The Delaware Cancer Consortium

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The Delaware Cancer Consortium (DCC) was originally formed as the Delaware Advisory Council on Cancer Incidence and Mortality in March 2001 to advise the governor and legislature on the causes of cancer incidence and mortality and potential methods for reducing both.

The DCC’s work has helped our state improve in many areas, reducing incidence and mortality. The DCC is fully supported by the Division of Public Health (DPH) and led by volunteers who have a passion for improvement. We believe that anything is possible if you examine the facts, involve the right people, and develop an action plan. They – and the hundreds of others who work with them on projects – give their time, skills, and knowledge to make change happen.

The DCC:

• Maintains a permanent council, managed by a neutral party that reports directly to the governor to oversee implementation of the recommendations and comprehensive cancer control planning;
• Serves as a leader and resource for Delawareans by informing the public through reports and the Healthy Delaware website about cancer prevention, early detection, and treatment;
• Created and published multiple state cancer plans, most recently the 2012-2017 plan;
• Oversaw the implementation of more than 30 recommendations in the past four years.

First and foremost, the DCC’s goal is to help people prevent cancer and detect it early. With cancer screenings, early detection is possible, giving people the best chance of fighting the disease effectively by identifying it when it’s most treatable. The DCC has worked to spread the word about the screenings and created more opportunities for people to be screened through special programs such as Screening for Life. Most importantly, since lung cancer continues to account for an enormous share of Delaware’s overall cancer burden, the DCC recommends offering low-dose computerized tomography (CT) scans to smokers and former smokers. From 2008–2012,¹ lung cancer accounted for 14.4 percent of all newly diagnosed cancer cases and 30.0 percent of all cancer deaths in Delaware. This screening is expected to find cancer when it can be treated, helping people to overcome the disease by finding it at an early stage.
The DCC’s landmark program, the Delaware Cancer Treatment Program, continues to provide cancer treatment for 24 months to any Delawarean who qualifies. This program – the first of its kind in the nation – continues to evolve as we work to fill identified gaps, helping Delawareans get the cancer treatment they need.

The DCC has made significant progress in their goal to eliminate the inequality in Delaware’s cancer burden for the period 2008–2012. Among African Americans, lung cancer, breast cancer, and colorectal cancer deaths are down. Colorectal cancer is down 50 percent for men and 45 percent for women. The grassroots efforts to make the African American community aware of the cancer threat – and the need for early detection through screenings – are making a difference.

Data, statistics about cancer in our state, is the foundation of knowledge for making changes that can save and improve lives. We continue to forge relationships with facilities and organizations that can provide us with accurate data to expand and enhance our understanding of cancer diagnosed among Delaware’s many demographic and geographic regions. With the support of DPH, the DCC uses Delaware Cancer Registry data to create maps. The maps identify areas with statistically significant late-stage diagnosis of breast and colon cancer, allowing them to target education and awareness in those areas.

Improvements in Delaware’s cancer incidence and mortality for the time period 1998–2002 to 2008–2012 include:¹

- The overall cancer death rate decreased 14.0 percent, an improvement that was similar to the national decline (14.0 percent).
- Lung cancer mortality rates declined 32.6 percent among African American men and 23.7 percent among African American women.
- Female breast cancer mortality declined 22.3 percent, which was greater than the national decline (17.4 percent).
- African Americans showed a greater rate of decline in female breast cancer mortality than Caucasians (27.2 and 20.7 percent, respectively).
- Prostate cancer mortality declined 39.2 percent among African American Delawareans, compared to 23.3 percent among Caucasian Delawareans.
- Colorectal cancer mortality rates declined 49.7 percent among African American men, compared to 29.3 percent among Caucasian men.
- Colorectal cancer mortality declined 44.6 percent among African American women, compared to 29.0 percent among Caucasian women.

For the time period 2008–2012, improvements in Delaware’s cancer screening, incidence and mortality include:¹

- The colorectal cancer incidence rate among African Americans in Delaware (41.4 per 100,000) was lower than the U.S. rate (52.3 per 100,000). This difference is statistically significant.
- In 2014, Delaware ranked fifth highest in the United States for colorectal cancer screenings, with 76.5 percent of Delawareans age 50 and older reported having had a sigmoidoscopy or colonoscopy, according to the 2014 Behavioral Risk Factor Survey (BRFS).
• A decline in female breast cancer mortality (22 percent) was 29.4 percent greater than the national decline (17 percent).

It has been more than a decade since the DCC began its quest to lower cancer incidence and mortality rates in Delaware. The DCC realizes cancer is a complex disease and there is no one silver bullet. The ultimate goal is to work toward having the lowest cancer incidence and mortality rates in the nation. DCC members want to ensure that Delawareans who are diagnosed with cancer receive the best possible care in an efficient, person-centric way.

As the DCC moves forward, it will educate Delawareans about the risk factors for cancer, such as being physically active and quitting tobacco use. Members will also continue work to identify and address the root causes of racial and ethnic disparities in cancer incidence and mortality in Delaware.

The reason is obvious. With every change, the DCC may save another life.

References