



Leukemia

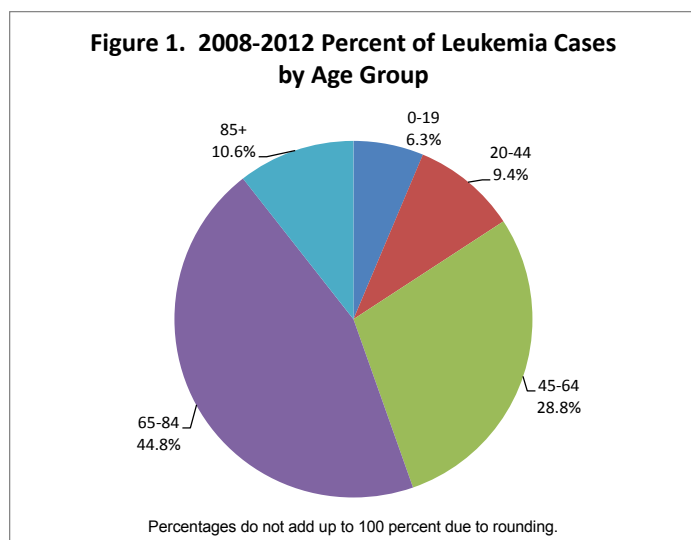
A Fact Sheet from the North Carolina Central Cancer Registry, State Center for Health Statistics

December 2015

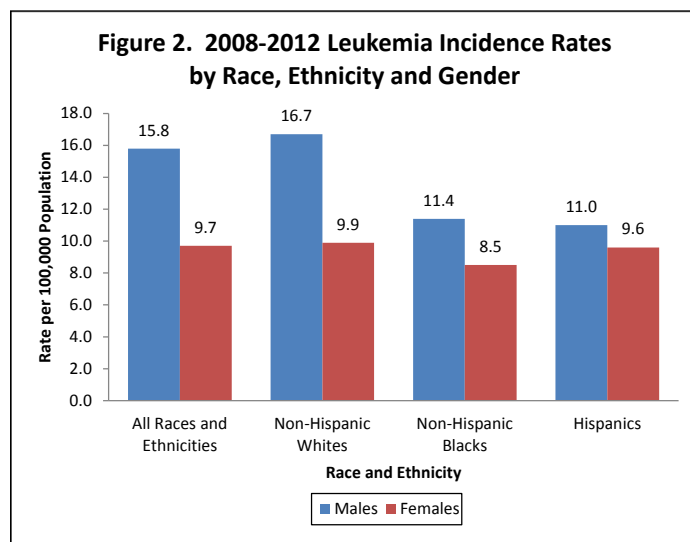
Leukemia was the 12th most frequently occurring and the sixth leading cause of cancer death in North Carolina from 2008 to 2012. It is anticipated that 1,400 people (797 males and 603 females) in North Carolina will be diagnosed with and 759 people (435 males and 324 females) will die of leukemia in 2015.

Incidence

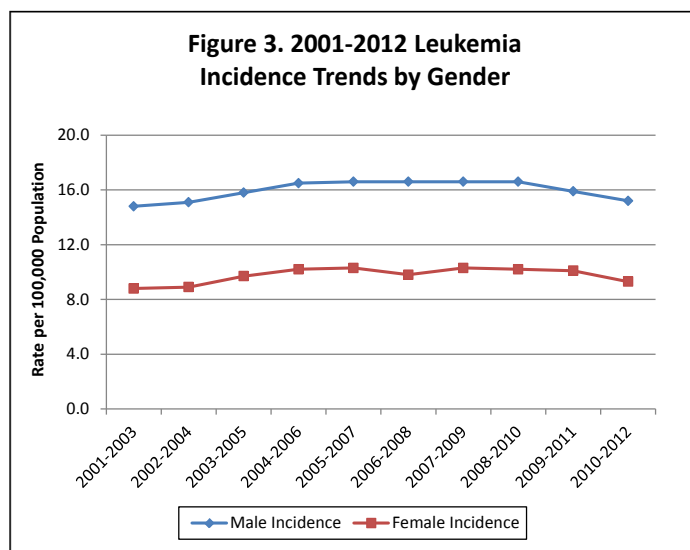
The percentage of cases of leukemia from 2008 to 2012 is displayed by age group in Figure 1. More than half of leukemia cases were diagnosed in people age 65 or older.



Between 2008 and 2012, the age-adjusted incidence rate for leukemia in North Carolina was 12.3 per 100,000 persons per year. Men are more likely to be diagnosed with leukemia than women (Figure 2).

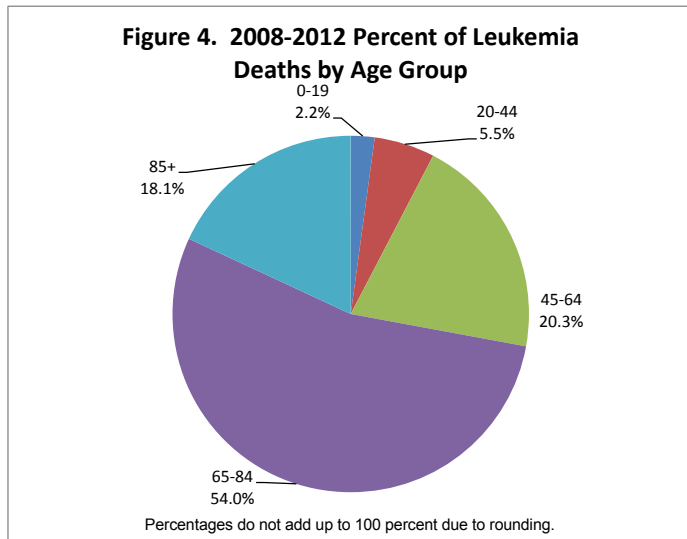


From 2001 to 2012, leukemia incidence rates have remained stable for men and women (Figure 3).

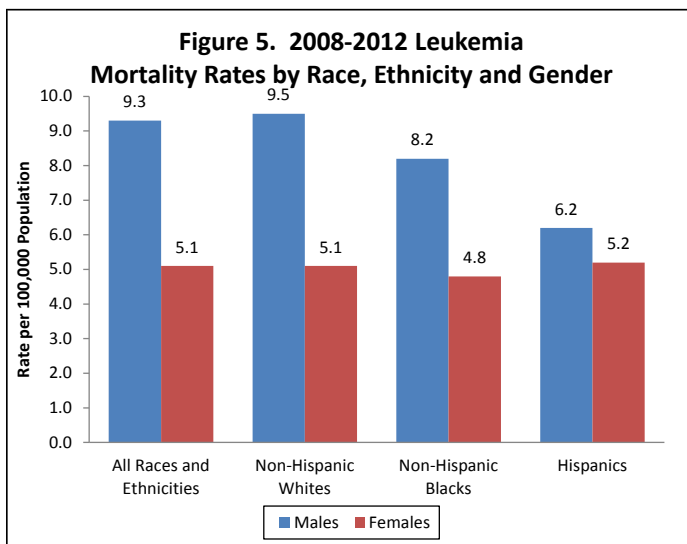


Mortality

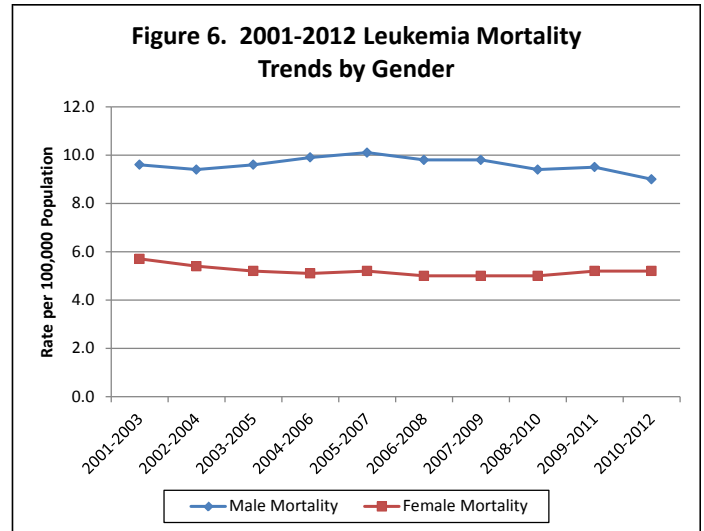
Between 2008 and 2012, the percentage of leukemia deaths is displayed by age group in Figure 4. More than 50 percent of deaths occurred in people ages 65 to 84.



The age-adjusted mortality rate of leukemia in North Carolina from 2008 to 2012 was 6.8 per 100,000 persons per year (Figure 5). Men are more likely to die from leukemia than women.



From 2001 to 2012, leukemia mortality rates have decreased slightly for men and have remained fairly stable for women (Figure 6).



Data Sources and Methods

Data on North Carolina cases were obtained from the North Carolina Central Cancer Registry (CCR). Hospitals are the primary source of data. The CCR supplements hospital data with reports from physicians who diagnose cases in a non-hospital setting. The CCR also collects data from pathology laboratories and freestanding treatment centers. Data on cancer deaths were obtained from Statistical Services in the State Center for Health Statistics. Population data from the National Center for Health Statistics were used in the denominators of the rates, which are expressed per 100,000 persons. Rates were age-adjusted using the 2000 United States Census data. To examine trends, three-year overlapping rates were used to improve stability over time. Stage at diagnosis was defined according to Surveillance, Epidemiology, and End Results Summary Stage guidelines as *in situ*, localized, regional, distant and unknown/NA. For further information about the North Carolina CCR, please visit www.schs.state.nc.us/units/ccr.