ELMORE 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

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.

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 719 cases of invasive cancer were diagnosed among Elmore County residents (Table 1).

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

Cancer Incidence 2017–2021	Elmore County	State of Idaho
All Sites/Types	**719**	**47,333**
Female Breast	**80**	**6,943**
Prostate	**83**	**6,766**
Lung & Bronchus	**114**	**4,959**
Colorectal	**69**	**3,632**

Table 3 (*Cancer Incidence 2017–2021, Comparison between Elmore 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 Elmore 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 Elmore County was 521.1 cases per 100,000 person-years per year during 2017–2021. Comparing this crude rate with the crude rate for the remainder of Idaho (526.5) gives an estimate of the relative burden of disease in Elmore County.

The age- and sex-adjusted incidence rate of invasive cancer in Elmore County, all sites combined, was 592.8 cases per 100,000 persons per year during 2017–2021. There were statistically significantly more cases of cancer in Elmore County (719) than expected (638.5) based upon rates in the remainder of the state (p=.002).

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 234 Elmore 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 Elmore County and the State of Idaho, 2018–2022

Mortality 2018–2022	Elmore County	State of Idaho
All Deaths	**1,169**	**80,538**
Cancer Deaths	**234**	**15,233**
% of All Deaths	*20.0%*	*18.9%*
Lung & Bronchus	**66**	**2,937**
Colorectal	**24**	**1,332**
Pancreas	**20**	**1,190**
Female Breast	**5**	**1,111**
Prostate	**12**	**997**

Table 4 (*Cancer Mortality 2018–2022, Comparison between Elmore 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 Elmore 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 Elmore County, all sites combined, was 192.1 deaths per 100,000 persons per year during 2018–2022, compared with 165.4 for the remainder of the state. There were statistically significantly more cancer deaths in Elmore County (234) than expected (201.4) based upon rates in the remainder of the state (p=.027).

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 ELMORE COUNTY AND THE REMAINDER OF THE STATE OF IDAHO

Cancer Site/Type	Sex	Elmore 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	719	137,978	521.1	592.8	638.5	0.002 >>	46,614	8,854,128	526.5
All Sites Combined	Male	375	72,389	518.0	613.2	342.9	0.091	24,895	4,439,884	560.7
All Sites Combined	Female	344	65,589	524.5	574.2	294.7	0.006 >>	21,719	4,414,244	492.0
Bladder	Total	43	137,978	31.2	36.2	29.2	0.020 >>	2,177	8,854,128	24.6
Bladder	Male	36	72,389	49.7	60.5	23.3	0.017 >>	1,737	4,439,884	39.1
Bladder	Female	7	65,589	10.7	11.8	5.9	0.755	440	4,414,244	10.0
Brain - malignant	Total	11	137,978	8.0	8.7	9.2	0.645	646	8,854,128	7.3
Brain - malignant	Male	7	72,389	9.7	10.8	5.5	0.626	375	4,439,884	8.4
Brain - malignant	Female	4	65,589	6.1	6.5	3.8	1.000	271	4,414,244	6.1
Brain and other CNS - non-malignant	Total	25	137,978	18.1	20.4	21.1	0.450	1,522	8,854,128	17.2
Brain and other CNS - non-malignant	Male	8	72,389	11.1	12.7	7.0	0.795	492	4,439,884	11.1
Brain and other CNS - non-malignant	Female	17	65,589	25.9	28.3	14.0	0.495	1,030	4,414,244	23.3
Breast	Total	81	137,978	58.7	67.1	94.5	0.176	6,927	8,854,128	78.2
Breast	Male	1	72,389	1.4	1.6	0.9	1.000	64	4,439,884	1.4
Breast	Female	80	65,589	122.0	134.6	92.4	0.212	6,863	4,414,244	155.5
Breast - in situ	Total	24	137,978	17.4	19.9	18.3	0.229	1,345	8,854,128	15.2
Breast - in situ	Male	-	72,389	-	-	0.1	1.000	4	4,439,884	0.1
Breast - in situ	Female	24	65,589	36.6	40.6	18.0	0.200	1,341	4,414,244	30.4
Cervix	Female	4	65,589	6.1	6.5	4.1	1.000	290	4,414,244	6.6
Colorectal	Total	69	137,978	50.0	57.1	48.7	0.007 >>	3,563	8,854,128	40.2
Colorectal	Male	41	72,389	56.6	66.9	26.7	0.012 >>	1,936	4,439,884	43.6
Colorectal	Female	28	65,589	42.7	47.0	22.0	0.243	1,627	4,414,244	36.9
Corpus Uteri	Female	18	65,589	27.4	30.1	18.1	1.000	1,336	4,414,244	30.3
Esophagus	Total	8	137,978	5.8	6.6	6.8	0.739	499	8,854,128	5.6
Esophagus	Male	7	72,389	9.7	11.5	5.8	0.712	422	4,439,884	9.5
Esophagus	Female	1	65,589	1.5	1.7	1.0	1.000	77	4,414,244	1.7
Hodgkin Lymphoma	Total	2	137,978	1.4	1.4	3.5	0.643	220	8,854,128	2.5
Hodgkin Lymphoma	Male	-	72,389	-	-	2.1	0.243	129	4,439,884	2.9
Hodgkin Lymphoma	Female	2	65,589	3.0	3.0	1.4	0.807	91	4,414,244	2.1
Kidney and Renal Pelvis	Total	36	137,978	26.1	29.7	26.3	0.081	1,915	8,854,128	21.6
Kidney and Renal Pelvis	Male	26	72,389	35.9	42.3	17.8	0.079	1,284	4,439,884	28.9
Kidney and Renal Pelvis	Female	10	65,589	15.2	16.7	8.6	0.713	631	4,414,244	14.3
Larynx	Total	1	137,978	0.7	0.8	3.0	0.396	219	8,854,128	2.5
Larynx	Male	1	72,389	1.4	1.6	2.3	0.672	166	4,439,884	3.7
Larynx	Female	-	65,589	-	-	0.7	0.969	53	4,414,244	1.2
Leukemia	Total	23	137,978	16.7	18.8	23.6	1.000	1,704	8,854,128	19.2
Leukemia	Male	16	72,389	22.1	25.9	14.2	0.702	1,020	4,439,884	23.0
Leukemia	Female	7	65,589	10.7	11.6	9.4	0.566	684	4,414,244	15.5
Liver and Bile Duct	Total	13	137,978	9.4	10.8	11.3	0.684	830	8,854,128	9.4
Liver and Bile Duct	Male	9	72,389	12.4	14.8	8.0	0.825	585	4,439,884	13.2
Liver and Bile Duct	Female	4	65,589	6.1	6.7	3.3	0.840	245	4,414,244	5.6
Lung and Bronchus	Total	114	137,978	82.6	95.7	65.2	0.000 >>	4,845	8,854,128	54.7
Lung and Bronchus	Male	51	72,389	70.5	85.4	32.9	0.004 >>	2,444	4,439,884	55.0
Lung and Bronchus	Female	63	65,589	96.1	106.0	32.3	0.000 >>	2,401	4,414,244	54.4
Melanoma of the Skin	Total	34	137,978	24.6	27.8	43.0	0.190	3,110	8,854,128	35.1
Melanoma of the Skin	Male	16	72,389	22.1	26.1	25.9	0.051	1,879	4,439,884	42.3
Melanoma of the Skin	Female	18	65,589	27.4	29.7	16.9	0.851	1,231	4,414,244	27.9
Myeloma	Total	8	137,978	5.8	6.7	9.7	0.730	720	8,854,128	8.1
Myeloma	Male	4	72,389	5.5	6.7	6.0	0.573	443	4,439,884	10.0
Myeloma	Female	4	65,589	6.1	6.8	3.7	1.000	277	4,414,244	6.3
Non-Hodgkin Lymphoma	Total	30	137,978	21.7	24.6	27.0	0.618	1,962	8,854,128	22.2
Non-Hodgkin Lymphoma	Male	18	72,389	24.9	29.0	15.8	0.636	1,128	4,439,884	25.4
Non-Hodgkin Lymphoma	Female	12	65,589	18.3	20.0	11.4	0.926	834	4,414,244	18.9
Oral Cavity and Pharynx	Total	17	137,978	12.3	14.1	17.7	0.988	1,298	8,854,128	14.7
Oral Cavity and Pharynx	Male	8	72,389	11.1	13.0	12.9	0.211	932	4,439,884	21.0
Oral Cavity and Pharynx	Female	9	65,589	13.7	15.1	4.9	0.128	366	4,414,244	8.3
Ovary	Female	11	65,589	16.8	18.4	7.4	0.252	542	4,414,244	12.3
Pancreas	Total	28	137,978	20.3	23.4	19.7	0.090	1,460	8,854,128	16.5
Pancreas	Male	16	72,389	22.1	26.6	11.0	0.181	810	4,439,884	18.2
Pancreas	Female	12	65,589	18.3	20.2	8.7	0.343	650	4,414,244	14.7
Prostate	Male	83	72,389	114.7	137.2	91.1	0.430	6,683	4,439,884	150.5
Stomach	Total	8	137,978	5.8	6.6	6.3	0.609	466	8,854,128	5.3
Stomach	Male	5	72,389	6.9	8.2	4.1	0.796	302	4,439,884	6.8
Stomach	Female	3	65,589	4.6	5.0	2.2	0.760	164	4,414,244	3.7
Testis	Male	6	72,389	8.3	7.4	4.9	0.733	268	4,439,884	6.0
Thyroid	Total	23	137,978	16.7	17.4	17.4	0.224	1,162	8,854,128	13.1
Thyroid	Male	4	72,389	5.5	6.1	5.4	0.749	368	4,439,884	8.3
Thyroid	Female	19	65,589	29.0	29.6	11.5	0.054	794	4,414,244	18.0
Pediatric Age 0 to 19	Total	10	37,933	26.4	26.2	6.4	0.235	415	2,461,391	16.9
Pediatric Age 0 to 19	Male	5	19,645	25.5	25.2	3.3	0.478	209	1,254,676	16.7
Pediatric Age 0 to 19	Female	5	18,288	27.3	27.4	3.1	0.411	206	1,206,715	17.1

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 ELMORE COUNTY AND THE REMAINDER OF THE STATE OF IDAHO

Cause of Death Cancer Site/Type	Sex	Elmore 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	1,169	140,474	832.2	955.1	1,070.9	0.003 >>	79,366	9,070,920	874.9
All Causes of Death	Male	640	73,916	865.8	1,020.2	580.6	0.016 >>	42,146	4,553,781	925.5
All Causes of Death	Female	529	66,558	794.8	883.2	493.5	0.118	37,220	4,517,139	824.0
All Malignant Cancers	Total	234	140,474	166.6	192.1	201.4	0.027 >>	14,999	9,070,920	165.4
All Malignant Cancers	Male	141	73,916	190.8	229.1	109.4	0.004 >>	8,094	4,553,781	177.7
All Malignant Cancers	Female	93	66,558	139.7	154.5	92.0	0.945	6,905	4,517,139	152.9
Bladder	Total	5	140,474	3.6	4.2	6.3	0.788	480	9,070,920	5.3
Bladder	Male	4	73,916	5.4	6.6	4.9	0.915	371	4,553,781	8.1
Bladder	Female	1	66,558	1.5	1.7	1.4	1.000	109	4,517,139	2.4
Brain and Other Nervous System	Total	7	140,474	5.0	5.6	7.1	1.000	511	9,070,920	5.6
Brain and Other Nervous System	Male	5	73,916	6.8	7.7	4.0	0.754	284	4,553,781	6.2
Brain and Other Nervous System	Female	2	66,558	3.0	3.3	3.1	0.811	227	4,517,139	5.0
Breast	Total	5	140,474	3.6	4.1	15.0	0.005 <<	1,119	9,070,920	12.3
Breast	Male	-	73,916	-	-	0.2	1.000	13	4,553,781	0.3
Breast	Female	5	66,558	7.5	8.3	14.7	0.007 <<	1,106	4,517,139	24.5
Cervix	Female	2	66,558	3.0	3.2	1.2	0.659	86	4,517,139	1.9
Colorectal	Total	24	140,474	17.1	19.6	17.6	0.170	1,308	9,070,920	14.4
Colorectal	Male	16	73,916	21.6	25.7	9.8	0.083	716	4,553,781	15.7
Colorectal	Female	8	66,558	12.0	13.3	7.9	1.000	592	4,517,139	13.1
Corpus Uteri	Female	1	66,558	1.5	1.7	2.2	0.701	168	4,517,139	3.7
Esophagus	Total	9	140,474	6.4	7.4	6.1	0.326	452	9,070,920	5.0
Esophagus	Male	7	73,916	9.5	11.3	5.2	0.542	384	4,553,781	8.4
Esophagus	Female	2	66,558	3.0	3.3	0.9	0.465	68	4,517,139	1.5
Hodgkin Lymphoma	Total	1	140,474	0.7	0.8	0.3	0.551	24	9,070,920	0.3
Hodgkin Lymphoma	Male	1	73,916	1.4	1.6	0.2	0.324	13	4,553,781	0.3
Hodgkin Lymphoma	Female	-	66,558	-	-	0.1	1.000	11	4,517,139	0.2
Kidney	Total	2	140,474	1.4	1.7	5.1	0.230	384	9,070,920	4.2
Kidney	Male	2	73,916	2.7	3.3	3.3	0.721	244	4,553,781	5.4
Kidney	Female	-	66,558	-	-	1.8	0.315	140	4,517,139	3.1
Larynx	Total	1	140,474	0.7	0.8	1.0	1.000	75	9,070,920	0.8
Larynx	Male	1	73,916	1.4	1.6	0.9	1.000	64	4,553,781	1.4
Larynx	Female	-	66,558	-	-	0.1	1.000	11	4,517,139	0.2
Leukemia	Total	6	140,474	4.3	4.9	8.8	0.445	659	9,070,920	7.3
Leukemia	Male	4	73,916	5.4	6.5	5.3	0.772	393	4,553,781	8.6
Leukemia	Female	2	66,558	3.0	3.3	3.5	0.632	266	4,517,139	5.9
Liver and Bile Duct	Total	10	140,474	7.1	8.2	8.4	0.674	625	9,070,920	6.9
Liver and Bile Duct	Male	6	73,916	8.1	9.6	5.7	1.000	417	4,553,781	9.2
Liver and Bile Duct	Female	4	66,558	6.0	6.6	2.8	0.606	208	4,517,139	4.6
Lung and Bronchus	Total	66	140,474	47.0	54.3	38.5	0.000 >>	2,871	9,070,920	31.7
Lung and Bronchus	Male	39	73,916	52.8	63.7	20.2	0.000 >>	1,502	4,553,781	33.0
Lung and Bronchus	Female	27	66,558	40.6	44.8	18.3	0.066	1,369	4,517,139	30.3
Melanoma of the Skin	Total	2	140,474	1.4	1.6	4.1	0.458	299	9,070,920	3.3
Melanoma of the Skin	Male	1	73,916	1.4	1.6	2.7	0.491	199	4,553,781	4.4
Melanoma of the Skin	Female	1	66,558	1.5	1.6	1.3	1.000	100	4,517,139	2.2
Myeloma	Total	5	140,474	3.6	4.1	4.3	0.847	320	9,070,920	3.5
Myeloma	Male	3	73,916	4.1	4.9	2.5	0.897	185	4,553,781	4.1
Myeloma	Female	2	66,558	3.0	3.3	1.8	1.000	135	4,517,139	3.0
Non-Hodgkin Lymphoma	Total	10	140,474	7.1	8.2	7.5	0.453	558	9,070,920	6.2
Non-Hodgkin Lymphoma	Male	9	73,916	12.2	14.5	4.1	0.049 >>	301	4,553,781	6.6
Non-Hodgkin Lymphoma	Female	1	66,558	1.5	1.7	3.4	0.285	257	4,517,139	5.7
Oral Cavity and Pharynx	Total	1	140,474	0.7	0.8	3.7	0.232	274	9,070,920	3.0
Oral Cavity and Pharynx	Male	-	73,916	-	-	2.6	0.145	192	4,553,781	4.2
Oral Cavity and Pharynx	Female	1	66,558	1.5	1.7	1.1	1.000	82	4,517,139	1.8
Ovary	Female	7	66,558	10.5	11.6	4.7	0.394	354	4,517,139	7.8
Pancreas	Total	20	140,474	14.2	16.5	15.7	0.331	1,170	9,070,920	12.9
Pancreas	Male	15	73,916	20.3	24.4	8.6	0.058	635	4,553,781	13.9
Pancreas	Female	5	66,558	7.5	8.3	7.1	0.572	535	4,517,139	11.8
Prostate	Male	12	73,916	16.2	19.9	13.0	0.921	985	4,553,781	21.6
Stomach	Total	3	140,474	2.1	2.4	2.6	0.959	191	9,070,920	2.1
Stomach	Male	3	73,916	4.1	4.8	1.6	0.424	116	4,553,781	2.5
Stomach	Female	-	66,558	-	-	1.0	0.735	75	4,517,139	1.7

Notes: 1. Rates are expressed as the number of cases per 100,000 persons per year (person-years).
2. Age and sex-adjusted mortality (A.A.M.) 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 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	Elmore County
Access to Care									
Have Health Insurance, Age < 65 (2021–2022)	90.0%	89.3%	87.8%	86.4%	92.6%	87.2%	89.1%	92.6%	89.0%
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%	10.7%
Cancer Screening									
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%	71.7%
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%	.
Colorectal Cancer Screening, Age 45–75 (2022)	63.3%	61.0%	62.5%	60.8%	67.2%	65.0%	60.4%	60.2%	.
Tobacco Use									
Current Tobacco User (2020–2022)	22.1%	24.3%	20.4%	24.8%	21.3%	22.5%	22.6%	18.1%	33.5%
Other Cancer-Related									
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%	21.5%
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%	71.6%
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%	21.4%
Home Ever Tested for Radon (2016, 2018, 2020)	22.9%	30.8%	18.3%	16.9%	25.2%	20.1%	23.0%	21.0%	12.5%

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).

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 49th 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 49th 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 42nd 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.

** 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 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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CDRI Cancer Data Registry of Idaho

Idaho Hospital Association