NEZ PERCE 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 1,262 cases of invasive cancer were diagnosed among Nez Perce County residents (Table 1).

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

Cancer Incidence 2017–2021	Nez Perce County	State of Idaho
All Sites/Types	**1,262**	**47,333**
Female Breast	**181**	**6,943**
Prostate	**187**	**6,766**
Lung & Bronchus	**180**	**4,959**
Colorectal	**97**	**3,632**

Table 3 (*Cancer Incidence 2017–2021, Comparison between Nez Perce 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 Nez Perce 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 Nez Perce County was 616.7 cases per 100,000 person-years per year during 2017–2021. Comparing this crude rate with the crude rate for the remainder of Idaho (524.3) gives an estimate of the relative burden of disease in Nez Perce County.

The age- and sex-adjusted incidence rate of invasive cancer in Nez Perce County, all sites combined, was 516.4 cases per 100,000 persons per year during 2017–2021. There were fewer cases of cancer in Nez Perce County (1,262) than expected (1,281.3) 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 483 Nez Perce 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 Nez Perce County and the State of Idaho, 2018–2022

Mortality 2018–2022	Nez Perce County	State of Idaho
All Deaths	**2,788**	**80,538**
Cancer Deaths	**483**	**15,233**
% of All Deaths	*17.3%*	*18.9%*
Lung & Bronchus	**105**	**2,937**
Colorectal	**45**	**1,332**
Pancreas	**39**	**1,190**
Female Breast	**22**	**1,111**
Prostate	**33**	**997**

Table 4 (*Cancer Mortality 2018–2022, Comparison between Nez Perce 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 Nez Perce 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 Nez Perce County, all sites combined, was 180.6 deaths per 100,000 persons per year during 2018–2022, compared with 163.8 for the remainder of the state. There were statistically significantly more cancer deaths in Nez Perce County (483) than expected (438.2) based upon rates in the remainder of the state (p=.037).

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 NEZ PERCE COUNTY AND THE REMAINDER OF THE STATE OF IDAHO

Cancer Site/Type	Sex	Nez Perce 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	1,262	204,649	616.7	516.4	1,281.3	0.601	46,071	8,787,457	524.3
All Sites Combined	Male	670	101,101	662.7	552.2	676.6	0.819	24,600	4,411,172	557.7
All Sites Combined	Female	592	103,548	571.7	482.9	601.5	0.718	21,471	4,376,285	490.6
Bladder	Total	61	204,649	29.8	23.4	63.9	0.776	2,159	8,787,457	24.6
Bladder	Male	47	101,101	46.5	36.8	50.0	0.738	1,726	4,411,172	39.1
Bladder	Female	14	103,548	13.5	10.7	13.0	0.843	433	4,376,285	9.9
Brain - malignant	Total	19	204,649	9.3	8.2	16.8	0.652	638	8,787,457	7.3
Brain - malignant	Male	12	101,101	11.9	10.6	9.5	0.491	370	4,411,172	8.4
Brain - malignant	Female	7	103,548	6.8	5.9	7.3	1.000	268	4,376,285	6.1
Brain and other CNS - non-malignant	Total	28	204,649	13.7	11.6	41.7	0.033 <<	1,519	8,787,457	17.3
Brain and other CNS - non-malignant	Male	8	101,101	7.9	6.8	13.1	0.193	492	4,411,172	11.2
Brain and other CNS - non-malignant	Female	20	103,548	19.3	16.3	28.8	0.109	1,027	4,376,285	23.5
Breast	Total	181	204,649	88.4	76.5	183.7	0.878	6,827	8,787,457	77.7
Breast	Male	-	101,101	-	-	1.8	0.315	65	4,411,172	1.5
Breast	Female	181	103,548	174.8	151.5	184.6	0.828	6,762	4,376,285	154.5
Breast - in situ	Total	32	204,649	15.6	13.9	34.9	0.701	1,337	8,787,457	15.2
Breast - in situ	Male	-	101,101	-	-	0.1	1.000	4	4,411,172	0.1
Breast - in situ	Female	32	103,548	30.9	27.6	35.3	0.653	1,333	4,376,285	30.5
Cervix	Female	5	103,548	4.8	4.7	7.1	0.582	289	4,376,285	6.6
Colorectal	Total	97	204,649	47.4	39.3	99.3	0.868	3,535	8,787,457	40.2
Colorectal	Male	52	101,101	51.4	43.2	52.6	1.000	1,925	4,411,172	43.6
Colorectal	Female	45	103,548	43.5	35.6	46.6	0.896	1,610	4,376,285	36.8
Corpus Uteri	Female	31	103,548	29.9	26.1	35.9	0.466	1,323	4,376,285	30.2
Esophagus	Total	15	204,649	7.3	6.0	14.1	0.873	492	8,787,457	5.6
Esophagus	Male	12	101,101	11.9	9.7	11.7	1.000	417	4,411,172	9.5
Esophagus	Female	3	103,548	2.9	2.3	2.2	0.761	75	4,376,285	1.7
Hodgkin Lymphoma	Total	4	204,649	2.0	1.9	5.2	0.796	218	8,787,457	2.5
Hodgkin Lymphoma	Male	2	101,101	2.0	1.9	3.0	0.826	127	4,411,172	2.9
Hodgkin Lymphoma	Female	2	103,548	1.9	1.9	2.2	1.000	91	4,376,285	2.1
Kidney and Renal Pelvis	Total	47	204,649	23.0	19.5	52.3	0.511	1,904	8,787,457	21.7
Kidney and Renal Pelvis	Male	33	101,101	32.6	27.8	34.4	0.902	1,277	4,411,172	28.9
Kidney and Renal Pelvis	Female	14	103,548	13.5	11.4	17.7	0.464	627	4,376,285	14.3
Larynx	Total	10	204,649	4.9	4.0	5.9	0.161	210	8,787,457	2.4
Larynx	Male	8	101,101	7.9	6.5	4.5	0.168	159	4,411,172	3.6
Larynx	Female	2	103,548	1.9	1.6	1.4	0.833	51	4,376,285	1.2
Leukemia	Total	39	204,649	19.1	15.8	47.4	0.245	1,688	8,787,457	19.2
Leukemia	Male	24	101,101	23.7	19.8	27.8	0.542	1,012	4,411,172	22.9
Leukemia	Female	15	103,548	14.5	11.9	19.4	0.378	676	4,376,285	15.4
Liver and Bile Duct	Total	20	204,649	9.8	8.2	22.8	0.649	823	8,787,457	9.4
Liver and Bile Duct	Male	12	101,101	11.9	10.0	15.8	0.413	582	4,411,172	13.2
Liver and Bile Duct	Female	8	103,548	7.7	6.4	6.9	0.769	241	4,376,285	5.5
Lung and Bronchus	Total	180	204,649	88.0	70.5	138.8	0.001 >>	4,779	8,787,457	54.4
Lung and Bronchus	Male	82	101,101	81.1	65.6	68.4	0.119	2,413	4,411,172	54.7
Lung and Bronchus	Female	98	103,548	94.6	75.5	70.2	0.002 >>	2,366	4,376,285	54.1
Melanoma of the Skin	Total	65	204,649	31.8	26.9	84.6	0.032 <<	3,079	8,787,457	35.0
Melanoma of the Skin	Male	34	101,101	33.6	28.0	51.2	0.014 <<	1,861	4,411,172	42.2
Melanoma of the Skin	Female	31	103,548	29.9	26.2	32.9	0.824	1,218	4,376,285	27.8
Myeloma	Total	11	204,649	5.4	4.4	20.6	0.032 <<	717	8,787,457	8.2
Myeloma	Male	8	101,101	7.9	6.4	12.4	0.265	439	4,411,172	10.0
Myeloma	Female	3	103,548	2.9	2.4	8.1	0.081	278	4,376,285	6.4
Non-Hodgkin Lymphoma	Total	55	204,649	26.9	22.5	53.9	0.919	1,937	8,787,457	22.0
Non-Hodgkin Lymphoma	Male	33	101,101	32.6	27.8	30.0	0.628	1,113	4,411,172	25.2
Non-Hodgkin Lymphoma	Female	22	103,548	21.2	17.4	23.8	0.818	824	4,376,285	18.8
Oral Cavity and Pharynx	Total	37	204,649	18.1	15.3	35.2	0.805	1,278	8,787,457	14.5
Oral Cavity and Pharynx	Male	30	101,101	29.7	25.2	24.6	0.317	910	4,411,172	20.6
Oral Cavity and Pharynx	Female	7	103,548	6.8	5.6	10.5	0.364	368	4,376,285	8.4
Ovary	Female	14	103,548	13.5	11.6	14.8	0.964	539	4,376,285	12.3
Pancreas	Total	44	204,649	21.5	17.2	42.0	0.796	1,444	8,787,457	16.4
Pancreas	Male	27	101,101	26.7	21.6	22.7	0.415	799	4,411,172	18.1
Pancreas	Female	17	103,548	16.4	13.1	19.2	0.730	645	4,376,285	14.7
Prostate	Male	187	101,101	185.0	155.3	179.5	0.597	6,579	4,411,172	149.1
Stomach	Total	12	204,649	5.9	4.8	13.2	0.877	462	8,787,457	5.3
Stomach	Male	8	101,101	7.9	6.5	8.3	1.000	299	4,411,172	6.8
Stomach	Female	4	103,548	3.9	3.1	4.8	0.961	163	4,376,285	3.7
Testis	Male	3	101,101	3.0	3.0	6.1	0.281	271	4,411,172	6.1
Thyroid	Total	28	204,649	13.7	12.9	28.5	1.000	1,157	8,787,457	13.2
Thyroid	Male	7	101,101	6.9	6.3	9.2	0.598	365	4,411,172	8.3
Thyroid	Female	21	103,548	20.3	19.6	19.4	0.778	792	4,376,285	18.1
Pediatric Age 0 to 19	Total	6	48,403	12.4	12.3	8.3	0.553	419	2,450,921	17.1
Pediatric Age 0 to 19	Male	2	24,561	8.1	8.1	4.2	0.426	212	1,249,760	17.0
Pediatric Age 0 to 19	Female	4	23,842	16.8	16.7	4.1	1.000	207	1,201,161	17.2

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 NEZ PERCE COUNTY AND THE REMAINDER OF THE STATE OF IDAHO

Cause of Death Cancer Site/Type	Sex	Nez Perce 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	2,788	207,277	1,345.1	998.3	2,411.5	0.000 >>	77,747	9,004,117	863.5
All Causes of Death	Male	1,418	102,513	1,383.2	1,062.6	1,220.0	0.000 >>	41,368	4,525,184	914.2
All Causes of Death	Female	1,370	104,764	1,307.7	938.6	1,185.5	0.000 >>	36,379	4,478,933	812.2
All Malignant Cancers	Total	483	207,277	233.0	180.6	438.2	0.037 >>	14,750	9,004,117	163.8
All Malignant Cancers	Male	263	102,513	256.6	200.1	231.6	0.046 >>	7,972	4,525,184	176.2
All Malignant Cancers	Female	220	104,764	210.0	162.1	205.3	0.322	6,778	4,478,933	151.3
Bladder	Total	20	207,277	9.6	6.9	15.1	0.257	465	9,004,117	5.2
Bladder	Male	15	102,513	14.6	10.5	11.4	0.355	360	4,525,184	8.0
Bladder	Female	5	104,764	4.8	3.4	3.5	0.546	105	4,478,933	2.3
Brain and Other Nervous System	Total	17	207,277	8.2	7.0	13.6	0.419	501	9,004,117	5.6
Brain and Other Nervous System	Male	11	102,513	10.7	9.3	7.3	0.242	278	4,525,184	6.1
Brain and Other Nervous System	Female	6	104,764	5.7	4.8	6.2	1.000	223	4,478,933	5.0
Breast	Total	22	207,277	10.6	8.3	32.6	0.066	1,102	9,004,117	12.2
Breast	Male	-	102,513	-	-	0.4	1.000	13	4,525,184	0.3
Breast	Female	22	104,764	21.0	16.4	32.7	0.064	1,089	4,478,933	24.3
Cervix	Female	2	104,764	1.9	1.7	2.2	1.000	86	4,478,933	1.9
Colorectal	Total	45	207,277	21.7	17.1	37.7	0.272	1,287	9,004,117	14.3
Colorectal	Male	18	102,513	17.6	14.1	20.1	0.750	714	4,525,184	15.8
Colorectal	Female	27	104,764	25.8	19.7	17.6	0.043 >>	573	4,478,933	12.8
Corpus Uteri	Female	3	104,764	2.9	2.3	4.9	0.569	166	4,478,933	3.7
Esophagus	Total	12	207,277	5.8	4.6	12.9	0.942	449	9,004,117	5.0
Esophagus	Male	9	102,513	8.8	7.1	10.7	0.744	382	4,525,184	8.4
Esophagus	Female	3	104,764	2.9	2.2	2.1	0.676	67	4,478,933	1.5
Hodgkin Lymphoma	Total	-	207,277	-	-	0.7	0.978	25	9,004,117	0.3
Hodgkin Lymphoma	Male	-	102,513	-	-	0.4	1.000	14	4,525,184	0.3
Hodgkin Lymphoma	Female	-	104,764	-	-	0.3	1.000	11	4,478,933	0.2
Kidney	Total	12	207,277	5.8	4.4	11.2	0.895	374	9,004,117	4.2
Kidney	Male	9	102,513	8.8	6.9	6.9	0.504	237	4,525,184	5.2
Kidney	Female	3	104,764	2.9	2.1	4.3	0.750	137	4,478,933	3.1
Larynx	Total	1	207,277	0.5	0.4	2.2	0.709	75	9,004,117	0.8
Larynx	Male	1	102,513	1.0	0.8	1.9	0.885	64	4,525,184	1.4
Larynx	Female	-	104,764	-	-	0.3	1.000	11	4,478,933	0.2
Leukemia	Total	20	207,277	9.6	7.3	19.5	0.977	645	9,004,117	7.2
Leukemia	Male	13	102,513	12.7	9.8	11.3	0.689	384	4,525,184	8.5
Leukemia	Female	7	104,764	6.7	5.0	8.1	0.866	261	4,478,933	5.8
Liver and Bile Duct	Total	17	207,277	8.2	6.6	17.6	1.000	618	9,004,117	6.9
Liver and Bile Duct	Male	9	102,513	8.8	7.2	11.5	0.585	414	4,525,184	9.1
Liver and Bile Duct	Female	8	104,764	7.6	6.1	6.0	0.517	204	4,478,933	4.6
Lung and Bronchus	Total	105	207,277	50.7	39.4	83.8	0.028 >>	2,832	9,004,117	31.5
Lung and Bronchus	Male	50	102,513	48.8	38.5	42.8	0.303	1,491	4,525,184	32.9
Lung and Bronchus	Female	55	104,764	52.5	40.3	40.9	0.040 >>	1,341	4,478,933	29.9
Melanoma of the Skin	Total	5	207,277	2.4	1.9	8.6	0.281	296	9,004,117	3.3
Melanoma of the Skin	Male	4	102,513	3.9	3.1	5.6	0.687	196	4,525,184	4.3
Melanoma of the Skin	Female	1	104,764	1.0	0.8	3.0	0.410	100	4,478,933	2.2
Myeloma	Total	9	207,277	4.3	3.3	9.6	1.000	316	9,004,117	3.5
Myeloma	Male	7	102,513	6.8	5.2	5.4	0.593	181	4,525,184	4.0
Myeloma	Female	2	104,764	1.9	1.4	4.2	0.421	135	4,478,933	3.0
Non-Hodgkin Lymphoma	Total	25	207,277	12.1	9.1	16.5	0.062	543	9,004,117	6.0
Non-Hodgkin Lymphoma	Male	13	102,513	12.7	9.9	8.6	0.192	297	4,525,184	6.6
Non-Hodgkin Lymphoma	Female	12	104,764	11.5	8.3	7.9	0.210	246	4,478,933	5.5
Oral Cavity and Pharynx	Total	11	207,277	5.3	4.3	7.6	0.288	264	9,004,117	2.9
Oral Cavity and Pharynx	Male	7	102,513	6.8	5.5	5.2	0.528	185	4,525,184	4.1
Oral Cavity and Pharynx	Female	4	104,764	3.8	3.0	2.3	0.416	79	4,478,933	1.8
Ovary	Female	6	104,764	5.7	4.5	10.5	0.207	355	4,478,933	7.9
Pancreas	Total	39	207,277	18.8	14.9	33.5	0.387	1,151	9,004,117	12.8
Pancreas	Male	19	102,513	18.5	14.9	17.8	0.844	631	4,525,184	13.9
Pancreas	Female	20	104,764	19.1	14.9	15.6	0.321	520	4,478,933	11.6
Prostate	Male	33	102,513	32.2	23.1	30.4	0.686	964	4,525,184	21.3
Stomach	Total	7	207,277	3.4	2.7	5.4	0.603	187	9,004,117	2.1
Stomach	Male	6	102,513	5.9	4.6	3.3	0.223	113	4,525,184	2.5
Stomach	Female	1	104,764	1.0	0.8	2.1	0.742	74	4,478,933	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	Nez Perce 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%	92.2%
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%	9.5%
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%	76.1%
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%	72.5%
Colorectal Cancer Screening, Age 45–75 (2022)	63.3%	61.0%	62.5%	60.8%	67.2%	65.0%	60.4%	60.2%	74.9%
Tobacco Use									
Current Tobacco User (2020–2022)	22.1%	24.3%	20.4%	24.8%	21.3%	22.5%	22.6%	18.1%	19.9%
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%	25.3%
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%	77.0%
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%	18.2%
Home Ever Tested for Radon (2016, 2018, 2020)	22.9%	30.8%	18.3%	16.9%	25.2%	20.1%	23.0%	21.0%	18.8%

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