MADISON 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 485 cases of invasive cancer were diagnosed among Madison County residents (Table 1).

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

Cancer Incidence 2017–2021	Madison County	State of Idaho
All Sites/Types	**485**	**47,333**
Female Breast	**75**	**6,943**
Prostate	**74**	**6,766**
Lung & Bronchus	**17**	**4,959**
Colorectal	**39**	**3,632**

Table 3 (*Cancer Incidence 2017–2021, Comparison between Madison 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 Madison 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 Madison County was 227.0 cases per 100,000 person-years per year during 2017–2021. Comparing this crude rate with the crude rate for the remainder of Idaho (533.7) gives an estimate of the relative burden of disease in Madison County.

The age- and sex-adjusted incidence rate of invasive cancer in Madison County, all sites combined, was 480.0 cases per 100,000 persons per year during 2017–2021. There were statistically significantly fewer cases of cancer in Madison County (485) than expected (539.2) based upon rates in the remainder of the state (p=.019).

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 112 Madison 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 Madison County and the State of Idaho, 2018–2022

Mortality 2018–2022	Madison County	State of Idaho
All Deaths	**983**	**80,538**
Cancer Deaths	**112**	**15,233**
% of All Deaths	*11.4%*	*18.9%*
Lung & Bronchus	**9**	**2,937**
Colorectal	**14**	**1,332**
Pancreas	**9**	**1,190**
Female Breast	**11**	**1,111**
Prostate	**9**	**997**

Table 4 (*Cancer Mortality 2018–2022, Comparison between Madison 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 Madison 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 Madison County, all sites combined, was 115.5 deaths per 100,000 persons per year during 2018–2022, compared with 168.3 for the remainder of the state. There were statistically significantly fewer cancer deaths in Madison County (112) than expected (163.3) based upon rates in the remainder of the state (p<.001).

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 MADISON COUNTY AND THE REMAINDER OF THE STATE OF IDAHO

Cancer Site/Type	Sex	Madison 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	485	213,628	227.0	480.0	539.2	0.019 <<	46,848	8,778,478	533.7
All Sites Combined	Male	240	105,405	227.7	489.1	278.7	0.020 <<	25,030	4,406,868	568.0
All Sites Combined	Female	245	108,223	226.4	471.0	259.6	0.383	21,818	4,371,610	499.1
Bladder	Total	13	213,628	6.1	14.1	23.2	0.032 <<	2,207	8,778,478	25.1
Bladder	Male	10	105,405	9.5	22.1	18.1	0.057	1,763	4,406,868	40.0
Bladder	Female	3	108,223	2.8	6.3	4.8	0.576	444	4,371,610	10.2
Brain - malignant	Total	8	213,628	3.7	6.0	9.8	0.711	649	8,778,478	7.4
Brain - malignant	Male	5	105,405	4.7	7.6	5.6	1.000	377	4,406,868	8.6
Brain - malignant	Female	3	108,223	2.8	4.4	4.2	0.787	272	4,371,610	6.2
Brain and other CNS - non-malignant	Total	23	213,628	10.8	20.8	19.2	0.442	1,524	8,778,478	17.4
Brain and other CNS - non-malignant	Male	9	105,405	8.5	15.5	6.5	0.406	491	4,406,868	11.1
Brain and other CNS - non-malignant	Female	14	108,223	12.9	25.7	12.8	0.821	1,033	4,371,610	23.6
Breast	Total	77	213,628	36.0	79.2	76.8	1.000	6,931	8,778,478	79.0
Breast	Male	2	105,405	1.9	4.3	0.7	0.290	63	4,406,868	1.4
Breast	Female	75	108,223	69.3	153.8	76.6	0.915	6,868	4,371,610	157.1
Breast - in situ	Total	11	213,628	5.1	11.5	14.8	0.391	1,358	8,778,478	15.5
Breast - in situ	Male	-	105,405	-	-	0.0	1.000	4	4,406,868	0.1
Breast - in situ	Female	11	108,223	10.2	22.8	14.9	0.379	1,354	4,371,610	31.0
Cervix	Female	4	108,223	3.7	6.8	3.9	1.000	290	4,371,610	6.6
Colorectal	Total	39	213,628	18.3	39.1	40.8	0.859	3,593	8,778,478	40.9
Colorectal	Male	19	105,405	18.0	39.1	21.6	0.676	1,958	4,406,868	44.4
Colorectal	Female	20	108,223	18.5	38.9	19.2	0.917	1,635	4,371,610	37.4
Corpus Uteri	Female	22	108,223	20.3	45.9	14.6	0.085	1,332	4,371,610	30.5
Esophagus	Total	2	213,628	0.9	2.1	5.4	0.189	505	8,778,478	5.8
Esophagus	Male	1	105,405	0.9	2.2	4.5	0.123	428	4,406,868	9.7
Esophagus	Female	1	108,223	0.9	2.0	0.9	1.000	77	4,371,610	1.8
Hodgkin Lymphoma	Total	1	213,628	0.5	0.4	6.3	0.028 <<	221	8,778,478	2.5
Hodgkin Lymphoma	Male	1	105,405	0.9	0.9	3.1	0.365	128	4,406,868	2.9
Hodgkin Lymphoma	Female	-	108,223	-	-	3.2	0.078	93	4,371,610	2.1
Kidney and Renal Pelvis	Total	17	213,628	8.0	17.3	21.6	0.381	1,934	8,778,478	22.0
Kidney and Renal Pelvis	Male	12	105,405	11.4	24.7	14.3	0.660	1,298	4,406,868	29.5
Kidney and Renal Pelvis	Female	5	108,223	4.6	10.0	7.2	0.542	636	4,371,610	14.5
Larynx	Total	2	213,628	0.9	2.1	2.4	1.000	218	8,778,478	2.5
Larynx	Male	2	105,405	1.9	4.3	1.7	1.000	165	4,406,868	3.7
Larynx	Female	-	108,223	-	-	0.6	1.000	53	4,371,610	1.2
Leukemia	Total	20	213,628	9.4	18.3	21.3	0.893	1,707	8,778,478	19.4
Leukemia	Male	11	105,405	10.4	20.6	12.4	0.823	1,025	4,406,868	23.3
Leukemia	Female	9	108,223	8.3	15.8	8.9	1.000	682	4,371,610	15.6
Liver and Bile Duct	Total	8	213,628	3.7	8.5	9.0	0.921	835	8,778,478	9.5
Liver and Bile Duct	Male	4	105,405	3.8	8.6	6.2	0.520	590	4,406,868	13.4
Liver and Bile Duct	Female	4	108,223	3.7	8.2	2.7	0.588	245	4,371,610	5.6
Lung and Bronchus	Total	17	213,628	8.0	18.6	51.6	0.000 <<	4,942	8,778,478	56.3
Lung and Bronchus	Male	6	105,405	5.7	13.3	25.5	0.000 <<	2,489	4,406,868	56.5
Lung and Bronchus	Female	11	108,223	10.2	23.7	26.1	0.001 <<	2,453	4,371,610	56.1
Melanoma of the Skin	Total	31	213,628	14.5	29.5	37.3	0.341	3,113	8,778,478	35.5
Melanoma of the Skin	Male	19	105,405	18.0	38.2	21.2	0.743	1,876	4,406,868	42.6
Melanoma of the Skin	Female	12	108,223	11.1	21.3	16.0	0.391	1,237	4,371,610	28.3
Myeloma	Total	5	213,628	2.3	5.4	7.7	0.450	723	8,778,478	8.2
Myeloma	Male	1	105,405	0.9	2.2	4.6	0.109	446	4,406,868	10.1
Myeloma	Female	4	108,223	3.7	8.5	3.0	0.693	277	4,371,610	6.3
Non-Hodgkin Lymphoma	Total	24	213,628	11.2	22.4	24.0	1.000	1,968	8,778,478	22.4
Non-Hodgkin Lymphoma	Male	15	105,405	14.2	27.8	13.8	0.825	1,131	4,406,868	25.7
Non-Hodgkin Lymphoma	Female	9	108,223	8.3	17.1	10.1	0.903	837	4,371,610	19.1
Oral Cavity and Pharynx	Total	7	213,628	3.3	7.3	14.2	0.057	1,308	8,778,478	14.9
Oral Cavity and Pharynx	Male	5	105,405	4.7	10.7	9.9	0.139	935	4,406,868	21.2
Oral Cavity and Pharynx	Female	2	108,223	1.8	4.1	4.1	0.436	373	4,371,610	8.5
Ovary	Female	6	108,223	5.5	10.9	6.9	0.942	547	4,371,610	12.5
Pancreas	Total	15	213,628	7.0	16.0	15.7	0.992	1,473	8,778,478	16.8
Pancreas	Male	10	105,405	9.5	21.7	8.5	0.704	816	4,406,868	18.5
Pancreas	Female	5	108,223	4.6	10.5	7.1	0.564	657	4,371,610	15.0
Prostate	Male	74	105,405	70.2	164.4	68.3	0.524	6,692	4,406,868	151.9
Stomach	Total	5	213,628	2.3	5.2	5.1	1.000	469	8,778,478	5.3
Stomach	Male	3	105,405	2.8	6.4	3.2	1.000	304	4,406,868	6.9
Stomach	Female	2	108,223	1.8	4.0	1.9	1.000	165	4,371,610	3.8
Testis	Male	8	105,405	7.6	6.3	7.7	1.000	266	4,406,868	6.0
Thyroid	Total	37	213,628	17.3	23.9	20.2	0.001 >>	1,148	8,778,478	13.1
Thyroid	Male	8	105,405	7.6	12.9	5.1	0.293	364	4,406,868	8.3
Thyroid	Female	29	108,223	26.8	34.7	15.0	0.002 >>	784	4,371,610	17.9
Pediatric Age 0 to 19	Total	11	79,164	13.9	12.6	14.9	0.377	414	2,420,160	17.1
Pediatric Age 0 to 19	Male	4	34,380	11.6	11.2	6.0	0.564	210	1,239,941	16.9
Pediatric Age 0 to 19	Female	7	44,784	15.6	12.7	9.5	0.534	204	1,180,219	17.3

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 MADISON COUNTY AND THE REMAINDER OF THE STATE OF IDAHO

Cause of Death Cancer Site/Type	Sex	Madison 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	983	229,064	429.1	907.5	959.4	0.454	79,552	8,982,330	885.6
All Causes of Death	Male	495	110,233	449.0	893.3	518.7	0.308	42,291	4,517,464	936.2
All Causes of Death	Female	488	118,831	410.7	931.9	437.0	0.017 >>	37,261	4,464,866	834.5
All Malignant Cancers	Total	112	229,064	48.9	115.5	163.3	0.000 <<	15,121	8,982,330	168.3
All Malignant Cancers	Male	61	110,233	55.3	127.5	86.6	0.005 <<	8,174	4,517,464	180.9
All Malignant Cancers	Female	51	118,831	42.9	104.0	76.3	0.003 <<	6,947	4,464,866	155.6
Bladder	Total	6	229,064	2.6	6.3	5.0	0.784	479	8,982,330	5.3
Bladder	Male	6	110,233	5.4	12.9	3.8	0.371	369	4,517,464	8.2
Bladder	Female	-	118,831	-	-	1.2	0.616	110	4,464,866	2.5
Brain and Other Nervous System	Total	5	229,064	2.2	4.4	6.5	0.750	513	8,982,330	5.7
Brain and Other Nervous System	Male	4	110,233	3.6	6.7	3.8	1.000	285	4,517,464	6.3
Brain and Other Nervous System	Female	1	118,831	0.8	1.9	2.7	0.515	228	4,464,866	5.1
Breast	Total	12	229,064	5.2	12.5	11.9	1.000	1,112	8,982,330	12.4
Breast	Male	1	110,233	0.9	2.1	0.1	0.234	12	4,517,464	0.3
Breast	Female	11	118,831	9.3	22.8	11.9	0.947	1,100	4,464,866	24.6
Cervix	Female	-	118,831	-	-	1.1	0.654	88	4,464,866	2.0
Colorectal	Total	14	229,064	6.1	14.5	14.1	1.000	1,318	8,982,330	14.7
Colorectal	Male	7	110,233	6.4	14.6	7.7	1.000	725	4,517,464	16.0
Colorectal	Female	7	118,831	5.9	14.4	6.4	0.927	593	4,464,866	13.3
Corpus Uteri	Female	-	118,831	-	-	1.8	0.337	169	4,464,866	3.8
Esophagus	Total	3	229,064	1.3	3.2	4.8	0.589	458	8,982,330	5.1
Esophagus	Male	3	110,233	2.7	6.5	4.0	0.871	388	4,517,464	8.6
Esophagus	Female	-	118,831	-	-	0.8	0.940	70	4,464,866	1.6
Hodgkin Lymphoma	Total	-	229,064	-	-	0.4	1.000	25	8,982,330	0.3
Hodgkin Lymphoma	Male	-	110,233	-	-	0.2	1.000	14	4,517,464	0.3
Hodgkin Lymphoma	Female	-	118,831	-	-	0.2	1.000	11	4,464,866	0.2
Kidney	Total	2	229,064	0.9	2.1	4.0	0.467	384	8,982,330	4.3
Kidney	Male	1	110,233	0.9	2.1	2.5	0.560	245	4,517,464	5.4
Kidney	Female	1	118,831	0.8	2.1	1.5	1.000	139	4,464,866	3.1
Larynx	Total	-	229,064	-	-	0.8	0.895	76	8,982,330	0.8
Larynx	Male	-	110,233	-	-	0.7	1.000	65	4,517,464	1.4
Larynx	Female	-	118,831	-	-	0.1	1.000	11	4,464,866	0.2
Leukemia	Total	10	229,064	4.4	9.6	7.6	0.461	655	8,982,330	7.3
Leukemia	Male	7	110,233	6.4	14.0	4.3	0.295	390	4,517,464	8.6
Leukemia	Female	3	118,831	2.5	5.5	3.3	1.000	265	4,464,866	5.9
Liver and Bile Duct	Total	5	229,064	2.2	5.3	6.6	0.707	630	8,982,330	7.0
Liver and Bile Duct	Male	3	110,233	2.7	6.4	4.3	0.737	420	4,517,464	9.3
Liver and Bile Duct	Female	2	118,831	1.7	4.2	2.2	1.000	210	4,464,866	4.7
Lung and Bronchus	Total	9	229,064	3.9	9.6	30.6	0.000 <<	2,928	8,982,330	32.6
Lung and Bronchus	Male	3	110,233	2.7	6.5	15.7	0.000 <<	1,538	4,517,464	34.0
Lung and Bronchus	Female	6	118,831	5.0	12.6	14.8	0.018 <<	1,390	4,464,866	31.1
Melanoma of the Skin	Total	1	229,064	0.4	1.0	3.4	0.300	300	8,982,330	3.3
Melanoma of the Skin	Male	-	110,233	-	-	2.1	0.244	200	4,517,464	4.4
Melanoma of the Skin	Female	1	118,831	0.8	1.8	1.3	1.000	100	4,464,866	2.2
Myeloma	Total	4	229,064	1.7	4.2	3.4	0.872	321	8,982,330	3.6
Myeloma	Male	2	110,233	1.8	4.3	1.9	1.000	186	4,517,464	4.1
Myeloma	Female	2	118,831	1.7	4.2	1.4	0.850	135	4,464,866	3.0
Non-Hodgkin Lymphoma	Total	4	229,064	1.7	4.1	6.2	0.522	564	8,982,330	6.3
Non-Hodgkin Lymphoma	Male	3	110,233	2.7	6.0	3.4	1.000	307	4,517,464	6.8
Non-Hodgkin Lymphoma	Female	1	118,831	0.8	2.1	2.8	0.465	257	4,464,866	5.8
Oral Cavity and Pharynx	Total	-	229,064	-	-	2.9	0.108	275	8,982,330	3.1
Oral Cavity and Pharynx	Male	-	110,233	-	-	2.0	0.263	192	4,517,464	4.3
Oral Cavity and Pharynx	Female	-	118,831	-	-	0.9	0.825	83	4,464,866	1.9
Ovary	Female	4	118,831	3.4	8.4	3.8	1.000	357	4,464,866	8.0
Pancreas	Total	9	229,064	3.9	9.6	12.3	0.428	1,181	8,982,330	13.1
Pancreas	Male	4	110,233	3.6	8.7	6.6	0.424	646	4,517,464	14.3
Pancreas	Female	5	118,831	4.2	10.5	5.7	0.994	535	4,464,866	12.0
Prostate	Male	9	110,233	8.2	19.4	10.2	0.876	988	4,517,464	21.9
Stomach	Total	1	229,064	0.4	1.0	2.1	0.767	193	8,982,330	2.1
Stomach	Male	1	110,233	0.9	2.1	1.2	1.000	118	4,517,464	2.6
Stomach	Female	-	118,831	-	-	0.8	0.870	75	4,464,866	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	Madison 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%	95.5%
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%	12.4%
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%	61.9%
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%	65.8%
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%	6.1%
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%	33.9%
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%	86.2%
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%	21.7%
Home Ever Tested for Radon (2016, 2018, 2020)	22.9%	30.8%	18.3%	16.9%	25.2%	20.1%	23.0%	21.0%	13.6%

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