JEFFERSON 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 610 cases of invasive cancer were diagnosed among Jefferson County residents (Table 1).

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

Cancer Incidence 2017–2021	Jefferson County	State of Idaho
All Sites/Types	**610**	**47,333**
Female Breast	**83**	**6,943**
Prostate	**83**	**6,766**
Lung & Bronchus	**50**	**4,959**
Colorectal	**53**	**3,632**

Table 3 (*Cancer Incidence 2017–2021, Comparison between Jefferson 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 Jefferson 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 Jefferson County was 405.0 cases per 100,000 person-years per year during 2017–2021. Comparing this crude rate with the crude rate for the remainder of Idaho (528.5) gives an estimate of the relative burden of disease in Jefferson County.

The age- and sex-adjusted incidence rate of invasive cancer in Jefferson County, all sites combined, was 511.6 cases per 100,000 persons per year during 2017–2021. There were fewer cases of cancer in Jefferson County (610) than expected (630.1) based upon rates in the remainder of the state, but the difference was not statistically significant.

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 167 Jefferson 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 Jefferson County and the State of Idaho, 2018–2022

Mortality 2018–2022	Jefferson County	State of Idaho
All Deaths	**1,030**	**80,538**
Cancer Deaths	**167**	**15,233**
% of All Deaths	*16.2%*	*18.9%*
Lung & Bronchus	**26**	**2,937**
Colorectal	**12**	**1,332**
Pancreas	**17**	**1,190**
Female Breast	**18**	**1,111**
Prostate	**9**	**997**

Table 4 (*Cancer Mortality 2018–2022, Comparison between Jefferson 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 Jefferson 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 Jefferson County, all sites combined, was 144.7 deaths per 100,000 persons per year during 2018–2022, compared with 166.4 for the remainder of the state. There were fewer cancer deaths in Jefferson County (167) than expected (192.0) based upon rates in the remainder of the state, but the difference was not statistically significant.

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 JEFFERSON COUNTY AND THE REMAINDER OF THE STATE OF IDAHO

Cancer Site/Type	Sex	Jefferson 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	610	150,618	405.0	511.6	630.1	0.437	46,723	8,841,488	528.5
All Sites Combined	Male	328	76,791	427.1	537.1	343.4	0.423	24,942	4,435,482	562.3
All Sites Combined	Female	282	73,827	382.0	482.7	288.8	0.717	21,781	4,406,006	494.3
Bladder	Total	33	150,618	21.9	29.5	27.7	0.358	2,187	8,841,488	24.7
Bladder	Male	25	76,791	32.6	43.2	22.8	0.700	1,748	4,435,482	39.4
Bladder	Female	8	73,827	10.8	14.6	5.4	0.367	439	4,406,006	10.0
Brain - malignant	Total	11	150,618	7.3	8.5	9.5	0.709	646	8,841,488	7.3
Brain - malignant	Male	6	76,791	7.8	8.9	5.7	1.000	376	4,435,482	8.5
Brain - malignant	Female	5	73,827	6.8	7.9	3.9	0.686	270	4,406,006	6.1
Brain and other CNS - non-malignant	Total	22	150,618	14.6	17.8	21.3	0.930	1,525	8,841,488	17.2
Brain and other CNS - non-malignant	Male	8	76,791	10.4	12.4	7.2	0.855	492	4,435,482	11.1
Brain and other CNS - non-malignant	Female	14	73,827	19.0	23.7	13.9	1.000	1,033	4,406,006	23.4
Breast	Total	83	150,618	55.1	67.7	96.1	0.196	6,925	8,841,488	78.3
Breast	Male	-	76,791	-	-	0.9	0.829	65	4,435,482	1.5
Breast	Female	83	73,827	112.4	140.2	92.1	0.369	6,860	4,406,006	155.7
Breast - in situ	Total	14	150,618	9.3	11.2	19.1	0.287	1,355	8,841,488	15.3
Breast - in situ	Male	-	76,791	-	-	0.1	1.000	4	4,435,482	0.1
Breast - in situ	Female	14	73,827	19.0	23.3	18.4	0.365	1,351	4,406,006	30.7
Cervix	Female	5	73,827	6.8	7.4	4.4	0.902	289	4,406,006	6.6
Colorectal	Total	53	150,618	35.2	44.4	48.3	0.535	3,579	8,841,488	40.5
Colorectal	Male	35	76,791	45.6	56.3	27.2	0.171	1,942	4,435,482	43.8
Colorectal	Female	18	73,827	24.4	31.4	21.3	0.559	1,637	4,406,006	37.2
Corpus Uteri	Female	17	73,827	23.0	28.8	17.9	0.956	1,337	4,406,006	30.3
Esophagus	Total	7	150,618	4.6	6.0	6.6	0.967	500	8,841,488	5.7
Esophagus	Male	6	76,791	7.8	9.9	5.8	1.000	423	4,435,482	9.5
Esophagus	Female	1	73,827	1.4	1.8	1.0	1.000	77	4,406,006	1.7
Hodgkin Lymphoma	Total	4	150,618	2.7	2.9	3.4	0.871	218	8,841,488	2.5
Hodgkin Lymphoma	Male	2	76,791	2.6	2.9	2.0	1.000	127	4,435,482	2.9
Hodgkin Lymphoma	Female	2	73,827	2.7	2.9	1.4	0.820	91	4,406,006	2.1
Kidney and Renal Pelvis	Total	15	150,618	10.0	12.4	26.4	0.024 <<	1,936	8,841,488	21.9
Kidney and Renal Pelvis	Male	12	76,791	15.6	19.2	18.3	0.163	1,298	4,435,482	29.3
Kidney and Renal Pelvis	Female	3	73,827	4.1	5.2	8.4	0.064	638	4,406,006	14.5
Larynx	Total	1	150,618	0.7	0.9	2.9	0.427	219	8,841,488	2.5
Larynx	Male	-	76,791	-	-	2.3	0.205	167	4,435,482	3.8
Larynx	Female	1	73,827	1.4	1.7	0.7	0.985	52	4,406,006	1.2
Leukemia	Total	17	150,618	11.3	14.1	23.4	0.217	1,710	8,841,488	19.3
Leukemia	Male	16	76,791	20.8	25.6	14.4	0.737	1,020	4,435,482	23.0
Leukemia	Female	1	73,827	1.4	1.7	9.1	0.002 <<	690	4,406,006	15.7
Liver and Bile Duct	Total	11	150,618	7.3	9.3	11.1	1.000	832	8,841,488	9.4
Liver and Bile Duct	Male	8	76,791	10.4	13.0	8.2	1.000	586	4,435,482	13.2
Liver and Bile Duct	Female	3	73,827	4.1	5.3	3.2	1.000	246	4,406,006	5.6
Lung and Bronchus	Total	50	150,618	33.2	44.2	62.7	0.114	4,909	8,841,488	55.5
Lung and Bronchus	Male	29	76,791	37.8	49.6	32.5	0.611	2,466	4,435,482	55.6
Lung and Bronchus	Female	21	73,827	28.4	38.4	30.3	0.097	2,443	4,406,006	55.4
Melanoma of the Skin	Total	47	150,618	31.2	38.7	42.5	0.529	3,097	8,841,488	35.0
Melanoma of the Skin	Male	26	76,791	33.9	42.2	25.9	1.000	1,869	4,435,482	42.1
Melanoma of the Skin	Female	21	73,827	28.4	34.6	16.9	0.374	1,228	4,406,006	27.9
Myeloma	Total	6	150,618	4.0	5.2	9.4	0.344	722	8,841,488	8.2
Myeloma	Male	2	76,791	2.6	3.3	6.0	0.124	445	4,435,482	10.0
Myeloma	Female	4	73,827	5.4	7.2	3.5	0.930	277	4,406,006	6.3
Non-Hodgkin Lymphoma	Total	34	150,618	22.6	28.4	26.5	0.182	1,958	8,841,488	22.1
Non-Hodgkin Lymphoma	Male	17	76,791	22.1	27.1	15.9	0.857	1,129	4,435,482	25.5
Non-Hodgkin Lymphoma	Female	17	73,827	23.0	29.8	10.7	0.093	829	4,406,006	18.8
Oral Cavity and Pharynx	Total	15	150,618	10.0	12.5	17.6	0.633	1,300	8,841,488	14.7
Oral Cavity and Pharynx	Male	9	76,791	11.7	14.3	13.2	0.310	931	4,435,482	21.0
Oral Cavity and Pharynx	Female	6	73,827	8.1	10.5	4.8	0.696	369	4,406,006	8.4
Ovary	Female	6	73,827	8.1	10.1	7.4	0.797	547	4,406,006	12.4
Pancreas	Total	20	150,618	13.3	17.5	19.0	0.880	1,468	8,841,488	16.6
Pancreas	Male	11	76,791	14.3	18.5	10.9	1.000	815	4,435,482	18.4
Pancreas	Female	9	73,827	12.2	16.3	8.2	0.866	653	4,406,006	14.8
Prostate	Male	83	76,791	108.1	137.0	91.3	0.420	6,683	4,435,482	150.7
Stomach	Total	11	150,618	7.3	9.4	6.1	0.095	463	8,841,488	5.2
Stomach	Male	6	76,791	7.8	10.0	4.1	0.452	301	4,435,482	6.8
Stomach	Female	5	73,827	6.8	8.7	2.1	0.127	162	4,406,006	3.7
Testis	Male	1	76,791	1.3	1.4	4.4	0.130	273	4,435,482	6.2
Thyroid	Total	30	150,618	19.9	22.4	17.5	0.008 >>	1,155	8,841,488	13.1
Thyroid	Male	12	76,791	15.6	18.0	5.4	0.019 >>	360	4,435,482	8.1
Thyroid	Female	18	73,827	24.4	27.1	12.0	0.124	795	4,406,006	18.0
Pediatric Age 0 to 19	Total	6	54,536	11.0	11.2	9.2	0.376	419	2,444,788	17.1
Pediatric Age 0 to 19	Male	4	27,795	14.4	14.5	4.7	1.000	210	1,246,526	16.8
Pediatric Age 0 to 19	Female	2	26,741	7.5	7.7	4.5	0.337	209	1,198,262	17.4

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 JEFFERSON COUNTY AND THE REMAINDER OF THE STATE OF IDAHO

Cause of Death Cancer Site/Type	Sex	Jefferson 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	1,030	155,598	662.0	901.8	1,002.7	0.397	79,505	9,055,796	877.9
All Causes of Death	Male	572	79,546	719.1	947.7	560.2	0.630	42,214	4,548,151	928.2
All Causes of Death	Female	458	76,052	602.2	847.8	446.9	0.613	37,291	4,507,645	827.3
All Malignant Cancers	Total	167	155,598	107.3	144.7	192.0	0.073	15,066	9,055,796	166.4
All Malignant Cancers	Male	87	79,546	109.4	145.7	107.0	0.054	8,148	4,548,151	179.1
All Malignant Cancers	Female	80	76,052	105.2	143.1	85.8	0.578	6,918	4,507,645	153.5
Bladder	Total	6	155,598	3.9	5.5	5.7	1.000	479	9,055,796	5.3
Bladder	Male	5	79,546	6.3	8.9	4.6	0.961	370	4,548,151	8.1
Bladder	Female	1	76,052	1.3	1.9	1.3	1.000	109	4,507,645	2.4
Brain and Other Nervous System	Total	7	155,598	4.5	5.6	7.1	1.000	511	9,055,796	5.6
Brain and Other Nervous System	Male	3	79,546	3.8	4.6	4.1	0.812	286	4,548,151	6.3
Brain and Other Nervous System	Female	4	76,052	5.3	6.7	3.0	0.706	225	4,507,645	5.0
Breast	Total	18	155,598	11.6	15.3	14.4	0.399	1,106	9,055,796	12.2
Breast	Male	-	79,546	-	-	0.2	1.000	13	4,548,151	0.3
Breast	Female	18	76,052	23.7	31.7	13.8	0.313	1,093	4,507,645	24.2
Cervix	Female	1	76,052	1.3	1.5	1.3	1.000	87	4,507,645	1.9
Colorectal	Total	12	155,598	7.7	10.2	17.2	0.252	1,320	9,055,796	14.6
Colorectal	Male	8	79,546	10.1	12.8	9.9	0.684	724	4,548,151	15.9
Colorectal	Female	4	76,052	5.3	7.2	7.4	0.282	596	4,507,645	13.2
Corpus Uteri	Female	2	76,052	2.6	3.6	2.1	1.000	167	4,507,645	3.7
Esophagus	Total	3	155,598	1.9	2.6	5.9	0.314	458	9,055,796	5.1
Esophagus	Male	3	79,546	3.8	4.9	5.2	0.471	388	4,548,151	8.5
Esophagus	Female	-	76,052	-	-	0.9	0.838	70	4,507,645	1.6
Hodgkin Lymphoma	Total	1	155,598	0.6	0.9	0.3	0.532	24	9,055,796	0.3
Hodgkin Lymphoma	Male	-	79,546	-	-	0.2	1.000	14	4,548,151	0.3
Hodgkin Lymphoma	Female	1	76,052	1.3	1.8	0.1	0.233	10	4,507,645	0.2
Kidney	Total	3	155,598	1.9	2.6	4.8	0.585	383	9,055,796	4.2
Kidney	Male	-	79,546	-	-	3.2	0.079	246	4,548,151	5.4
Kidney	Female	3	76,052	3.9	5.6	1.6	0.448	137	4,507,645	3.0
Larynx	Total	-	155,598	-	-	1.0	0.744	76	9,055,796	0.8
Larynx	Male	-	79,546	-	-	0.9	0.847	65	4,548,151	1.4
Larynx	Female	-	76,052	-	-	0.1	1.000	11	4,507,645	0.2
Leukemia	Total	4	155,598	2.6	3.5	8.3	0.163	661	9,055,796	7.3
Leukemia	Male	3	79,546	3.8	5.1	5.1	0.494	394	4,548,151	8.7
Leukemia	Female	1	76,052	1.3	1.8	3.3	0.325	267	4,507,645	5.9
Liver and Bile Duct	Total	10	155,598	6.4	8.5	8.1	0.600	625	9,055,796	6.9
Liver and Bile Duct	Male	7	79,546	8.8	11.4	5.6	0.671	416	4,548,151	9.1
Liver and Bile Duct	Female	3	76,052	3.9	5.3	2.6	0.966	209	4,507,645	4.6
Lung and Bronchus	Total	26	155,598	16.7	22.8	36.6	0.084	2,911	9,055,796	32.1
Lung and Bronchus	Male	13	79,546	16.3	21.9	19.9	0.137	1,528	4,548,151	33.6
Lung and Bronchus	Female	13	76,052	17.1	23.7	16.8	0.427	1,383	4,507,645	30.7
Melanoma of the Skin	Total	6	155,598	3.9	5.0	3.9	0.392	295	9,055,796	3.3
Melanoma of the Skin	Male	5	79,546	6.3	8.1	2.6	0.254	195	4,548,151	4.3
Melanoma of the Skin	Female	1	76,052	1.3	1.7	1.3	1.000	100	4,507,645	2.2
Myeloma	Total	3	155,598	1.9	2.7	4.0	0.872	322	9,055,796	3.6
Myeloma	Male	2	79,546	2.5	3.4	2.4	1.000	186	4,548,151	4.1
Myeloma	Female	1	76,052	1.3	1.8	1.6	1.000	136	4,507,645	3.0
Non-Hodgkin Lymphoma	Total	4	155,598	2.6	3.5	7.1	0.336	564	9,055,796	6.2
Non-Hodgkin Lymphoma	Male	2	79,546	2.5	3.4	4.0	0.465	308	4,548,151	6.8
Non-Hodgkin Lymphoma	Female	2	76,052	2.6	3.7	3.1	0.822	256	4,507,645	5.7
Oral Cavity and Pharynx	Total	3	155,598	1.9	2.6	3.5	1.000	272	9,055,796	3.0
Oral Cavity and Pharynx	Male	2	79,546	2.5	3.3	2.5	1.000	190	4,548,151	4.2
Oral Cavity and Pharynx	Female	1	76,052	1.3	1.8	1.0	1.000	82	4,507,645	1.8
Ovary	Female	2	76,052	2.6	3.5	4.5	0.346	359	4,507,645	8.0
Pancreas	Total	17	155,598	10.9	14.7	15.0	0.671	1,173	9,055,796	13.0
Pancreas	Male	9	79,546	11.3	14.9	8.5	0.950	641	4,548,151	14.1
Pancreas	Female	8	76,052	10.5	14.4	6.6	0.675	532	4,507,645	11.8
Prostate	Male	9	79,546	11.3	16.1	12.2	0.457	988	4,548,151	21.7
Stomach	Total	-	155,598	-	-	2.6	0.153	194	9,055,796	2.1
Stomach	Male	-	79,546	-	-	1.6	0.408	119	4,548,151	2.6
Stomach	Female	-	76,052	-	-	1.0	0.732	75	4,507,645	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	Jefferson 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%	87.2%
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%	7.9%
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%	65.8%
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%	55.3%
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%	20.0%
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%	25.4%
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%	79.1%
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%	16.7%
Home Ever Tested for Radon (2016, 2018, 2020)	22.9%	30.8%	18.3%	16.9%	25.2%	20.1%	23.0%	21.0%	20.5%

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