American Cancer Society Annual Cancer Statistics 2024 Shows Drop in Cancer Mortality but Increasing Incidence for Six of the Top Ten Cancers

American Cancer Society

On January 17, 2024, the American Cancer Society (ACS) released Cancer Statistics, 2024, the organization's annual report on cancer facts and trends. The new data show overall cancer mortality has continued to decline, resulting in over four million fewer deaths in the United States since 1991; however, this progress is jeopardized by increasing incidence for six of the top ten cancers as the projected number of new diagnoses now tops 2 million (2,001,140) for the first time. These important findings are published in CA: A Cancer Journal for Clinicians, alongside its consumer-friendly companion, *Cancer Facts & Figures 2024*, available on cancer.org.²

"We're encouraged by the steady drop in cancer mortality as a result of less smoking, earlier detection for some cancers, and improved treatment," said Rebecca Siegal, senior scientific director, surveillance research at the American Cancer Society and lead author of the report. "But as a nation, we've dropped the ball on cancer prevention as incidence continues to increase for many common cancers – like breast, prostate, and endometrial, as well as colorectal and cervical cancers in some young adults."

For the report, ACS researchers compiled the most recent data on population-based cancer occurrence and outcomes using incidence data collected by central cancer registries (through 2020) and mortality data collected by the National Center for Health Statistics (through 2021).

Rising colorectal cancer incidence has rapidly shifted mortality patterns in adults under 50 years of age; colorectal cancer has moved up from being the fourth leading cause of cancer death in both younger men and women two decades ago to first in men and second in women. Breast cancer leads in women under 50 with 2,251 deaths in 2021.

"The continuous sharp increase in colorectal cancer in younger Americans is alarming," said Dr. Ahmedin Jemal, senior vice president, surveillance and health equity science at the American Cancer Society and senior author of the study. "We need to halt and reverse this trend by increasing uptake of screening, including awareness of non-invasive stool tests with follow-up care, in people 45-49 years. Up to one-third of people diagnosed before 50 have a family history or genetic predisposition and should begin screening before age 45 years. We also need to increase investment to elucidate the underlying reasons for the rising incidence to uncover additional preventive measures."

"The 2024 ACS cancer report underscores the importance of cancer prevention, and illuminates priority areas to address cancers whose incidence and/or mortality rates are inexplicably rising," said Dr. Karen E. Knudsen, chief executive officer at the American Cancer Society. "These observations highlight the critical need to

invest in equitable application of proven cancer control interventions, and in discovery for new therapies -- especially for advanced-stage cancers. Both endeavors will be essential to accelerate progress against the 200 diseases we call cancer, and to save lives."

Other highlights from the report include:

- Cervical cancer incidence rates are decreasing steeply in women in their 20s, who were first to receive the HPV vaccine, but are increased in women 30-44 years old by 1.7% per year from 2012 through 2019, highlighting the need for more emphasis on screening in young women, as well as broader uptake of the vaccine. In 2021, HPV vaccination coverage in adolescents 13-17 years ranged from 33% in Mississippi to 79% in the District of Columbia.
- After decades of increase, cancer incidence in children has finally leveled off, although rates continue to increase among adolescents (ages 15-19 years), including a greater than 4% per year rise in thyroid cancer, much of which is likely overdiagnosis; the 15-year survival rate for thyroid cancer in adolescents is 99%.
- Mortality rates continue to increase by 2% per year for uterine corpus (endometrial) cancer, one of the few cancers with increasing mortality. Steeper increases in women of color are widening racial disparities, with the death rate now two times higher in Black women (9.1 per 100,000) than in White women (4.6 per 100,000).
- Cancer patients are getting younger: the proportion of diagnoses in people who are middle-aged (50-64 years) increased from 25% in 1995 to 30% in 2019-2020, whereas the proportion 65 years and older decreased from 61% to 58%, despite both age groups growing in the general population (from 13% to 19% for ages 50-64 years and from 13% to 17% for ages 65 and older). In addition to changes in the population age distribution, this shift reflects steep decreases in incidence of prostate cancer and smoking-related cancers in older adults, as well as increased cancer incidence in people born after the 1950s because of higher obesity and other yet unknown factors.

"People younger than 65 are less likely to have health insurance and more likely to be juggling family and careers," explained Dr. William Dahut, chief scientific officer at the American Cancer Society. "Also, men and women diagnosed younger have a longer life expectancy in which to suffer treatment-related side effects, such as second cancers."

The report also showed progress against cancer is hampered by wide static cancer disparities. Compared to White people, mortality rates are two-fold higher for prostate, stomach, and uterine corpus cancers in Black people and for liver, stomach, and kidney cancers in Native American people.

"This report underscores the need for public policy interventions to help reduce these cancer disparities and save more lives," said Lisa A. Lacasse, president of ACS's advocacy affiliate, the American Cancer Society Cancer Action Network. "We urge lawmakers at all levels of government to advance policies that ensure more people have health insurance coverage as well as improved access to and affordability of care, such as increased funding for cancer research and screening programs. Doing so will bring us closer to our vision of ending cancer as we know it, for everyone."

All of the data in these reports can be accessed from the newly designed Cancer Statistics Center, available on cancer.org, which includes custom maps and graphs, such as a state-level comparison of smoking prevalence and lung cancer rates, which can be viewed and downloaded.⁴

This year's report also includes a special section: Cancer in People Who Identify as Lesbian, Gay, Bisexual, Transgender, Queer or Gender-nonconforming (LGBTQ+). The section is a summary of the latest information on the prevalence of major modifiable cancer risk factors and preventive measures, including screening in the LGBTQ+ populations, as well as challenges faced by LGBTQ+ individuals with cancer-based on current data.

ACS author Angela Giaquinto also participated in the study.

References

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