In 2014, lung and bronchus cancer was the second most common cancer diagnosed among Pennsylvania residents, accounting for about 14 percent of all invasive cancers diagnosed in the state. During that year, there were 10,662 cases of invasive lung and bronchus cancer diagnosed for an age-adjusted incidence rate of 63.2 per 100,000. By comparison, there were 10,095 invasive cases reported in 2004 for a rate of 68.2. The 2014 rate was approximately 7 percent lower than the 2004 rate.

In 2014, lung and bronchus cancer was the most common type of cancer death among Pennsylvania residents, accounting for about 26 percent of all cancer deaths. During that year, lung and bronchus cancer resulted in 7,394 deaths for an age-adjusted rate of 43.6 per 100,000. By comparison, there were 7,928 deaths reported in 2004 for a rate of 53.1. The 2014 rate was about 18 percent lower than the rate for 2004. The decrease for age-adjusted mortality rates of lung and bronchus cancer was largely due to decreasing rates among males.

Pennsylvania's age-adjusted incidence rate for invasive lung and bronchus cancer was statistically significantly higher than the United States rates in 2014 for all cases, males and females. Pennsylvania's male rate was 24.1 percent higher than the United States rate, while the state's female rate was about 17.8 percent higher. Male incidence rates for lung and bronchus cancer were dramatically higher than female rates in both Pennsylvania and the United States.

Pennsylvania's age-adjusted mortality rate for lung and bronchus cancer was higher than the United States rates for all deaths, males and females, in 2014. In 2014, Pennsylvania's rate for all deaths was 3.3 percent higher than the United States. As with the incidence rates, the death rates due to lung and bronchus cancer among males were much higher than females in both Pennsylvania and the United States.
STAGE of DISEASE at Time of Diagnosis by Sex, 2008-2014

**MALES** - The percentage of lung and bronchus cancers diagnosed at the early stage was 16.9 in 2012-2014. By comparison, the early stage percentage was 15.3 in 2008-2010. A significantly higher percentage of lung cancer cases among males was detected at the late stage than at the early stage. The late stage percentage was about the same during the five summary periods and was recorded as 77.0 in 2012-2014.

**FEMALES** - Among female residents, the percentage of early stage lung and bronchus cancers increased from 20.0 in 2008-2010 to 22.0 in 2012-2014. A significantly higher percentage of lung cancer cases among females was detected at the late stage. Late stage cases have remained fairly stable. In fact, the 2012-2014 rate of 72.5 percent is less than a percentage point lower than the rate in 2008-2010.

BEHAVIORAL RISK FACTORS for Lung Cancer, by Sex Pennsylvania Adults, 2015

Cigarette smoking is recognized, by far, as the most important risk factor in the development of lung cancer. For help quitting, call the Pennsylvania Free Quitline: 1-800-QUIT-NOW (1-800-784-8669).

**SMOKERS** - Results obtained from the 2015 statewide sample telephone survey, conducted by the Pennsylvania Department of Health's Behavioral Risk Factor Surveillance System (BRFSS), indicate that the age-adjusted percentage of Pennsylvania adults who were cigarette smokers was 18 percent. Among them, 20 percent of men and 17 percent of women were smokers. The national Healthy People 2020 objective is to decrease the percentage of adult smokers to 12 percent. As of 2015, Pennsylvania's figures were well above that goal.

**SMOKERS WHO QUIT** - Results from the 2015 BRFSS survey showed that 53 percent (age-adjusted) of adult smokers in Pennsylvania had quit smoking for one day or longer within the past year. The age-adjusted percentage of male and female residents who quit smoking for at least one day in the past year was 49 and 56 percent, respectively. The U.S. Public Health Service adopted a national Healthy People 2020 objective to increase the proportion of people aged 18 and older who have quit smoking for one day or longer during the preceding year to 80 percent. Pennsylvania's percentages from the 2015 BRFSS data were well below the national goal.

NOTES: This pamphlet was produced by the Division of Health Informatics, Pennsylvania Department of Health. The division can be contacted by email (ra-dhcontactus@pa.gov) or phone (717-782-2448). For additional cancer statistics, go to www.statistics.health.pa.gov. The department is an equal opportunity provider of grants, contracts, services and employment. Call the department toll free at 1-877-PA-HEALTH. All the age-adjusted rates that appear here were calculated by the direct method using the 2000 United States standard million population. United States incidence rates are based on data collected by the SEER (Surveillance, Epidemiology, and End Results) program of the National Cancer Institute from nine cancer registries throughout the country that are considered to be reasonably representative subsets of the United States population.