registry of Idaho  
P.O. Box 1278  
Boise, ID 83701  
208-489-1380  
<https://www.idcancer.org>

National Cancer Institute  
Cancer Information Services  
1-800-4CANCER  
<https://www.cancer.gov/contact>

American Cancer Society  
<https://www.cancer.org>

## CANCER INCIDENCE 2017–2021

Nearly one in two Idahoans are estimated to develop cancer during their lifetime. During 2017–2021, 47,333 cases of invasive cancer were diagnosed among Idaho residents, and 5,568 cases of invasive cancer were diagnosed among Canyon County residents (Table 1).

**Table 1:** Incidence of All Cancers, Female Breast, Prostate, Lung and Bronchus, and Colorectal Cancers in Canyon County and the State of Idaho, 2017–2021

Cancer Incidence 2017–2021	Canyon County	State of Idaho
All Sites/Types	5,568	47,333
Female Breast	867	6,943
Prostate	770	6,766
Lung & Bronchus	602	4,959
Colorectal	420	3,632

Table 3 (*Cancer Incidence 2017–2021, Comparison between Canyon County and the Remainder of the State of Idaho*) shows the number of observed cases, person-years, crude rates, age- and sex-adjusted rates, expected number of cases based upon age- and sex-specific rates in the remainder of Idaho, and p-values for tests comparing the number of observed and expected cases in Canyon County. The table also shows the number of observed cases, person-

years, and crude rates for the remainder of the state of Idaho. Comparisons between the county and the remainder of the state were made for all cancers combined, 23 invasive cancer types, in situ breast cancer, non-malignant brain and other central nervous system tumors, and pediatric (0–19 years) cancer. Separate comparisons for males, females, and both sexes combined are included.

As shown in Table 3, the crude incidence rate of invasive cancer in Canyon County was 483.5 cases per 100,000 person-years per year during 2017–2021. Comparing this crude rate with the crude rate for the remainder of Idaho (532.7) gives an estimate of the relative burden of disease in Canyon County.

The age- and sex-adjusted incidence rate of invasive cancer in Canyon County, all sites combined, was 549.2 cases per 100,000 persons per year during 2017–2021. There were statistically significantly more cases of cancer in Canyon County (5,568) than expected (5,400.3) based upon rates in the remainder of the state ( $p=.023$ ).

There are many reasons why cancer incidence rates differ by county, such as the prevalence of smoking and other lifestyle factors, and access to healthcare.

## CANCER MORTALITY 2018–2022

During 2018–2022, cancer was the second leading cause of death in Idaho; 15,233 Idaho residents and 1,802 Canyon County residents died from cancer during this period. Most cancer deaths are from five primary sites: lung, colon, pancreas, female breast, and prostate (Table 2).

**Table 2:** Overall and Cancer Mortality in Canyon County and the State of Idaho, 2018–2022

Mortality 2018–2022	Canyon County	State of Idaho
All Deaths	9,406	80,538
Cancer Deaths	1,802	15,233
% of All Deaths	19.2%	18.9%
Lung & Bronchus	358	2,937
Colorectal	167	1,332
Pancreas	134	1,190
Female Breast	145	1,111
Prostate	96	997

Table 4 (*Cancer Mortality 2018–2022, Comparison between Canyon County and the Remainder of the State of Idaho*) shows the number of observed deaths, person-years, crude rates, age- and sex-adjusted rates, expected number of deaths based upon age- and sex-specific rates in the remainder of Idaho, and p-values for tests comparing the number of observed and expected deaths for Canyon County. The table also shows the number of observed deaths, person-years, and crude rates for the remainder of the state of Idaho. Comparisons between the county and the remainder of the state were made for all deaths, all cancer deaths, and 21 specific cancer types. Separate comparisons for males, females, and both sexes combined are included.

The age- and sex-adjusted cancer mortality rate for Canyon County, all sites combined, was 177.6 deaths per 100,000 persons per year during 2018–2022, compared with 167.3 for the remainder of the state. There were statistically significantly more cancer deaths in Canyon County (1,802) than expected (1,698.2) based upon rates in the remainder of the state ( $p=.013$ ).

**Statistical Note:** Rates and percentages based upon 12 or fewer cases or deaths (numerator) should be interpreted with caution.

**Data Note:** Mortality data may differ slightly from published official statistics from the Bureau of Vital Records and Health Statistics.

**TABLE 3: CANCER INCIDENCE 2017–2021**  
**COMPARISON BETWEEN CANYON COUNTY AND THE REMAINDER OF THE STATE OF IDAHO**

Cancer Site/Type	Sex	Canyon County						Remainder of Idaho		
		Observed Cases	Person Years	Crude Rate (1)	A.A.I. Rate (1,2)	Expected Cases (3)	P-Value (4)	Observed Cases	Person Years	Crude Rate (1)
All Sites Combined	Total	5,568	1,151,652	483.5	549.2	5,400.3	0.023 >>	41,765	7,840,454	532.7
All Sites Combined	Male	2,915	572,328	509.3	589.5	2,805.5	0.040 >>	22,355	3,939,945	567.4
All Sites Combined	Female	2,653	579,324	457.9	511.5	2,580.8	0.159	19,410	3,900,509	497.6
Bladder	Total	264	1,151,652	22.9	26.8	245.9	0.264	1,956	7,840,454	24.9
Bladder	Male	211	572,328	36.9	43.7	191.6	0.175	1,562	3,939,945	39.6
Bladder	Female	53	579,324	9.1	10.6	50.7	0.784	394	3,900,509	10.1
Brain - malignant	Total	73	1,151,652	6.3	6.9	78.5	0.580	584	7,840,454	7.4
Brain - malignant	Male	43	572,328	7.5	8.3	44.7	0.875	339	3,939,945	8.6
Brain - malignant	Female	30	579,324	5.2	5.6	33.5	0.624	245	3,900,509	6.3
Brain and other CNS - non-malignant	Total	220	1,151,652	19.1	21.2	175.3	0.001 >>	1,327	7,840,454	16.9
Brain and other CNS - non-malignant	Male	75	572,328	13.1	14.5	55.6	0.015 >>	425	3,939,945	10.8
Brain and other CNS - non-malignant	Female	145	579,324	25.0	27.7	120.9	0.036 >>	902	3,900,509	23.1
Breast	Total	872	1,151,652	75.7	84.7	805.5	0.022 >>	6,136	7,840,454	78.3
Breast	Male	5	572,328	0.9	1.0	7.5	0.485	60	3,939,945	1.5
Breast	Female	867	579,324	149.7	166.1	813.3	0.064	6,076	3,900,509	155.8
Breast - in situ	Total	166	1,151,652	14.4	16.0	159.5	0.627	1,203	7,840,454	15.3
Breast - in situ	Male	-	572,328	-	-	0.5	1.000	4	3,939,945	0.1
Breast - in situ	Female	166	579,324	28.7	31.5	162.0	0.772	1,199	3,900,509	30.7
Cervix	Female	46	579,324	7.9	8.2	35.7	0.111	248	3,900,509	6.4
Colorectal	Total	420	1,151,652	36.5	41.3	416.5	0.876	3,212	7,840,454	41.0
Colorectal	Male	229	572,328	40.0	45.7	222.5	0.681	1,748	3,939,945	44.4
Colorectal	Female	191	579,324	33.0	37.1	193.0	0.922	1,464	3,900,509	37.5
Corpus Uteri	Female	181	579,324	31.2	35.0	155.7	0.051	1,173	3,900,509	30.1
Esophagus	Total	57	1,151,652	4.9	5.7	57.2	1.000	450	7,840,454	5.7
Esophagus	Male	48	572,328	8.4	9.8	47.3	0.960	381	3,939,945	9.7
Esophagus	Female	9	579,324	1.6	1.8	8.9	1.000	69	3,900,509	1.8
Hodgkin Lymphoma	Total	32	1,151,652	2.8	2.9	27.0	0.380	190	7,840,454	2.4
Hodgkin Lymphoma	Male	16	572,328	2.8	3.0	15.5	0.976	113	3,939,945	2.9
Hodgkin Lymphoma	Female	16	579,324	2.8	2.8	11.3	0.223	77	3,900,509	2.0
Kidney and Renal Pelvis	Total	260	1,151,652	22.6	25.5	220.1	0.010 >>	1,691	7,840,454	21.6
Kidney and Renal Pelvis	Male	163	572,328	28.5	32.5	146.1	0.179	1,147	3,939,945	29.1
Kidney and Renal Pelvis	Female	97	579,324	16.7	18.7	72.3	0.006 >>	544	3,900,509	13.9
Larynx	Total	26	1,151,652	2.3	2.6	24.5	0.822	194	7,840,454	2.5
Larynx	Male	21	572,328	3.7	4.3	18.0	0.541	146	3,939,945	3.7
Larynx	Female	5	579,324	0.9	1.0	6.3	0.807	48	3,900,509	1.2
Leukemia	Total	205	1,151,652	17.8	20.1	198.3	0.653	1,522	7,840,454	19.4
Leukemia	Male	117	572,328	20.4	23.2	117.4	1.000	919	3,939,945	23.3
Leukemia	Female	88	579,324	15.2	17.0	79.9	0.392	603	3,900,509	15.5
Liver and Bile Duct	Total	109	1,151,652	9.5	10.9	93.8	0.133	734	7,840,454	9.4
Liver and Bile Duct	Male	79	572,328	13.8	16.1	64.3	0.083	515	3,939,945	13.1
Liver and Bile Duct	Female	30	579,324	5.2	5.9	28.6	0.844	219	3,900,509	5.6
Lung and Bronchus	Total	602	1,151,652	52.3	60.9	549.2	0.027 >>	4,357	7,840,454	55.6
Lung and Bronchus	Male	315	572,328	55.0	65.0	268.0	0.006 >>	2,180	3,939,945	55.3
Lung and Bronchus	Female	287	579,324	49.5	57.1	280.4	0.710	2,177	3,900,509	55.8
Melanoma of the Skin	Total	317	1,151,652	27.5	30.9	370.1	0.005 <<	2,827	7,840,454	36.1
Melanoma of the Skin	Male	193	572,328	33.7	38.7	215.6	0.128	1,702	3,939,945	43.2
Melanoma of the Skin	Female	124	579,324	21.4	23.4	152.7	0.019 <<	1,125	3,900,509	28.8
Myeloma	Total	90	1,151,652	7.8	9.0	81.2	0.354	638	7,840,454	8.1
Myeloma	Male	44	572,328	7.7	9.0	50.1	0.430	403	3,939,945	10.2
Myeloma	Female	46	579,324	7.9	9.1	30.5	0.011 >>	235	3,900,509	6.0
Non-Hodgkin Lymphoma	Total	231	1,151,652	20.1	22.8	228.0	0.860	1,761	7,840,454	22.5
Non-Hodgkin Lymphoma	Male	139	572,328	24.3	27.7	128.1	0.358	1,007	3,939,945	25.6
Non-Hodgkin Lymphoma	Female	92	579,324	15.9	18.0	99.0	0.521	754	3,900,509	19.3
Oral Cavity and Pharynx	Total	145	1,151,652	12.6	14.4	150.6	0.685	1,170	7,840,454	14.9
Oral Cavity and Pharynx	Male	107	572,328	18.7	21.5	105.1	0.877	833	3,939,945	21.1
Oral Cavity and Pharynx	Female	38	579,324	6.6	7.4	44.2	0.393	337	3,900,509	8.6
Ovary	Female	66	579,324	11.4	12.7	65.1	0.941	487	3,900,509	12.5
Pancreas	Total	153	1,151,652	13.3	15.4	169.3	0.223	1,335	7,840,454	17.0
Pancreas	Male	82	572,328	14.3	16.8	92.2	0.311	744	3,939,945	18.9
Pancreas	Female	71	579,324	12.3	14.1	76.5	0.576	591	3,900,509	15.2
Prostate	Male	770	572,328	134.5	157.9	742.2	0.316	5,996	3,939,945	152.2
Stomach	Total	63	1,151,652	5.5	6.3	52.6	0.180	411	7,840,454	5.2
Stomach	Male	39	572,328	6.8	7.9	33.6	0.389	268	3,939,945	6.8
Stomach	Female	24	579,324	4.1	4.7	18.7	0.269	143	3,900,509	3.7
Testis	Male	30	572,328	5.2	5.3	35.3	0.429	244	3,939,945	6.2
Thyroid	Total	105	1,151,652	9.1	9.6	150.7	0.000 <<	1,080	7,840,454	13.8
Thyroid	Male	28	572,328	4.9	5.3	45.9	0.006 <<	344	3,939,945	8.7
Thyroid	Female	77	579,324	13.3	13.7	105.9	0.004 <<	736	3,900,509	18.9
Pediatric Age 0 to 19	Total	56	352,913	15.9	15.9	60.4	0.626	369	2,146,411	17.2
Pediatric Age 0 to 19	Male	29	180,490	16.1	16.1	30.5	0.882	185	1,093,831	16.9
Pediatric Age 0 to 19	Female	27	172,423	15.7	15.8	29.9	0.682	184	1,052,580	17.5

Notes: 1. Rates are expressed as the number of cases per 100,000 persons per year (person-years).

2. Age and sex-adjusted incidence (A.A.I.) rates for county use age and sex-specific crude rates for the remainder of the state as standard.

3. Expected cases are based upon age and sex-specific rates for the remainder of the state of Idaho (compare to observed).

4. P-values compare observed and expected cases, are two tailed, based upon the Poisson probability distribution.

"<<" denotes significantly fewer cases observed than expected, ">>" denotes significantly more cases observed than expected (p=.05).

Statistical Note: Rates based upon 12 or fewer cases (numerator) should be interpreted with caution.

**TABLE 4: CANCER MORTALITY 2018–2022**  
**COMPARISON BETWEEN CANYON COUNTY AND THE REMAINDER OF THE STATE OF IDAHO**

Cause of Death Cancer Site/Type	Sex	Canyon County						Remainder of Idaho		
		Observed Deaths	Person Years	Crude Rate (1)	A.A.M. Rate (1,2)	Expected Deaths (3)	P-Value (4)	Observed Deaths	Person Years	Crude Rate (1)
All Causes of Death	Total	9,406	1,185,680	793.3	927.5	8,988.2	0.000 >>	71,129	8,025,714	886.3
All Causes of Death	Male	5,007	590,340	848.2	993.8	4,714.4	0.000 >>	37,779	4,037,357	935.7
All Causes of Death	Female	4,399	595,340	738.9	866.6	4,244.8	0.019 >>	33,350	3,988,357	836.2
All Malignant Cancers	Total	1,802	1,185,680	152.0	177.6	1,698.2	0.013 >>	13,431	8,025,714	167.3
All Malignant Cancers	Male	974	590,340	165.0	195.6	895.6	0.010 >>	7,261	4,037,357	179.8
All Malignant Cancers	Female	828	595,340	139.1	160.7	797.1	0.282	6,170	3,988,357	154.7
Bladder	Total	46	1,185,680	3.9	4.6	54.1	0.299	439	8,025,714	5.5
Bladder	Male	37	590,340	6.3	7.6	40.7	0.635	338	4,037,357	8.4
Bladder	Female	9	595,340	1.5	1.8	12.7	0.370	101	3,988,357	2.5
Brain and Other Nervous System	Total	57	1,185,680	4.8	5.4	60.5	0.712	461	8,025,714	5.7
Brain and Other Nervous System	Male	28	590,340	4.7	5.4	33.6	0.379	261	4,037,357	6.5
Brain and Other Nervous System	Female	29	595,340	4.9	5.5	26.7	0.701	200	3,988,357	5.0
Breast	Total	145	1,185,680	12.2	14.2	124.9	0.084	979	8,025,714	12.2
Breast	Male	-	590,340	-	-	1.6	0.400	13	4,037,357	0.3
Breast	Female	145	595,340	24.4	27.9	125.7	0.098	966	3,988,357	24.2
Cervix	Female	20	595,340	3.4	3.6	9.5	0.004 >>	68	3,988,357	1.7
Colorectal	Total	167	1,185,680	14.1	16.3	148.7	0.149	1,165	8,025,714	14.5
Colorectal	Male	98	590,340	16.6	19.3	79.7	0.052	634	4,037,357	15.7
Colorectal	Female	69	595,340	11.6	13.4	68.6	0.992	531	3,988,357	13.3
Corpus Uteri	Female	23	595,340	3.9	4.4	18.9	0.406	146	3,988,357	3.7
Esophagus	Total	56	1,185,680	4.7	5.5	51.4	0.555	405	8,025,714	5.0
Esophagus	Male	46	590,340	7.8	9.2	42.8	0.661	345	4,037,357	8.5
Esophagus	Female	10	595,340	1.7	1.9	7.7	0.500	60	3,988,357	1.5
Hodgkin Lymphoma	Total	5	1,185,680	0.4	0.5	2.6	0.240	20	8,025,714	0.2
Hodgkin Lymphoma	Male	3	590,340	0.5	0.6	1.4	0.323	11	4,037,357	0.3
Hodgkin Lymphoma	Female	2	595,340	0.3	0.4	1.2	0.664	9	3,988,357	0.2
Kidney	Total	50	1,185,680	4.2	5.0	42.2	0.260	336	8,025,714	4.2
Kidney	Male	29	590,340	4.9	5.8	26.8	0.715	217	4,037,357	5.4
Kidney	Female	21	595,340	3.5	4.2	15.1	0.171	119	3,988,357	3.0
Larynx	Total	13	1,185,680	1.1	1.3	7.9	0.121	63	8,025,714	0.8
Larynx	Male	11	590,340	1.9	2.2	6.6	0.144	54	4,037,357	1.3
Larynx	Female	2	595,340	0.3	0.4	1.2	0.676	9	3,988,357	0.2
Leukemia	Total	88	1,185,680	7.4	8.7	73.0	0.096	577	8,025,714	7.2
Leukemia	Male	57	590,340	9.7	11.4	42.1	0.032 >>	340	4,037,357	8.4
Leukemia	Female	31	595,340	5.2	6.0	30.5	0.978	237	3,988,357	5.9
Liver and Bile Duct	Total	80	1,185,680	6.7	7.8	70.7	0.296	555	8,025,714	6.9
Liver and Bile Duct	Male	51	590,340	8.6	10.2	46.3	0.525	372	4,037,357	9.2
Liver and Bile Duct	Female	29	595,340	4.9	5.6	23.8	0.332	183	3,988,357	4.6
Lung and Bronchus	Total	358	1,185,680	30.2	35.5	324.3	0.068	2,579	8,025,714	32.1
Lung and Bronchus	Male	202	590,340	34.2	40.7	164.5	0.005 >>	1,339	4,037,357	33.2
Lung and Bronchus	Female	156	595,340	26.2	30.5	159.0	0.852	1,240	3,988,357	31.1
Melanoma of the Skin	Total	32	1,185,680	2.7	3.1	34.3	0.773	269	8,025,714	3.4
Melanoma of the Skin	Male	24	590,340	4.1	4.8	21.9	0.703	176	4,037,357	4.4
Melanoma of the Skin	Female	8	595,340	1.3	1.5	12.2	0.284	93	3,988,357	2.3
Myeloma	Total	36	1,185,680	3.0	3.6	36.1	1.000	289	8,025,714	3.6
Myeloma	Male	19	590,340	3.2	3.9	20.6	0.834	169	4,037,357	4.2
Myeloma	Female	17	595,340	2.9	3.3	15.3	0.731	120	3,988,357	3.0
Non-Hodgkin Lymphoma	Total	71	1,185,680	6.0	7.0	62.4	0.304	497	8,025,714	6.2
Non-Hodgkin Lymphoma	Male	35	590,340	5.9	7.0	34.0	0.908	275	4,037,357	6.8
Non-Hodgkin Lymphoma	Female	36	595,340	6.0	7.1	28.1	0.172	222	3,988,357	5.6
Oral Cavity and Pharynx	Total	30	1,185,680	2.5	2.9	31.1	0.936	245	8,025,714	3.1
Oral Cavity and Pharynx	Male	17	590,340	2.9	3.4	21.7	0.365	175	4,037,357	4.3
Oral Cavity and Pharynx	Female	13	595,340	2.2	2.5	9.0	0.253	70	3,988,357	1.8
Ovary	Female	32	595,340	5.4	6.2	42.6	0.111	329	3,988,357	8.2
Pancreas	Total	134	1,185,680	11.3	13.2	133.6	0.998	1,056	8,025,714	13.2
Pancreas	Male	73	590,340	12.4	14.6	71.4	0.880	577	4,037,357	14.3
Pancreas	Female	61	595,340	10.2	11.9	61.8	0.987	479	3,988,357	12.0
Prostate	Male	96	590,340	16.3	19.8	108.2	0.260	901	4,037,357	22.3
Stomach	Total	38	1,185,680	3.2	3.7	20.0	0.000 >>	156	8,025,714	1.9
Stomach	Male	22	590,340	3.7	4.3	12.2	0.014 >>	97	4,037,357	2.4
Stomach	Female	16	595,340	2.7	3.1	7.8	0.013 >>	59	3,988,357	1.5

Notes: 1. Rates are expressed as the number of cases per 100,000 persons per year (person-years).

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3. Expected cases are based upon age and sex-specific rates for the remainder of the state of Idaho (compare to observed).

4. P-values compare observed and expected cases, are two tailed, based upon the Poisson probability distribution.

"<<" denotes significantly fewer cases observed than expected, ">>" denotes significantly more cases observed than expected (p=.05).

Statistical Notes: Rates based upon 12 or fewer cases (numerator) should be interpreted with caution.

Mortality statistics presented differ from BVRHS official statistics due to differences in methodology.

Data Source: Bureau of Vital Records and Health Statistics (BVRHS), Division of Public Health, Idaho Department of Health and Welfare, 2023.

## Cancer Screening and Risk Factors

The Division of Public Health (DPH), Idaho Department of Health and Welfare, under a cooperative agreement with the Centers for Disease Control and Prevention, has conducted telephone Behavioral Risk Factor Surveys since 1984. These surveys are conducted with randomly selected adult Idahoans to measure population prevalences of risk factors for major causes of death in the U.S., including cancer. DPH provided Behavioral Risk Factor Surveillance System (BRFSS) data from 2011 through 2022 to CDRI staff, who performed the analyses reported in these *County Profiles*. Analysis weights were post-stratified to 2022 population estimates by age group, sex, and county, beginning with the BRFSS raked weights. Not all questions were asked in all years. Crude prevalence estimates are presented herein; a minimum of 50 respondents was required to generate county-level statistics. Results may differ from IDHW reports due to differences in methods. Cancer screening and risk factor measures were selected to assist in monitoring *Comprehensive Cancer Alliance for Idaho* (CCAI) objectives. Wald log-linear chi-square statistics were used to test for independence of the selected measures and other variables, such as age and race, taking the complex survey design into account.

### Cancer Screening and Risk Factor Prevalence Estimates, 2011–2022

Measure	State of Idaho	HD 1	HD 2	HD 3	HD 4	HD 5	HD 6	HD 7	Canyon County
<b>Access to Care</b>									
Have Health Insurance, Age < 65 (2021–2022)	90.0%	89.3%	87.8%	86.4%	92.6%	87.2%	89.1%	92.6%	86.2%
Not See Doctor Due to Cost in Past Year (2020–2022)	10.4%	9.5%	11.0%	11.0%	10.2%	10.2%	10.4%	11.3%	10.4%
<b>Cancer Screening</b>									
Mammogram Past 2 Years, Age 40–74 (2014–2022, even years)	62.9%	61.0%	70.0%	60.3%	66.1%	58.9%	61.0%	62.5%	61.5%
Pap Test Past 3 Years, Cervix Intact Age 21–65 (2018, 2020)	71.1%	73.7%	73.6%	70.9%	72.9%	69.4%	69.3%	65.5%	72.3%
Colorectal Cancer Screening, Age 45–75 (2022)	63.3%	61.0%	62.5%	60.8%	67.2%	65.0%	60.4%	60.2%	58.7%
<b>Tobacco Use</b>									
Current Tobacco User (2020–2022)	22.1%	24.3%	20.4%	24.8%	21.3%	22.5%	22.6%	18.1%	23.8%
<b>Other Cancer-Related</b>									
Healthy Weight by Body Mass Index, Age 20+ (2020–2022)	30.0%	30.0%	30.1%	26.5%	33.7%	27.5%	26.7%	30.2%	26.6%
Any Physical Activity Besides Job Past 30 Days (2018–2022)	79.1%	79.0%	78.0%	75.4%	82.7%	75.2%	76.7%	81.0%	75.7%
Meet Physical Activity Guidelines (2011, 2013, 2015, 2017, 2019)	22.0%	22.8%	19.2%	20.0%	25.2%	19.5%	20.4%	20.3%	20.7%
Home Ever Tested for Radon (2016, 2018, 2020)	22.9%	30.8%	18.3%	16.9%	25.2%	20.1%	23.0%	21.0%	17.0%

#### Access to Care

##### Have Health Insurance – 2021–2022

Statewide, 90.0% of adults aged 18–64 reported having health care coverage. Health care coverage differed significantly by race/ethnicity, with 91.4% of white non-Hispanics, compared to 81.5% of Hispanics and 90.5% of Native Americans, having health insurance. Spanish-speaking respondents were significantly less likely to be insured (46.0%) than English-speaking respondents (90.5%). Health care coverage differed significantly by age of respondent, with 87.2% of persons aged 18–29, and 93.4% of persons aged 50–64, having health insurance. Health care coverage differed significantly by county, with a range of 64.8% in Idaho County to 95.9% in Shoshone County having health insurance.

##### Not See Doctor Due to Cost in Past Year – 2020–2022

Statewide, 10.4% of adults aged 18+ reported they needed to see a doctor but could not because of cost sometime in the past 12 months. Inability to see a doctor due to cost differed significantly by race/ethnicity (9.2% of white non-Hispanics, 16.9% of Hispanics, and 15.7% of Native Americans). Inability to see a doctor due to cost differed significantly by annual household income (21.9% for less than \$15,000, 5.8% for greater than \$50,000).

\*\* Current for colorectal cancer screening means a blood stool test in the past year, sigmoidoscopy in the past 5 years and blood stool test in the past 3 years, blood stool DNA test in the past 3 years, virtual colonoscopy in the past 5 years, or a colonoscopy in the past 10 years.

#### Cancer Screening

##### Mammogram – 2014–2022, even years

Statewide, 62.9% of women aged 40–74 reported having a mammogram in the past 2 years. Insured women were about twice as likely to have had a mammogram in the past 2 years (66.3% versus 31.2%). Mammography rates differed significantly by county, with a range in screening of 41.6% in Owyhee County to 76.1% in Nez Perce County. In 2022, Idaho ranked 49<sup>th</sup> among states and the District of Columbia for mammography screening rates among women aged 40+.

##### Pap Test – 2018, 2020

Statewide, 71.1% of women with an intact cervix and aged 21–65 reported having a Pap test in the past 3 years. Women with health insurance were significantly more likely to have timely Pap screening than uninsured women (75.0% versus 52.8% screened in the past 3 years). Pap screening differed significantly by county, with a range of 50.6% in Bingham County to 78.9% in Bannock County. In 2020, Idaho ranked 49<sup>th</sup> among states and the District of Columbia for Pap screening rate.

##### Colorectal Cancer Screening – 2022

Statewide, 63.3% of adults aged 45–75 reported being current for colorectal cancer screening.\*\* Persons with health insurance were over twice as likely to be current for colorectal cancer screening. In 2022, Idaho ranked 42<sup>nd</sup> among states and the District of Columbia in the percentage of adults aged 45–75 and older who reported being up-to-date for colorectal cancer screening.

## Cancer Screening and Risk Factors

### Tobacco Use

#### Current Tobacco Use – 2020–2022

Current tobacco use includes at least 1 form of cigarettes; cigars, cigarillos, filtered little cigars; regular pipes, water pipes, hookah; e-cigarettes; and/or smokeless tobacco products every day or some days. Statewide, 22.1% of adults aged 18 and older were current tobacco users. Tobacco use differed significantly by age of respondent, with 28.9% of persons aged 18–29, and 10.7% of persons aged 65 and older reporting current tobacco use. Tobacco use was lower among white non-Hispanics (21.5%) than among Native Americans (38.0%). Tobacco use differed significantly by county, with a range of 6.1% in Madison County to 33.5% in Elmore County. Counties with higher rates of tobacco use had significantly higher rates of lung cancer.

### Other Cancer-Related

#### Healthy Weight by Body Mass Index – 2020–2022

Statewide, 30.0% of adults aged 20 and older were in the healthy weight range as measured by body mass index (BMI 18.5–24.9). BMI differed significantly by race/ethnicity, with 30.5% of white non-Hispanics, compared to 25.8% of Hispanics and 21.5% of Native Americans, being in the healthy weight range. Males (24.4%) were significantly less likely to be in the healthy weight range than females (35.7%). BMI differed significantly by age of respondent, with 41.1% of persons aged 18–29, and 23.4% of persons aged 50–64, being in the healthy weight range. BMI differed significantly by county, with a range of 11.7% in Power County to 44.3% in Blaine County of adults being in the healthy weight range.

#### Any Physical Activity – 2018-2022

CCAI is measuring physical activity with two metrics: Any physical activity besides job in past 30 days and meeting aerobic and strength physical activity guidelines during the past month or week. Statewide, 79.1% of adults aged 18 and older reported physical activity besides their job in the past 30 days. Physical activity differed significantly by age of respondent, with 83.7% of persons aged 18–29, and 72.5% of persons aged 65+, reporting any physical activity besides their job. The percentage of adults reporting any physical activity differed significantly by county, with a range of 66.9% in Oneida County to 88.3% in Teton County. Counties with higher rates of physical activity had significantly lower rates of overall and colorectal cancer.

#### Physical Activity Guidelines – 2011, 2013, 2015, 2017, 2019

Statewide, 22.0% of adults aged 18 and older met aerobic and strength physical activity guidelines during the past month or week. Meeting physical activity guidelines differed significantly by age of respondent, with 26.2% of persons aged 18–29, and 19.2% of persons aged 50–64, meeting guidelines. The percentage of adults meeting physical activity guidelines differed significantly by county, with a range of 9.5% in Franklin County to 30.7% in Blaine County.

#### Home Radon Testing – 2016, 2018, 2020

Statewide, 22.9% of adults have ever tested their house for radon. Radon test usage varied significantly by race/ethnicity, with 25.1% of white non-Hispanics, 7.3% of Hispanics, and 25.4% of Native Americans having ever tested their house for radon. Radon test usage was higher for persons aged 50+ than for younger persons. Home radon testing differed significantly by county, with a range of 8.7% in Cassia County to 54.7% in Blaine County.

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This project has been funded in whole or in part with Federal funds from the National Cancer Institute, National Institutes of Health, Department of Health and Human Services, under Contract No. HHSN261201800006I and the Centers for Disease Control and Prevention, Department of Health and Human Services, under Cooperative Agreement NU58DP007160. The findings and conclusions in this report are those of the authors and do not necessarily represent the official position of the Centers for Disease Control and Prevention or the National Cancer Institute.