Metropolitan and Micropolitan Statistical Area Cancer Incidence: Late Stage Diagnoses for Cancers Amenable to Screening, Idaho 2006-2009

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Cancer Data Registry of Idaho

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TABLE OF CONTENTS

Background and Introduction ........................................................................................................ 1

Definitions of Metropolitan and Micropolitan Statistical Areas .............................................. 2

Methods .................................................................................................................................... 3

Results ..................................................................................................................................... 6
   A. Breast Cancer – Females Ages 40+ .................................................................................. 6
   B. Cervical Cancer – Ages 20+ ......................................................................................... 6
   C. Colorectal Cancer – Females Ages 50+ ......................................................................... 6
   D. Colorectal Cancer – Males Ages 50+ ............................................................................ 7

Conclusions ................................................................................................................................. 7

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The statewide cancer registry database is a product of collaboration among many report sources, including hospitals, physicians, surgery centers, pathology laboratories, and other states in which Idaho residents are diagnosed and/or treated for cancer. Their cooperation in reporting timely, accurate, and complete cancer data is acknowledged and sincerely appreciated.

CDRI would also like to thank the Division of Public Health, Idaho Department of Health and Welfare, and the Comprehensive Cancer Alliance for Idaho for their continued partnership and for using CDRI data as a tool in cancer control and prevention.

We acknowledge the Centers for Disease Control and Prevention for its support of CDRI under cooperative agreement 5U58DP000767-05. The findings and conclusions in this report are those of the authors and do not necessarily represent the official position of the Centers for Disease Control and Prevention.

SUGGESTED CITATION:
BACKGROUND AND INTRODUCTION

Idaho's comprehensive cancer strategic plan includes overarching goals to reduce health disparities that may exist by race, ethnicity, socioeconomic status, geographic location and other characteristics. This report illustrates cancer incidence by local community in Idaho for several cancers with effective population-based screening tests and effective treatment regimens supporting decreased morbidity and mortality with early detection. The report focuses on late stage diagnoses of breast, cervix, and colorectal cancers. The purpose of this report is to monitor the effectiveness of the State of Idaho and local communities in cancer prevention and early detection and to provide the Comprehensive Cancer Alliance for Idaho, the Idaho Department of Health and Welfare, the Centers for Disease Control and Prevention, and other partners with data to drive improvement efforts.

The U.S. Preventive Services Task Force (USPSTF) is "an independent panel of experts in primary care and prevention that systematically reviews the evidence of effectiveness and develops recommendations for clinical preventive services."\(^1\) In November 2009, the USPSTF released recommendations on screening for breast cancer, including biennial screening mammography for women ages 50 to 74 years.\(^2\) The American Cancer Society recommends yearly mammograms starting at age 40 and continuing as long as a woman is in good health.\(^3\) Based on these recommendations, CDRI selected the measure of late stage breast cancer incidence rate among women ages 40 years and older as the indicator for inadequate breast cancer screening. In January 2003, the USPSTF released recommendations on screening for cervical cancer, strongly recommending screening for cervical cancer in women who have been sexually active and have a cervix.\(^4\) The American Cancer Society recommends that “all women should begin cervical cancer screening about 3 years after they begin having vaginal intercourse, but no later than 21 years old.”\(^3\) Based on these recommendations, CDRI selected the measure of late stage cervical cancer incidence rate among women ages 20 years and older as the indicator for inadequate cervical cancer screening and prevention. In October 2008, the USPSTF released recommendations on screening for colorectal cancer, including using fecal occult blood testing, sigmoidoscopy, or

\(^{1}\) http://www.ahrq.gov/clinic/uspstfix.htm

\(^{2}\) http://www.uspreventiveservicestaskforce.org/uspstf/uspsbrca.htm


\(^{4}\) http://www.uspreventiveservicestaskforce.org/uspstf/uspserv.htm
colonoscopy, in adults, beginning at age 50 years and continuing until age 75 years.\textsuperscript{5} The American Cancer Society recommends that, beginning at age 50, men and women should follow a testing schedule depending on the type of test.\textsuperscript{3} Based on these recommendations, CDRI selected the measure of late stage colorectal cancer incidence rate among men and women ages 50 years and older as indicators for inadequate colorectal cancer screening and prevention.

DEFINITIONS OF METROPOLITAN AND MICROPOLITAN STATISTICAL AREAS

Metropolitan and Micropolitan Statistical Areas are geographic entities defined by the U.S. Office of Management and Budget (OMB) for use by Federal statistical agencies in collecting, tabulating, and publishing Federal statistics.\textsuperscript{6} A Metropolitan Statistical Area contains a core urban area of 50,000 or more population, and a Micropolitan Statistical Area contains an urban core of at least 10,000 (but less than 50,000) population. Each Metropolitan or Micropolitan Statistical Area consists of one or more counties and includes the counties containing the core urban area, as well as any adjacent counties that have a high degree of social and economic integration (as measured by commuting to work) with the urban core. The classification includes about 94 percent of the U.S. population – about 84 percent in Metropolitan Statistical Areas and about 10 percent in Micropolitan Statistical Areas. Collectively, these are referred to as Core-Based Statistical Areas.

If specified criteria are met, adjacent Metropolitan and Micropolitan Statistical Areas, in various combinations, become the components of Combined Statistical Areas. Combined Statistical Areas have social and economic ties as measured by commuting, but at lower levels than are found among counties within Metropolitan and Micropolitan Statistical Areas. Combined Statistical Areas can be characterized as representing larger regions that reflect broader social and economic interactions, such as wholesaling, commodity distribution, and weekend recreation activities.

A Metropolitan or Micropolitan Statistical Area's geographic delineation, or list of geographic components at a particular point in time, is referred to as its "definition." Metropolitan and Micropolitan Statistical Areas are the result of the application of published standards to Census Bureau data. The standards for defining the areas are reviewed and revised once every ten years, prior to each decennial census. Generally, the areas are redefined using the most recent set of standards following each decennial census.

\begin{itemize}
\item[\textsuperscript{5}] \url{http://www.uspreventiveservicestaskforce.org/uspstf/uspscolo.htm}
\item[\textsuperscript{6}] \url{http://www.census.gov/population/www/metroareas/index.html}
\end{itemize}
census. Between censuses, the definitions are updated annually to reflect the most recent Census Bureau population estimates. Areas based on the 2000 standards and Census 2000 data were defined in June of 2003, and the definitions used for this report are as of November 2008. Table 1 shows 2009 population estimates for Metropolitan and Micropolitan Statistical Areas in Idaho or the Idaho part of multi-state areas. In total, about 87% of Idaho’s population is included in Metropolitan and Micropolitan Statistical Areas (see also map on page 5).

Table 1. Idaho Resident Population, 2009, by Metropolitan and Micropolitan Statistical Area.7

<table>
<thead>
<tr>
<th>Geographic Area</th>
<th>All Ages Male &amp; Female</th>
<th>20+ Female Male &amp; Female</th>
<th>40+ Female Male &amp; Female</th>
<th>50+ Female Male &amp; Female</th>
</tr>
</thead>
<tbody>
<tr>
<td>Idaho</td>
<td>1,545,801</td>
<td>541,225</td>
<td>337,673</td>
<td>239,742</td>
</tr>
<tr>
<td>13940 Blackfoot, ID Micropolitan Statistical Area</td>
<td>44,668</td>
<td>14,317</td>
<td>9,275</td>
<td>6,467</td>
</tr>
<tr>
<td>14260 Boise City-Nampa, ID Metropolitan Statistical Area</td>
<td>606,376</td>
<td>212,729</td>
<td>126,976</td>
<td>86,834</td>
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<tr>
<td>15420 Burley, ID Micropolitan Statistical Area</td>
<td>40,924</td>
<td>13,289</td>
<td>9,120</td>
<td>6,669</td>
</tr>
<tr>
<td>17660 Coeur d’Alene, ID Metropolitan Statistical Area</td>
<td>139,390</td>
<td>52,157</td>
<td>34,777</td>
<td>25,144</td>
</tr>
<tr>
<td>26820 Idaho Falls, ID Metropolitan Statistical Area</td>
<td>126,131</td>
<td>41,288</td>
<td>24,863</td>
<td>17,304</td>
</tr>
<tr>
<td>292 Idaho Falls-Blackfoot, ID Combined Statistical Area</td>
<td>170,799</td>
<td>55,605</td>
<td>34,138</td>
<td>23,771</td>
</tr>
<tr>
<td>27220 Jackson, WY-ID (part) Micropolitan Statistical Area</td>
<td>9,337</td>
<td>2,967</td>
<td>1,598</td>
<td>961</td>
</tr>
<tr>
<td>30300 Lewiston, ID-WA (part) Metropolitan Statistical Area</td>
<td>39,211</td>
<td>15,345</td>
<td>10,286</td>
<td>7,783</td>
</tr>
<tr>
<td>30860 Logan, UT-ID (part) Micropolitan Statistical Area</td>
<td>12,676</td>
<td>3,928</td>
<td>2,562</td>
<td>1,815</td>
</tr>
<tr>
<td>34140 Moscow, ID Micropolitan Statistical Area</td>
<td>38,046</td>
<td>13,886</td>
<td>7,122</td>
<td>5,115</td>
</tr>
<tr>
<td>34300 Mountain Home, ID Micropolitan Statistical Area</td>
<td>28,820</td>
<td>9,492</td>
<td>4,763</td>
<td>3,222</td>
</tr>
<tr>
<td>36620 Ontario, OR-ID (part) Micropolitan Statistical Area</td>
<td>23,099</td>
<td>8,082</td>
<td>5,491</td>
<td>3,930</td>
</tr>
<tr>
<td>38540 Pocatello, ID Metropolitan Statistical Area</td>
<td>90,273</td>
<td>31,873</td>
<td>18,317</td>
<td>13,106</td>
</tr>
<tr>
<td>39940 Rexburg, ID Micropolitan Statistical Area</td>
<td>51,131</td>
<td>14,986</td>
<td>6,762</td>
<td>4,830</td>
</tr>
<tr>
<td>46300 Twin Falls, ID Micropolitan Statistical Area</td>
<td>96,558</td>
<td>33,923</td>
<td>21,563</td>
<td>15,763</td>
</tr>
</tbody>
</table>

**METHODS**

**Cancer Cases**

A “cancer case” is defined as a primary cancer site (where the cancer started), not a metastatic cancer site (where the cancer spread to). Since an individual can have more than one primary cancer site during their lifetime, the number of incident cancer cases is greater than the number of persons who are diagnosed with cancer. CDRI queried our Rocky Mountain Cancer Data Systems (RMCDS) database for Idaho resident incident cancer cases and exported the case data for analysis in SEER*Stat.8

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http://www.cdc.gov/nchs/nvss/bridged_race/data_documentation.htm#vintage2009

8 Surveillance Research Program, National Cancer Institute SEER*Stat software (www.seer.cancer.gov/seerstat) version 7.0.5.
Population Estimates
Annual county population estimates by age group and sex were obtained from the National Center for Health Statistics (NCHS).\(^7\)

Stage at Time of Diagnosis
Stage at diagnosis measures the extent of disease at the time of initial diagnosis. Summary staging attempts to group cases with similar prognoses into categories of:

- in-situ (non-invasive),
- localized (cancer confined to the primary site),
- regional (direct extension of tumor to adjacent organs, and/or lymph nodes),
- distant (metastasis to tissues or lymph nodes remote from the primary site), or
- unstaged.

Stage at diagnosis was collected and coded using Collaborative Stage and the Collaborative Stage algorithm was used to derive SEER Summary Stage 2000. For stage-specific incidence rate calculations, late stage was considered to mean regional and distant stages combined.

Age-Adjusted Incidence Rates
Age-adjusted incidence rates published within this report were adjusted using the direct method and standardized to the age distribution of the 2000 U.S. population.\(^9\)

Incidence rates represent the average number of new cases diagnosed annually per 100,000 persons. Age adjustment allows rates from one geographic area or time period to be compared with rates from other geographic areas or time periods that may have differences in age distributions. Any observed differences in age-adjusted incidence rates between populations are not due to differing age structures. Age-adjusted incidence rates, rate ratios, and 95% confidence intervals were calculated using SEER*Stat software.\(^8\) The State of Idaho served as the reference group for rate ratio calculations.

Limitations to Data Interpretation and Comparisons
Rates based on population estimates: In non-census years, state and county population figures are estimates. Errors in the estimates will impact the rates.

Rate comparisons: Age-adjusted incidence rates based on small numbers of cases (fewer than 10 cases) may be unstable. In comparing rates among Metropolitan and Micropolitan Statistical Areas, factors such as the absolute numbers of cases and differences in demographics should be considered. Interpretations without consideration of these factors may be misleading or inaccurate.

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\(^9\) Source: SEER Program, National Cancer Institute, 2008.
RESULTS

Breast Cancer – Females Ages 40+
There were 3,620 invasive and 744 in situ cases of breast cancer diagnosed among Idaho resident females ages 40 years and older from 2006-2009. Late stage cases comprised 35.5% of invasive cases. Breast cancer case counts by Metropolitan and Micropolitan Statistical Area are shown in Table 2. Table 3 shows counts of late stage breast cancer cases among Idaho resident females ages 40+, age-adjusted rates of late stage breast cancer incidence, 95% confidence intervals (CIs) for the rates, and rate ratios comparing the rates in the Metropolitan and Micropolitan Statistical Areas to the State of Idaho. No Core-Based Statistical Area had significantly higher or lower rates of late stage breast cancer incidence among females ages 40+.

Cervical Cancer – Ages 20+
There were 168 invasive cases of cervical cancer diagnosed among Idaho resident females ages 20 years and older from 2006-2009.10 Late stage cases comprised 52.4% of invasive cases. Cervical cancer case counts by Metropolitan and Micropolitan Statistical Area are shown in Table 4. Table 5 shows counts of late stage cervical cancer cases among Idaho resident females ages 20+, age-adjusted rates of late stage cervical cancer incidence, 95% confidence intervals (CIs) for the rates, and rate ratios comparing the rates in the Metropolitan and Micropolitan Statistical Areas to the State of Idaho. No Core-Based Statistical Area had significantly higher or lower rates of late stage cervical cancer incidence among females ages 20+.

Colorectal Cancer – Females Ages 50+
There were 1,053 invasive and 12 in situ cases of colorectal cancer diagnosed among Idaho resident females ages 50 years and older from 2006-2009. Late stage cases comprised 54.8% of invasive cases. Colorectal cancer case counts by Metropolitan and Micropolitan Statistical Area are shown in Table 6. Table 7 shows counts of late stage colorectal cancer cases among Idaho resident females ages 50+, age-adjusted rates of late stage colorectal cancer incidence, 95% confidence intervals (CIs) for the rates, and rate ratios comparing the rates in the Metropolitan and Micropolitan Statistical Areas to the State of Idaho. No Core-Based Statistical Area had significantly higher or lower rates of late stage colorectal cancer incidence among females ages 50+.

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10 In situ cervix cases are not reportable according to national cancer statistics governing bodies and under Idaho Code 57-1703.
Colorectal Cancer – Males Ages 50+
There were 1,130 invasive and 35 in situ cases of colorectal cancer diagnosed among Idaho resident males ages 50 years and older from 2006-2009. Late stage cases comprised 53.9% of invasive cases. Colorectal cancer case counts by Metropolitan and Micropolitan Statistical Area are shown in Table 8. Table 9 shows counts of late stage colorectal cancer cases among Idaho resident males ages 50+, age-adjusted rates of late stage colorectal cancer incidence, 95% confidence intervals (CIs) for the rates, and rate ratios comparing the rates in the Metropolitan and Micropolitan Statistical Areas to the State of Idaho. No Core-Based Statistical Area had significantly higher or lower rates of late stage colorectal cancer incidence among males ages 50+.

CONCLUSIONS

Based on late stage incidence rates for cancer sites with effective population-based screening tests and effective treatment regimens, there is little evidence of disparities by Metropolitan or Micropolitan Statistical Area in Idaho. No Metropolitan or Micropolitan Statistical Areas had significantly higher late stage incidence rates for any of the cancer sites investigated. In contrast to a previous CDRI report that found significant disparities in cancer incidence patterns exist in Idaho by race and ethnicity and area-based contextual variables, health disparities were not identified in the current geographic report. This may be due to the coarser geographic level of analysis for the current report, which also did not investigate race, ethnicity, or contextual differences.

Although there is little evidence in this report for geographic disparities within Idaho in late stage incidence for cancers amenable to screening, overall Idaho continues to have among the lowest rates of cancer screening among all states and the District of Columbia. In 2010, Idaho ranked lowest in the U.S. for mammography utilization, 4th lowest for Pap tests, 5th lowest for ever having a sigmoidoscopy or colonoscopy, and 7th lowest for fecal occult blood test utilization. These statistics suggest that strategies are needed to improve cancer screening statewide.

Table 2. Idaho resident female breast cancer cases, ages 40+, by Metropolitan and Micropolitan Statistical Area and stage at diagnosis, 2006-2009.

<table>
<thead>
<tr>
<th>Geographic Area</th>
<th>Cancer Stage at Diagnosis</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>In situ</td>
</tr>
<tr>
<td>Idaho</td>
<td>744</td>
</tr>
<tr>
<td>13940 Blackfoot, ID Micropolitan Statistical Area</td>
<td>3</td>
</tr>
<tr>
<td>14260 Boise City-Nampa, ID Metropolitan Statistical Area</td>
<td>320</td>
</tr>
<tr>
<td>15420 Burley, ID Micropolitan Statistical Area</td>
<td>10</td>
</tr>
<tr>
<td>17660 Coeur d Alene, ID Metropolitan Statistical Area</td>
<td>82</td>
</tr>
<tr>
<td>26820 Idaho Falls, ID Metropolitan Statistical Area</td>
<td>47</td>
</tr>
<tr>
<td>292 Idaho Falls-Blackfoot, ID Combined Statistical Area</td>
<td>50</td>
</tr>
<tr>
<td>27220 Jackson, WV-ID (part) Micropolitan Statistical Area</td>
<td>1</td>
</tr>
<tr>
<td>30300 Lewiston, ID-WA (part) Metropolitan Statistical Area</td>
<td>43</td>
</tr>
<tr>
<td>30860 Logan, UT-ID (part) Metropolitan Statistical Area</td>
<td>4</td>
</tr>
<tr>
<td>34140 Moscow, ID Micropolitan Statistical Area</td>
<td>21</td>
</tr>
<tr>
<td>34300 Mountain Home, ID Micropolitan Statistical Area</td>
<td>5</td>
</tr>
<tr>
<td>36620 Ontario, OR-ID (part) Micropolitan Statistical Area</td>
<td>12</td>
</tr>
<tr>
<td>38540 Pocatello, ID Metropolitan Statistical Area</td>
<td>23</td>
</tr>
<tr>
<td>39940 Rexburg, ID Micropolitan Statistical Area</td>
<td>9</td>
</tr>
<tr>
<td>46300 Twin Falls, ID Micropolitan Statistical Area</td>
<td>41</td>
</tr>
</tbody>
</table>

Table 3. Late stage breast cancer statistics, Idaho resident females ages 40+, by Metropolitan and Micropolitan Statistical Area, 2006-2009.

<table>
<thead>
<tr>
<th>Geographic Area</th>
<th>Late Stage (Regional + Distant) Statistics</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Rate</td>
</tr>
<tr>
<td>Idaho</td>
<td>95.5</td>
</tr>
<tr>
<td>13940 Blackfoot, ID Micropolitan Statistical Area</td>
<td>81.1</td>
</tr>
<tr>
<td>14260 Boise City-Nampa, ID Metropolitan Statistical Area</td>
<td>98.7</td>
</tr>
<tr>
<td>15420 Burley, ID Micropolitan Statistical Area</td>
<td>84.3</td>
</tr>
<tr>
<td>17660 Coeur d Alene, ID Metropolitan Statistical Area</td>
<td>110.2</td>
</tr>
<tr>
<td>26820 Idaho Falls, ID Metropolitan Statistical Area</td>
<td>82.7</td>
</tr>
<tr>
<td>292 Idaho Falls-Blackfoot, ID Combined Statistical Area</td>
<td>82.2</td>
</tr>
<tr>
<td>27220 Jackson, WV-ID (part) Micropolitan Statistical Area</td>
<td>100.5</td>
</tr>
<tr>
<td>30300 Lewiston, ID-WA (part) Metropolitan Statistical Area</td>
<td>76.0</td>
</tr>
<tr>
<td>30860 Logan, UT-ID (part) Metropolitan Statistical Area</td>
<td>147.4</td>
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<tr>
<td>34140 Moscow, ID Micropolitan Statistical Area</td>
<td>78.6</td>
</tr>
<tr>
<td>34300 Mountain Home, ID Micropolitan Statistical Area</td>
<td>100.2</td>
</tr>
<tr>
<td>36620 Ontario, OR-ID (part) Micropolitan Statistical Area</td>
<td>110.3</td>
</tr>
<tr>
<td>38540 Pocatello, ID Metropolitan Statistical Area</td>
<td>82.6</td>
</tr>
<tr>
<td>39940 Rexburg, ID Micropolitan Statistical Area</td>
<td>111.1</td>
</tr>
<tr>
<td>46300 Twin Falls, ID Micropolitan Statistical Area</td>
<td>100.7</td>
</tr>
</tbody>
</table>

*The rate ratio indicates that the rate is significantly different than the rate for Idaho (p<0.05).*
Table 4. Idaho resident cervical cancer cases, ages 20+, by Metropolitan and Micropolitan Statistical Area and stage at diagnosis, 2006-2009.

<table>
<thead>
<tr>
<th>Geographic Area</th>
<th>In situ</th>
<th>Localized</th>
<th>Regional</th>
<th>Distant</th>
<th>Unstaged</th>
</tr>
</thead>
<tbody>
<tr>
<td>Idaho</td>
<td>72</td>
<td>58</td>
<td>30</td>
<td>8</td>
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<tr>
<td>13940 Blackfoot, ID Micropolitan Statistical Area</td>
<td>-</td>
<td>0</td>
<td>0</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>14260 Boise City-Nampa, ID Metropolitan Statistical Area</td>
<td>-</td>
<td>45</td>
<td>26</td>
<td>12</td>
<td>1</td>
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<tr>
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<td>-</td>
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<td>0</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>17660 Coeur d Alene, ID Metropolitan Statistical Area</td>
<td>-</td>
<td>3</td>
<td>3</td>
<td>6</td>
<td>0</td>
</tr>
<tr>
<td>26820 Idaho Falls, ID Metropolitan Statistical Area</td>
<td>-</td>
<td>6</td>
<td>3</td>
<td>3</td>
<td>0</td>
</tr>
<tr>
<td>292 Idaho Falls-Blackfoot, ID Combined Statistical Area</td>
<td>-</td>
<td>6</td>
<td>3</td>
<td>4</td>
<td>0</td>
</tr>
<tr>
<td>27220 Jackson, WY-ID (part) Micropolitan Statistical Area</td>
<td>-</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>30300 Lewiston, ID-WA (part) Metropolitan Statistical Area</td>
<td>-</td>
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<td>0</td>
<td>0</td>
<td>2</td>
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<tr>
<td>30860 Logan, UT-ID (part) Metropolitan Statistical Area</td>
<td>-</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>34140 Moscow, ID Micropolitan Statistical Area</td>
<td>-</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>34300 Mountain Home, ID Micropolitan Statistical Area</td>
<td>-</td>
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<td>1</td>
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<td>1</td>
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<tr>
<td>36620 Ontario, OR-ID (part) Micropolitan Statistical Area</td>
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<td>1</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
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<td>7</td>
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<td>1</td>
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<tr>
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<td>-</td>
<td>1</td>
<td>2</td>
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<td>0</td>
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<tr>
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<td>-</td>
<td>4</td>
<td>6</td>
<td>2</td>
<td>1</td>
</tr>
</tbody>
</table>

Table 5. Late stage cervical cancer statistics, Idaho resident females ages 20+, by Metropolitan and Micropolitan Statistical Area, 2006-2009.

<table>
<thead>
<tr>
<th>Geographic Area</th>
<th>Rate</th>
<th>Lower CI</th>
<th>Upper CI</th>
<th>Cases</th>
<th>Rate Ratio</th>
</tr>
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<td>Idaho</td>
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<td>3.3</td>
<td>5.1</td>
<td>88</td>
<td>-</td>
</tr>
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<td>13940 Blackfoot, ID Micropolitan Statistical Area</td>
<td>1.5</td>
<td>0.0</td>
<td>9.2</td>
<td>1</td>
<td>0.37</td>
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<td>4.6</td>
<td>3.3</td>
<td>6.4</td>
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<td>1.13</td>
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<td>1.6</td>
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<td>1</td>
<td>0.40</td>
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<td>4.2</td>
<td>1.9</td>
<td>8.1</td>
<td>9</td>
<td>1.02</td>
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<td>1.3</td>
<td>8.0</td>
<td>6</td>
<td>0.89</td>
</tr>
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<td>3.1</td>
<td>1.2</td>
<td>6.4</td>
<td>7</td>
<td>0.75</td>
</tr>
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<td>0.0</td>
<td>0.0</td>
<td>52.3</td>
<td>0</td>
<td>0.00</td>
</tr>
<tr>
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<td>0.0</td>
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<td>0</td>
<td>0.00</td>
</tr>
<tr>
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<td>23.8</td>
<td>0</td>
<td>0.00</td>
</tr>
<tr>
<td>34140 Moscow, ID Micropolitan Statistical Area</td>
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<td>0.0</td>
<td>8.6</td>
<td>0</td>
<td>0.00</td>
</tr>
<tr>
<td>34300 Mountain Home, ID Micropolitan Statistical Area</td>
<td>6.2</td>
<td>0.7</td>
<td>22.5</td>
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<td>1.52</td>
</tr>
<tr>
<td>36620 Ontario, OR-ID (part) Micropolitan Statistical Area</td>
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<td>0.1</td>
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<td>0.74</td>
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<tr>
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<td>2.6</td>
<td>13.5</td>
<td>7</td>
<td>1.60</td>
</tr>
<tr>
<td>39940 Rexburg, ID Micropolitan Statistical Area</td>
<td>4.6</td>
<td>0.6</td>
<td>16.4</td>
<td>2</td>
<td>1.12</td>
</tr>
<tr>
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<td>5.7</td>
<td>2.4</td>
<td>11.3</td>
<td>8</td>
<td>1.39</td>
</tr>
</tbody>
</table>

*The rate ratio indicates that the rate is significantly different than the rate for Idaho (p<0.05).*
Table 6. Idaho resident female colorectal cancer cases, ages 50+, by Metropolitan and Micropolitan Statistical Area and stage at diagnosis, 2006-2009.

<table>
<thead>
<tr>
<th>Geographic Area</th>
<th>Cancer Stage at Diagnosis</th>
<th>In situ</th>
<th>Localized</th>
<th>Regional</th>
<th>Distant</th>
<th>Unstaged</th>
</tr>
</thead>
<tbody>
<tr>
<td>Idaho</td>
<td></td>
<td>12</td>
<td>395</td>
<td>386</td>
<td>191</td>
<td>81</td>
</tr>
<tr>
<td>13940 Blackfoot, ID Micropolitan Statistical Area</td>
<td></td>
<td>0</td>
<td>8</td>
<td>5</td>
<td>4</td>
<td>3</td>
</tr>
<tr>
<td>14260 Boise City-Nampa, ID Metropolitan Statistical Area</td>
<td></td>
<td>4</td>
<td>129</td>
<td>129</td>
<td>64</td>
<td>24</td>
</tr>
<tr>
<td>15420 Burley, ID Micropolitan Statistical Area</td>
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<td>0</td>
<td>10</td>
<td>9</td>
<td>3</td>
<td>0</td>
</tr>
<tr>
<td>17660 Coeur d'Alene, ID Metropolitan Statistical Area</td>
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<td>0</td>
<td>61</td>
<td>43</td>
<td>30</td>
<td>7</td>
</tr>
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<td>20</td>
<td>30</td>
<td>14</td>
<td>4</td>
</tr>
<tr>
<td>292 Idaho Falls-Blackfoot, ID Combined Statistical Area</td>
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<td>28</td>
<td>35</td>
<td>18</td>
<td>7</td>
</tr>
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<td>1</td>
<td>0</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
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<td>3</td>
<td>17</td>
<td>11</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
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<td>1</td>
<td>2</td>
<td>3</td>
<td>3</td>
</tr>
<tr>
<td>34140 Moscow, ID Micropolitan Statistical Area</td>
<td></td>
<td>0</td>
<td>6</td>
<td>5</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>34300 Mountain Home, ID Micropolitan Statistical Area</td>
<td></td>
<td>0</td>
<td>9</td>
<td>4</td>
<td>2</td>
<td>1</td>
</tr>
<tr>
<td>36620 Ontario, OR-ID (part) Micropolitan Statistical Area</td>
<td></td>
<td>0</td>
<td>6</td>
<td>9</td>
<td>6</td>
<td>0</td>
</tr>
<tr>
<td>38540 Pocatello, ID Metropolitan Statistical Area</td>
<td></td>
<td>0</td>
<td>21</td>
<td>25</td>
<td>8</td>
<td>11</td>
</tr>
<tr>
<td>39940 Rexburg, ID Micropolitan Statistical Area</td>
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<td>0</td>
<td>7</td>
<td>5</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>46300 Twin Falls, ID Micropolitan Statistical Area</td>
<td></td>
<td>0</td>
<td>34</td>
<td>36</td>
<td>13</td>
<td>7</td>
</tr>
</tbody>
</table>

Table 7. Late stage colorectal cancer statistics, Idaho resident females ages 50+, by Metropolitan and Micropolitan Statistical Area, 2006-2009.

<table>
<thead>
<tr>
<th>Geographic Area</th>
<th>Late Stage (Regional + Distant) Statistics</th>
<th>Rate</th>
<th>Lower CI</th>
<th>Upper CI</th>
<th>Cases</th>
<th>Rate Ratio</th>
</tr>
</thead>
<tbody>
<tr>
<td>Idaho</td>
<td></td>
<td>64.5</td>
<td>59.3</td>
<td>70.1</td>
<td>577</td>
<td>-</td>
</tr>
<tr>
<td>13940 Blackfoot, ID Micropolitan Statistical Area</td>
<td></td>
<td>36.6</td>
<td>16.7</td>
<td>70.0</td>
<td>9</td>
<td>0.57</td>
</tr>
<tr>
<td>14260 Boise City-Nampa, ID Metropolitan Statistical Area</td>
<td></td>
<td>61.6</td>
<td>53.1</td>
<td>71.0</td>
<td>193</td>
<td>0.95</td>
</tr>
<tr>
<td>15420 Burley, ID Micropolitan Statistical Area</td>
<td></td>
<td>46.5</td>
<td>23.9</td>
<td>81.3</td>
<td>12</td>
<td>0.72</td>
</tr>
<tr>
<td>17660 Coeur d'Alene, ID Metropolitan Statistical Area</td>
<td></td>
<td>78.5</td>
<td>61.4</td>
<td>98.9</td>
<td>73</td>
<td>1.22</td>
</tr>
<tr>
<td>26820 Idaho Falls, ID Metropolitan Statistical Area</td>
<td></td>
<td>66.9</td>
<td>48.5</td>
<td>90.0</td>
<td>44</td>
<td>1.04</td>
</tr>
<tr>
<td>292 Idaho Falls-Blackfoot, ID Combined Statistical Area</td>
<td></td>
<td>59.2</td>
<td>44.2</td>
<td>77.5</td>
<td>53</td>
<td>0.92</td>
</tr>
<tr>
<td>27220 Jackson, WY-ID (part) Micropolitan Statistical Area</td>
<td></td>
<td>20.1</td>
<td>0.5</td>
<td>188.4</td>
<td>1</td>
<td>0.31</td>
</tr>
<tr>
<td>30300 Lewiston, ID-WA (part) Metropolitan Statistical Area</td>
<td></td>
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<td>23.0</td>
<td>72.0</td>
<td>14</td>
<td>0.66</td>
</tr>
<tr>
<td>30860 Logan, UT-ID (part) Metropolitan Statistical Area</td>
<td></td>
<td>74.8</td>
<td>23.7</td>
<td>174.7</td>
<td>5</td>
<td>1.16</td>
</tr>
<tr>
<td>34140 Moscow, ID Micropolitan Statistical Area</td>
<td></td>
<td>35.7</td>
<td>12.6</td>
<td>77.8</td>
<td>6</td>
<td>0.55</td>
</tr>
<tr>
<td>34300 Mountain Home, ID Micropolitan Statistical Area</td>
<td></td>
<td>52.5</td>
<td>18.9</td>
<td>114.4</td>
<td>6</td>
<td>0.81 *</td>
</tr>
<tr>
<td>36620 Ontario, OR-ID (part) Micropolitan Statistical Area</td>
<td></td>
<td>101.8</td>
<td>56.5</td>
<td>168.4</td>
<td>15</td>
<td>1.58</td>
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<tr>
<td>38540 Pocatello, ID Metropolitan Statistical Area</td>
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<td>67.7</td>
<td>46.3</td>
<td>95.4</td>
<td>33</td>
<td>1.05</td>
</tr>
<tr>
<td>39940 Rexburg, ID Micropolitan Statistical Area</td>
<td></td>
<td>33.7</td>
<td>12.2</td>
<td>73.5</td>
<td>6</td>
<td>0.52</td>
</tr>
<tr>
<td>46300 Twin Falls, ID Micropolitan Statistical Area</td>
<td></td>
<td>75.8</td>
<td>55.8</td>
<td>100.6</td>
<td>49</td>
<td>1.17</td>
</tr>
</tbody>
</table>

*The rate ratio indicates that the rate is significantly different than the rate for Idaho (p<0.05).
Table 8. Idaho resident male colorectal cancer cases, ages 50+, by Metropolitan and Micropolitan Statistical Area and stage at diagnosis, 2006-2009.

<table>
<thead>
<tr>
<th>Geographic Area</th>
<th>Cancer Stage at Diagnosis</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>In situ</td>
</tr>
<tr>
<td>Idaho</td>
<td>35</td>
</tr>
<tr>
<td>13940 Blackfoot, ID Micropolitan Statistical Area</td>
<td>1</td>
</tr>
<tr>
<td>14260 Boise City-Nampa, ID Metropolitan Statistical Area</td>
<td>11</td>
</tr>
<tr>
<td>15420 Burley, ID Micropolitan Statistical Area</td>
<td>1</td>
</tr>
<tr>
<td>17660 Coeur d Alene, ID Metropolitan Statistical Area</td>
<td>3</td>
</tr>
<tr>
<td>26820 Idaho Falls, ID Metropolitan Statistical Area</td>
<td>0</td>
</tr>
<tr>
<td>292 Idaho Falls-Blackfoot, ID Combined Statistical Area</td>
<td>1</td>
</tr>
<tr>
<td>27220 Jackson, WY-ID (part) Micropolitan Statistical Area</td>
<td>0</td>
</tr>
<tr>
<td>30300 Lewiston, ID-WA (part) Metropolitan Statistical Area</td>
<td>6</td>
</tr>
<tr>
<td>30860 Logan, UT-ID (part) Metropolitan Statistical Area</td>
<td>1</td>
</tr>
<tr>
<td>34140 Moscow, ID Micropolitan Statistical Area</td>
<td>0</td>
</tr>
<tr>
<td>34300 Mountain Home, ID Micropolitan Statistical Area</td>
<td>1</td>
</tr>
<tr>
<td>36620 Ontario, OR-ID (part) Micropolitan Statistical Area</td>
<td>0</td>
</tr>
<tr>
<td>38540 Pocatello, ID Metropolitan Statistical Area</td>
<td>0</td>
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<tr>
<td>39940 Rexburg, ID Micropolitan Statistical Area</td>
<td>0</td>
</tr>
<tr>
<td>46300 Twin Falls, ID Micropolitan Statistical Area</td>
<td>1</td>
</tr>
</tbody>
</table>

Table 9. Late stage colorectal cancer statistics, Idaho resident males ages 50+, by Metropolitan and Micropolitan Statistical Area, 2006-2009.

<table>
<thead>
<tr>
<th>Geographic Area</th>
<th>Late Stage (Regional + Distant) Statistics</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Rate</td>
</tr>
<tr>
<td>Idaho</td>
<td>78.2</td>
</tr>
<tr>
<td>13940 Blackfoot, ID Micropolitan Statistical Area</td>
<td>91.9</td>
</tr>
<tr>
<td>14260 Boise City-Nampa, ID Metropolitan Statistical Area</td>
<td>80.6</td>
</tr>
<tr>
<td>15420 Burley, ID Micropolitan Statistical Area</td>
<td>72.8</td>
</tr>
<tr>
<td>17660 Coeur d Alene, ID Metropolitan Statistical Area</td>
<td>63.9</td>
</tr>
<tr>
<td>26820 Idaho Falls, ID Metropolitan Statistical Area</td>
<td>97.7</td>
</tr>
<tr>
<td>292 Idaho Falls-Blackfoot, ID Combined Statistical Area</td>
<td>96.3</td>
</tr>
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<td>27220 Jackson, WY-ID (part) Micropolitan Statistical Area</td>
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<td>46.8</td>
</tr>
<tr>
<td>34140 Moscow, ID Micropolitan Statistical Area</td>
<td>54.2</td>
</tr>
<tr>
<td>34300 Mountain Home, ID Micropolitan Statistical Area</td>
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</tr>
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<td>36620 Ontario, OR-ID (part) Micropolitan Statistical Area</td>
<td>46.8</td>
</tr>
<tr>
<td>38540 Pocatello, ID Metropolitan Statistical Area</td>
<td>58.8</td>
</tr>
<tr>
<td>39940 Rexburg, ID Micropolitan Statistical Area</td>
<td>55.5</td>
</tr>
<tr>
<td>46300 Twin Falls, ID Micropolitan Statistical Area</td>
<td>88.2</td>
</tr>
</tbody>
</table>

*The rate ratio indicates that the rate is significantly different than the rate for Idaho (p<0.05).*