TETON 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

RISK FACTORS AND INTERVENTIONS

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 geneenvironment 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.

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 <u>https://www.dietaryguidelines.gov</u>

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 261 cases of invasive cancer were diagnosed among Teton County residents (Table 1).

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

Cancer Incidence 2017–2021	Teton County	State of Idaho
All Sites/Types	261	47,333
Female Breast	40	6,943
Prostate	35	6,766
Lung & Bronchus	18	4,959
Colorectal	15	3,632

Table 3 (*Cancer Incidence 2017–2021, Comparison between Teton 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 Teton County. The table also shows the number of observed cases, person-

During 2018–2022, cancer was the second leading cause of death in Idaho; 15,233 Idaho residents and 73 Teton 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 Teton County and the State of Idaho, 2018–2022

Mortality 2018–2022	Teton County	State of Idaho			
All Deaths	280	80,538			
Cancer Deaths	73	15,233			
% of All Deaths	26.1%	18.9%			
Lung & Bronchus	13	2,937			
Colorectal	7	1,332			
Pancreas	8	1,190			
Female Breast	6	1,111			
Prostate	2	997			

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 Teton County was 435.0 cases per 100,000 person-years per year during 2017–2021. Comparing this crude rate with the crude rate for the remainder of Idaho (527.0) gives an estimate of the relative burden of disease in Teton County.

The age- and sex-adjusted incidence rate of invasive cancer in Teton County, all sites combined, was 487.9 cases per 100,000 persons per year during 2017–2021. There were fewer cases of cancer in Teton County (261) than expected (281.9) 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

Table 4 (*Cancer Mortality 2018–2022, Comparison between Teton 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 Teton 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 Teton County, all sites combined, was 149.1 deaths per 100,000 persons per year during 2018–2022, compared with 165.7 for the remainder of the state. There were fewer cancer deaths in Teton County (73) than expected (81.1) 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 2017–2021COMPARISON BETWEEN TETON COUNTY AND THE REMAINDER OF THE STATE OF IDAHO

Site/TypeSexCasesYearsRate (1)Rate (1,2)Cases (3)P-Value (4)CasesAll Sites CombinedTotal26159,994435.0487.9281.90.22247,0728,All Sites CombinedMale14931,360475.1526.0158.80.46425,1214,All Sites CombinedFemale11228,634391.1439.5125.70.23821,9514,BladderTotal1059,99416.721.211.70.7622,2108,BladderMale1031,36031.938.910.11.0001,7634,BladderFemale-28,6342.20.2124474,Brain - malignantTotal459,9946.77.14.11.0006538,Brain - malignantMale431,36012.813.12.60.5213788,Brain - malignantFemale-28,6341.60.4062754,Brain and other CNS - non-malignantTotal559,9948.39.19.50.1751,5428,Brain and other CNS - non-malignantFemale228,6347.07.86.00.1241,0454,BreastTotal4159,99468.371.244.90.6216,9678,BreastMale131,3603.2 <t< th=""><th>Person Years ,932,112 ,480,913 ,451,199 ,932,112 ,480,913 ,451,199 ,932,112 ,480,913 ,451,199 ,932,112</th><th>Crude Rate (1) 527.0 560.6 493.1 24.7 39.3 10.0 7.3 8.4 6.2 17.3</th></t<>	Person Years ,932,112 ,480,913 ,451,199 ,932,112 ,480,913 ,451,199 ,932,112 ,480,913 ,451,199 ,932,112	Crude Rate (1) 527.0 560.6 493.1 24.7 39.3 10.0 7.3 8.4 6.2 17.3
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Bladder Male 10 31,360 31.9 38.9 10.1 1.000 1,763 4, Bladder Bladder Female - 28,634 - - 2.2 0.212 447 4, Brain - malignant Total 4 59,994 6.7 7.1 4.1 1.000 653 8, Brain - malignant Male 4 31,360 12.8 13.1 2.6 0.212 378 4, Brain - malignant Female - 28,634 - - 1.6 0.406 275 4, Brain and other CNS - non-malignant Total 5 59,994 8.3 9.1 9.5 0.175 1,542 8, Brain and other CNS - non-malignant Male 3 31,360 9.6 10.0 3.3 1.000 497 4, Breast Total 41 59,994 68.3 71.2 44.9 0.621 6,967 8, Breast Ma	,451,199 ,932,112 ,480,913 ,451,199 ,932,112 ,480,913 ,451,199	10.0 7.3 8.4 6.2 17.3
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Brain and other CNS - non-malignant Total 5 59,994 8.3 9.1 9.5 0.175 1,542 8, 8,31 Brain and other CNS - non-malignant Male 3 31,360 9.6 10.0 3.3 1.000 497 4, 9,63 Brain and other CNS - non-malignant Male 2 28,634 7.0 7.8 6.0 0.124 1,045 4, 9,67 Breast Total 41 59,994 68.3 71.2 44.9 0.621 6,967 8, 9,67 8, 9,67 8, 9,67 8, 9,634 3.7 0.4 0.644.3 64 4, 9,693 4, 41.7 0.875 6,903 4, 9,993 4, 9,634 139,7 148.8 41.7 0.875 6,903 4,	,932,112 ,480,913 ,451,199	17.3
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Breast Female 40 28,634 139.7 148.8 41.7 0.875 6,903 4,	,480,913	1.4
	,451,199	155.1
Breast - in situ Total 10 59,994 16.7 16.5 9.2 0.881 1,359 8,	,932,112	15.2
	,480,913	0.1
	,451,199	30.4
Cervix Female - 28,634 2.1 0.235 294 4,	,451,199	6.6
	,932,112	40.5
Colorectal Male 11 31,360 35.1 37.4 12.9 0.724 1,966 4,	,480,913	43.9
	,451,199	37.1
	,451,199	30.3
	,932,112	5.6
	,480,913	9.5
	,451,199	1.8
	,932,112	2.5
	,480,913 ,451,199	2.9 2.1
	,451,199	2.1
	,480,913	21.0
	,451,199	14.4
Larynx Total 2 59,994 3.3 3.8 1.3 0.727 218 8	,932,112	2.4
Larvnx Male 2 31,360 6.4 7.2 1.0 0.549 165 4.	.480.913	3.7
Larynx Female - 28,634 0.3 1.000 53 4,	,451,199	1.2
Leukemia Total 13 59,994 21.7 25.3 9.9 0.393 1,714 8,	,932,112	19.2
	,480,913	22.9
	,451,199	15.5
	,932,112	9.4
	,480,913	13.2
	,451,199	5.5
	,932,112 ,480,913	55.3 55.5
	,451,199	55.2
	,932,112	34.8
	,480,913	41.9
	,451,199	27.7
	,932,112	8.1
Myeloma Male 1 31,360 3.2 3.7 2.7 0.489 446 4.	,480,913	10.0
Myeloma Female 3 28,634 10.5 12.8 1.5 0.364 278 4	,451,199	6.2
Non-Hodgkin Lymphoma Total 9 59,994 15.0 17.0 11.8 0.526 1,983 8,	,932,112	22.2
	,480,913	25.5
	,451,199	18.9
	,932,112	14.7
	,480,913	20.9
	,451,199	8.4
	,451,199	12.3
	,932,112 ,480,913	16.5 18.3
	,460,913	10.3
	,480,913	150.2
	,932,112	5.3
	,480,913	6.9
	,451,199	3.7
	,480,913	6.1
	,932,112	13.2
	,480,913	8.3
	,451,199	18.2
	,483,793	17.0
	,266,329	16.8
Pediatric Age 0 to 19 Female 2 7,532 12.5 12.5 1.5 1.600 216 1,5 Pediatric Age 0 to 19 Female 2 7,539 26.5 27.5 1.3 0.711 209 1,5	,217,464	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 TETON COUNTY AND THE REMAINDER OF THE STATE OF IDAHO

			Те	Remainder of Idaho						
Cause of Death		Observed	Person	Crude	A.A.M.	Expected		Observed	Person	Crude
Cancer Site/Type	Sex	Deaths	Years	Rate (1)	Rate (1,2)	Deaths (3)	P-Value (4)	Deaths	Years	Rate (1)
All Causes of Death	Total	280	61,075	458.5	601.2	408.5	0.000 <<	80,255	9,150,319	877.1
All Causes of Death	Male	159	31,945	497.7	597.6	246.8	0.000 <<	42,627	4.595.752	927.5
All Causes of Death	Female	121	29,130	415.4	599.4	166.8	0.000 <<	37,628	4,554,567	826.2
All Malignant Cancers	Total	73	61,075	119.5	149.1	81.1	0.400	15,160	9,150,319	165.7
All Malignant Cancers	Male	42	31,945	131.5	156.6	47.8	0.448	8,193	4,595,752	178.3
All Malignant Cancers	Female	31	29,130	106.4	137.7	34.4	0.632	6,967	4,554,567	153.0
Bladder	Total	3	61,075	4.9	7.0	2.2	0.780	482	9,150,319	5.3
Bladder	Male	3	31,945	9.4	12.4	2.0	0.622	372	4,595,752	8.1
Bladder	Female	-	29,130	-	-	0.5	1.000	110	4,554,567	2.4
Brain and Other Nervous System	Total	1	61,075	1.6	1.8	3.2	0.350	517	9,150,319	5.7
Brain and Other Nervous System	Male	1	31,945	3.1	3.3	1.9	0.865	288	4,595,752	6.3
Brain and Other Nervous System	Female	-	29,130	-	-	1.3	0.547	229	4,554,567	5.0
Breast	Total	7	61,075	11.5	13.6	6.3	0.881	1,117	9,150,319	12.2
Breast	Male	1	31,945	3.1	3.6	0.1	0.140	12	4,595,752	0.3
Breast	Female	6	29,130	20.6	25.3	5.8	1.000	1,105	4,554,567	24.3
Cervix	Female	1	29,130	3.4	3.3	0.6	0.885	87	4,554,567	1.9
Colorectal	Total	7	61,075	11.5	13.6	7.5	1.000	1,325	9,150,319	14.5
Colorectal	Male	3	31,945	9.4	10.3	4.6	0.649	729	4,595,752	15.9
Colorectal	Female	4	29,130	13.7	17.7	2.9	0.683	596	4,554,567	13.1
Corpus Uteri	Female	-	29,130	-	-	0.9	0.827	169	4,554,567	3.7
Esophagus	Total	2	61,075	3.3	3.9	2.6	1.000	459	9,150,319	5.0
Esophagus	Male Female	2	31,945 29,130	6.3	7.1	2.4 0.3	1.000 1.000	389 70	4,595,752 4,554,567	8.5 1.5
Esophagus Hodgkin Lymphoma	Total		61,075	-	-	0.3	1.000	25	9.150.319	0.3
Hodgkin Lymphoma	Male	-	31,945	-	-	0.1	1.000	14	4,595,752	0.3
Hodgkin Lymphoma	Female	-	29,130	-	_	0.1	1.000	14	4,554,567	0.3
Kidney	Total	- 1	61,075	- 1.6	2.1	2.0	0.801	385	9,150,319	4.2
Kidney	Male	- '	31,945	-	-	1.4	0.469	246	4,595,752	5.4
Kidney	Female	1	29,130	3.4	4.9	0.6	0.934	139	4,554,567	3.1
Larynx	Total		61,075	-	-	0.4	1.000	76	9,150,319	0.8
Larynx	Male	-	31,945	-	-	0.4	1.000	65	4,595,752	1.4
Larýnx	Female	-	29,130	-	-	0.1	1.000	11	4,554,567	0.2
Leukemia	Total	4	61,075	6.5	8.7	3.3	0.852	661	9,150,319	7.2
Leukemia	Male	4	31,945	12.5	15.6	2.2	0.356	393	4,595,752	8.6
Leukemia	Female	-	29,130	-	-	1.2	0.590	268	4,554,567	5.9
Liver and Bile Duct	Total	2	61,075	3.3	3.8	3.6	0.597	633	9,150,319	6.9
Liver and Bile Duct	Male	1	31,945	3.1	3.5	2.7	0.512	422	4,595,752	9.2
Liver and Bile Duct	Female	1	29,130	3.4	4.3	1.1	1.000	211	4,554,567	4.6
Lung and Bronchus	Total	13	61,075	21.3	27.1	15.3	0.669	2,924	9,150,319	32.0
Lung and Bronchus	Male	8	31,945	25.0	30.0	8.9	0.939	1,533	4,595,752	33.4
Lung and Bronchus	Female	5	29,130	17.2	23.2	6.6	0.716	1,391	4,554,567	30.5
Melanoma of the Skin	Total	4	61,075	6.5	7.8	1.7	0.174	297	9,150,319 4,595,752	3.2
Melanoma of the Skin Melanoma of the Skin	Male Female	2 2	31,945 29,130	6.3 6.9	7.2 8.4	1.2 0.5	0.669 0.192	198 99	4,595,752 4,554,567	4.3 2.2
Myeloma	Total	3	61,075	4.9	6.6	0.5	0.192	322	4,554,567	3.5
Myeloma	Male	-	31,945	4.9	0.0	1.0	0.436	322 188	4,595,752	3.5 4.1
Myeloma	Female	- 3	29,130	- 10.3	- 14.7	0.6	0.047 >>	134	4,595,752	2.9
Non-Hodgkin Lymphoma	Total	2	61,075	3.3	4.3	2.9	0.909	566	9,150,319	6.2
	Male	2	31,945	6.3	7.6	1.8	1.000	308	4,595,752	6.7
Non-Hodgkin Lymphoma	Female	-	29,130	-	-	1.0	0.639	258	4,554,567	5.7
Oral Cavity and Pharynx	Total	3	61,075	4.9	5.8	1.5	0.405	272	9,150,319	3.0
Oral Cavity and Pharynx	Male	2	31,945	6.3	7.0	1.2	0.657	190	4,595,752	4.1
Oral Cavity and Pharynx	Female	1	29,130	3.4	4.2	0.4	0.697	82	4,554,567	1.8
Ovary	Female	1	29,130	3.4	4.2	1.9	0.885	360	4,554,567	7.9
Pancreas	Total	8	61,075	13.1	16.0	6.4	0.637	1,182	9,150,319	12.9
Pancreas	Male	6	31,945	18.8	21.8	3.9	0.387	644	4,595,752	14.0
Pancreas	Female	2	29,130	6.9	8.9	2.7	1.000	538	4,554,567	11.8
Prostate	Male	2	31,945	6.3	8.4	5.2	0.224	995	4,595,752	21.7
Stomach	Total	-	61,075	-	-	1.1	0.655	194	9,150,319	2.1
	Male	-	31,945	-	-	0.7	0.971	119	4,595,752	2.6
Stomach	Female	-	29,130	-	-	0.4	1.000	75	4,554,567	1.6

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	Teton County
Access to Care Have Health Insurance, Age < 65 (2021–2022) Not See Doctor Due to Cost in Past Year (2020–2022) Cancer Screening	90.0% 10.4%	89.3% 9.5%	87.8% 11.0%	86.4% 11.0%	92.6% 10.2%	87.2% 10.2%	89.1% 10.4%	92.6% 11.3%	90.0% 10.4%
Mammogram Past 2 Years, Age 40–74 (2014–2022, even years) Pap Test Past 3 Years, Cervix Intact Age 21–65 (2018, 2020) Colorectal Cancer Screening, Age 45–75 (2022) <u>Tobacco Use</u>	62.9% 71.1% 63.3%	61.0% 73.7% 61.0%	70.0% 73.6% 62.5%	60.3% 70.9% 60.8%	66.1% 72.9% 67.2%	58.9% 69.4% 65.0%	61.0% 69.3% 60.4%	62.5% 65.5% 60.2%	72.0%
Current Tobacco User (2020–2022) <u>Other Cancer-Related</u>	22.1%	24.3%	20.4%	24.8%	21.3%	22.5%	22.6%	18.1%	18.4%
Healthy Weight by Body Mass Index, Age 20+ (2020–2022) Any Physical Activity Besides Job Past 30 Days (2018–2022) Meet Physical Activity Guidelines (2011, 2013, 2015, 2017, 2019) Home Ever Tested for Radon (2016, 2018, 2020)	30.0% 79.1% 22.0% 22.9%	30.0% 79.0% 22.8% 30.8%	30.1% 78.0% 19.2% 18.3%	26.5% 75.4% 20.0% 16.9%	33.7% 82.7% 25.2% 25.2%	27.5% 75.2% 19.5% 20.1%	26.7% 76.7% 20.4% 23.0%	30.2% 81.0% 20.3% 21.0%	39.4% 88.3% 20.4% 40.9%

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+.

<u>Pap Test</u> – 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.

<u>Physical Activity Guidelines</u> – 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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