

# AROOSTOOK DISTRICT:

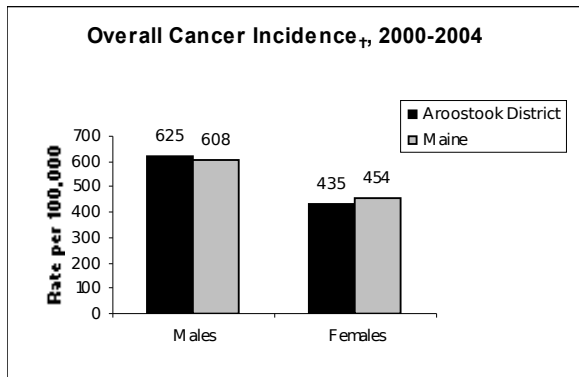
# Chronic Diseases

## Cancer

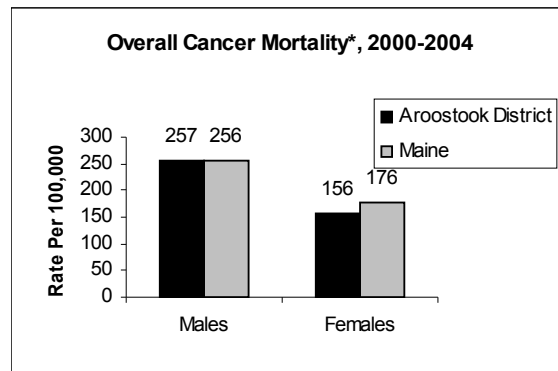
Cancers are caused by modifiable risk factors, by genes, and influenced by environmental factors. Four cancers account for the majority of new cancer diagnoses: lung, colorectal, female breast, and in men, prostate. It is the second leading cause of death in Maine.

Data are collected and analyzed by the Maine CDC's certified Maine Cancer Registry to monitor trends and investigate possible cancer clusters. The Maine Comprehensive Cancer Program supports strategic planning in partnership with its nonprofit partners and provides targeted prevention activities if there are gaps as identified in the Maine Cancer Plan. The Maine Breast and Cervical Cancer Program reduces disparities in health by supporting outreach and screening for breast and cervical cancer in women at risk who cannot afford them.

Contact Maine's cancer programs at [www.mainepublichealth.gov](http://www.mainepublichealth.gov)



†Source: 2000-2004 Maine Cancer Registry, Maine CDC

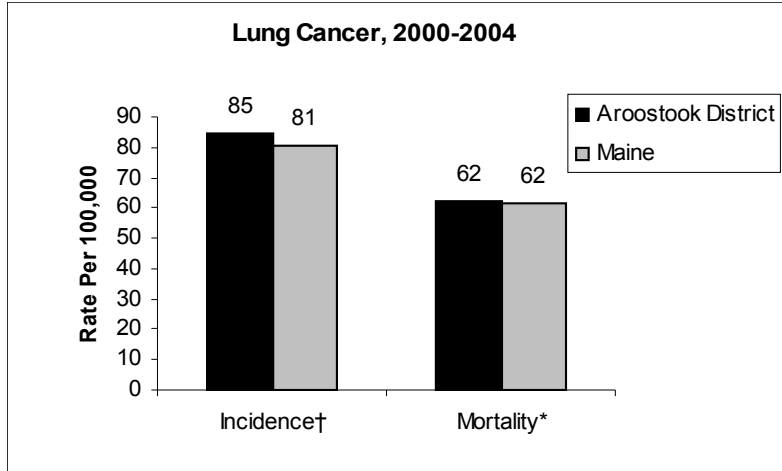


\* Source: 2000-2004 National Center for Health Stats data

	<b>Aroostook District Rate</b> (± Margin of Error) <b>Male</b>	<b>Aroostook District Rate</b> (± Margin of Error) <b>Female</b>	<b>Maine State Rate</b> (± Margin of Error) <b>Male</b>	<b>Maine State Rate</b> (± Margin of Error) <b>Female</b>
Overall Cancer Incidence† Rate (Per 100,000)	624.8 (± 34.3)	435.3 (±26.8)	608.3 (±8.6)	454.2 (±6.7)
Overall Cancer Mortality* Rate (Per 100,000)	257.3 (±22.2)	156.4 (±15.3)	255.6 (±5.7)	175.6 (±4.1)

†Source: 2000-2004 Maine Cancer Registry, Maine CDC, DHHS

\*Source: 2000-2004 National Center for Health Statistics data



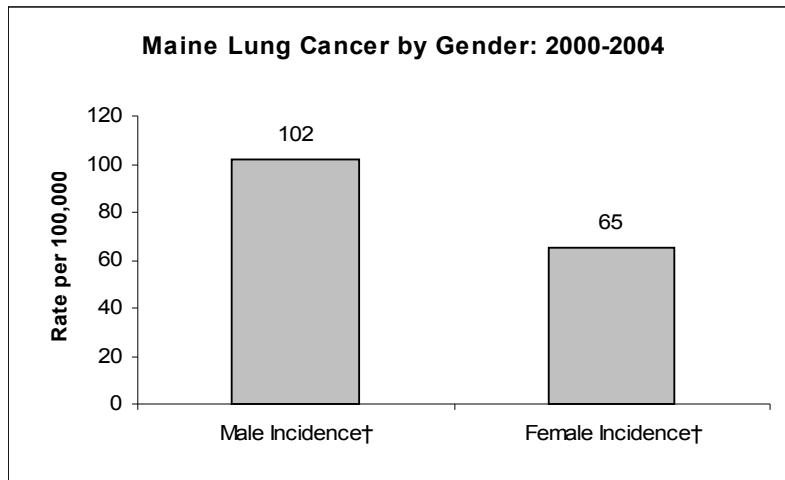
†Incidence Source: 2000-2004 Maine Cancer Registry, Maine CDC, DHHS

\*Mortality Source: 2000-2004 National Center for Health Statistics data

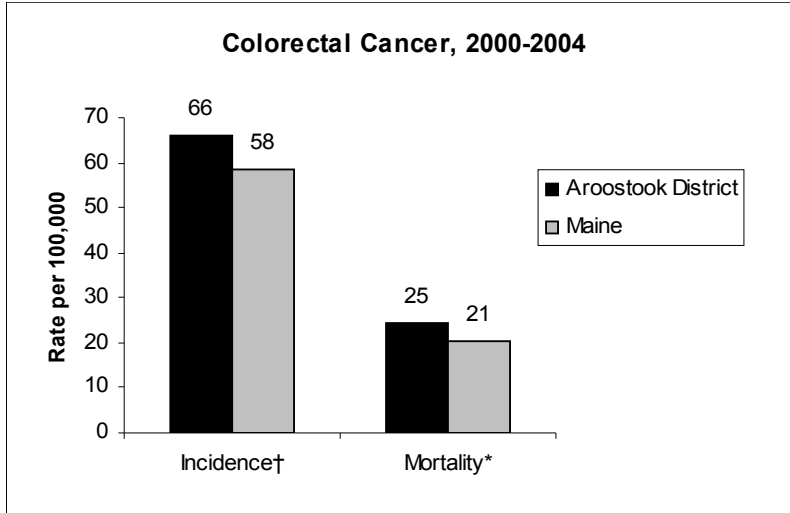
	<b>Aroostook District Rate</b> (± Margin of Error)	<b>Maine State Rate</b> (± Margin of Error)
Lung Cancer Incidence† Rate (Per 100,000)	84.5 (±8.4)	80.6 (±2.1)
Lung Cancer Mortality* Rate (Per 100,000)	62.4 (±7.2)	61.5 (±1.8)

†Incidence Source: 2000-2004 Maine Cancer Registry, Maine CDC, DHHS

\*Mortality Source: 2000-2004 National Center for Health Statistics data



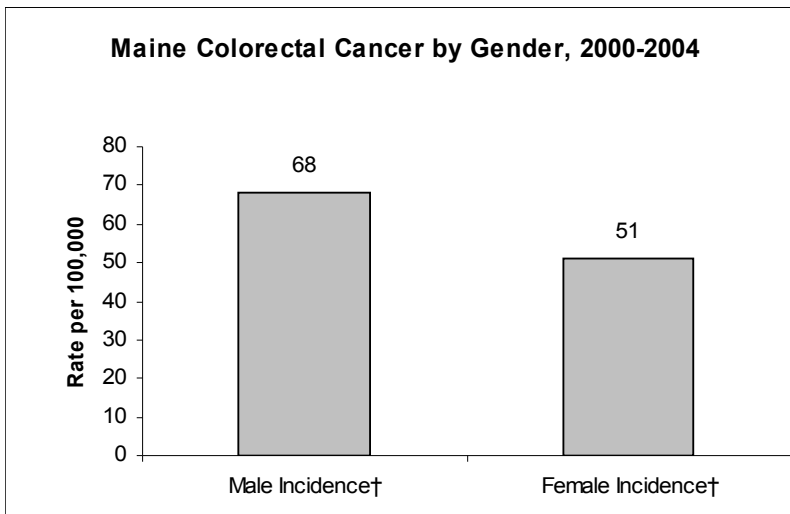
†Incidence Source: 2000-2004 Maine Cancer Registry, Maine CDC, DHHS



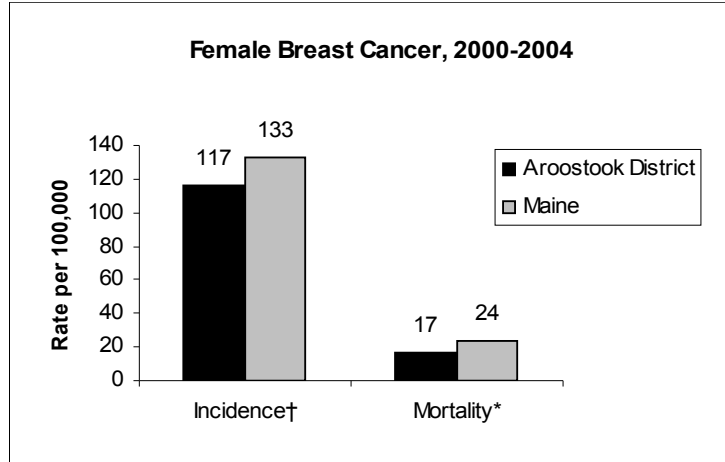
†Incidence Source: 2000-2004 Maine Cancer Registry, Maine CDC, DHHS  
 \*Mortality Source: 2000-2004 National Center for Health Statistics data

	<b>Aroostook District Rate</b> (± Margin of Error)	<b>Maine State Rate</b> (± Margin of Error)
Colorectal Cancer Incidence† Rate (Per 100,000)	65.9 (±7.5)	58.4 (±1.8)
Colorectal Cancer Mortality* Rate (Per 100,000)	24.5 (±4.6)	20.5 (±1.1)

†Incidence Source: 2000-2004 Maine Cancer Registry, Maine CDC, DHHS  
 \*Mortality Source: 2000-2004 National Center for Health Statistics data



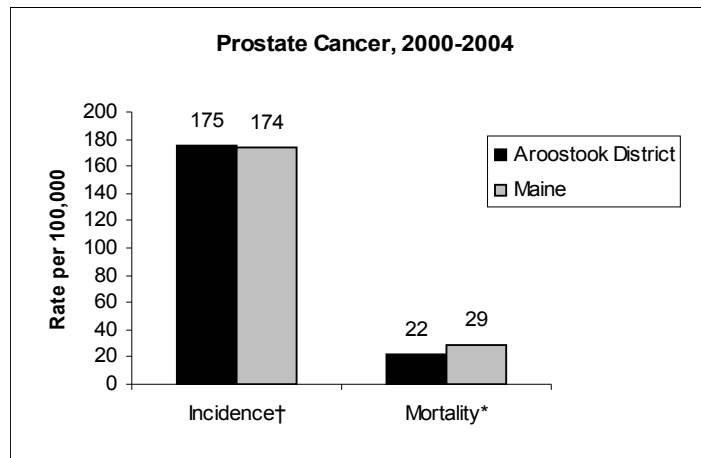
†Incidence Source: 2000-2004 Maine Cancer Registry, Maine CDC, DHHS



†Incidence Source: 2000-2004 Maine Cancer Registry, Maine CDC, DHHS  
 \*Mortality Source: 2000-2004 National Center for Health Statistics data

	<b>Aroostook District Rate</b> (± Margin of Error)	<b>Maine State Rate</b> (± Margin of Error)
Female Breast Cancer Incidence† Rate (Per 100,000)	116.7 (±14.2)	132.5 (±3.6)
Female Breast Cancer Mortality* Rate (Per 100,000)	16.9 (±5.3)	23.7 (±1.5)

†Incidence Source: 2000-2004 Maine Cancer Registry, Maine CDC, DHHS  
 \*Mortality Source: 2000-2004 National Center for Health Statistics data



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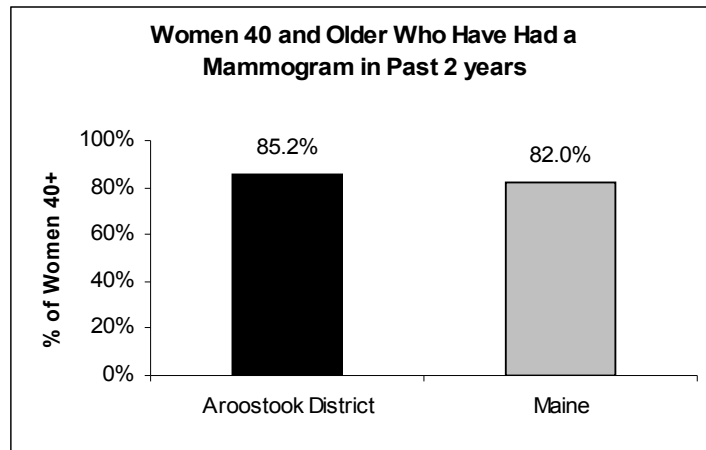
	<b>Aroostook District Rate</b> (± Margin of Error)	<b>Maine State Rate</b> (± Margin of Error)
Prostate Cancer Incidence† Rate (Per 100,000)	174.7 (±18.3)	174.5 (± 4.6)
Prostate Cancer Mortality* Rate (Per 100,000)	21.7 (±7.0)	28.5 (±2.1)

†Incidence Source: 2000-2004 Maine Cancer Registry, Maine CDC, DHHS  
 \*Mortality Source: 2000-2004 National Center for Health Statistics data

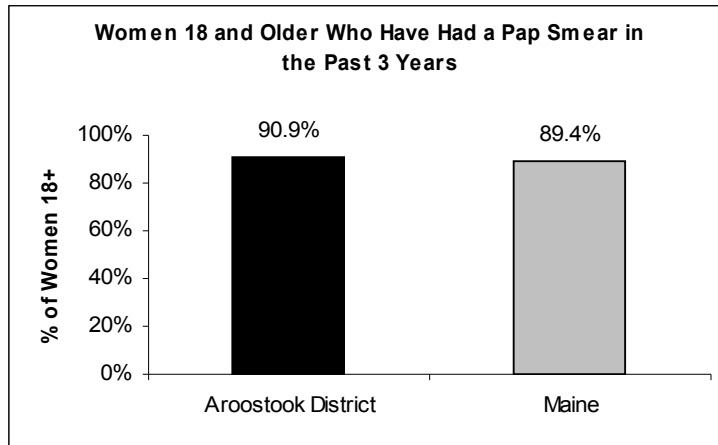
## Cancer Screening

Screening tests for breast, colorectal, and cervical cancer have contributed to declines in death due to these cancers. Colonoscopies and pap smears have preventive aspects critical to early detection and treatment.

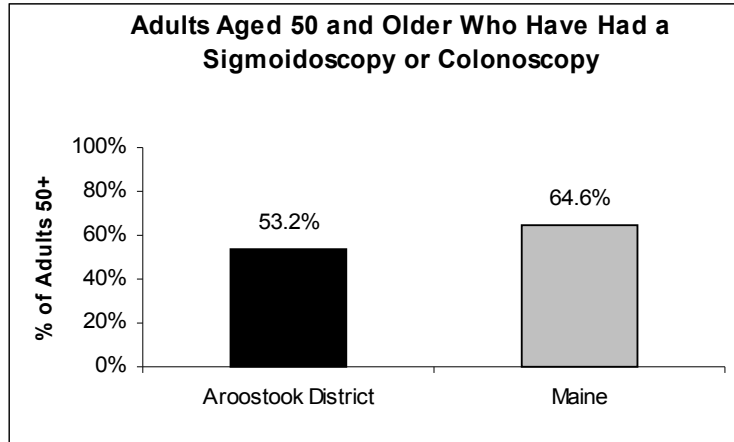
The early detection of cancer is the most effective way to improve the chances of a positive outcome through treatment. Additional information on cancer screening can be obtained from Maine CDC's Comprehensive Cancer Control Program at: [www.maine.gov/dhhs/boh/ccp.html](http://www.maine.gov/dhhs/boh/ccp.html).



Source: 2006 BRFSS



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	<b>Aroostook District Percent</b> (± Margin of Error)	<b>Maine State Percent</b> (± Margin of Error)
Mammogram Among Women 40 and Older (Past 2 years) <sup>1</sup>	85.2 (±7.3)	82.0 (± 2.0)
Pap Smear Among Women 18 and Older (Past 3 Years) <sup>2</sup>	90.9 (±5.7)	89.4 (± 1.6)
Sigmoidoscopy/colonoscopy Among Adults 50 and Older <sup>3</sup>	53.2 (±10.0)	64.6 (± 2.4)

1) Source: 2006 BRFSS: % of women 40 years and older who have had a mammogram in the past 2 years

2) Source: 2006 BRFSS: % of women 18 years and older who have had a pap smear within the past 3 years

3) Source: 2006 BRFSS: % of adults 50 years and older who have had a sigmoidoscopy or colonoscopy