

# Three Decades of Progress in Cancer Control

Did you know that just a little over thirty years ago Maryland had the highest cancer death rate of all 50 U.S. states? In 1985, after adjusting for differences in age distributions among the states, only the District of Columbia had a higher cancer death rate than Maryland.

This frightening statistic provoked a dedicated response from stakeholders throughout the state. And after three decades of concerted work, Maryland's now ranks 31<sup>st</sup> among the 50 states and the District of Columbia—an impressive 30-state improvement. Overall cancer death rates have declined 1.9% annually from 1990 to 2015, avoiding nearly 60,000 deaths over three decades.

How did Maryland make such a drastic improvement in just three decades? Many factors contributed to this achievement, a few of which are highlighted below.

## **Maryland Comprehensive Cancer Control Plan**

In 1991, health professionals, communities, organizations, and individuals came together and developed the first [Maryland Comprehensive Cancer Control Plan](#) to help reduce the cancer burden in Maryland. The Cancer Plan is released by the governor, overseen by the governor's State Council on Cancer Control, and implemented by the [Maryland Cancer Collaborative](#), a statewide coalition of volunteers and organizations. The most recent version, the 2016–2020 Cancer Plan continues as an important guide to cancer control in Maryland.

## **Maryland Cancer Registry**

Maryland also established its statewide cancer registry in 1991. State-licensed hospitals and treatment centers must report all new cancer cases to the registry, which has led to a robust dataset that helps guide public health interventions, including those in the Cancer Plan.

## **Screening, Diagnosis, and Treatment Programs**

Over the years, Maryland implemented a variety of screening, diagnosis, and treatment programs for uninsured and underinsured residents. Starting in 2001, the [Maryland Cigarette Restitution Fund](#) has funded local health departments' cancer prevention programs—providing millions of dollars annually for cancer screening across the state. Most local health departments have used the funding for colorectal screening of underinsured or uninsured residents.

The Maryland Department of Health also runs the [Breast and Cervical Cancer Screening Program](#) and the [Colorectal Cancer Control Program](#), which provide no-cost screening, diagnosis, and patient navigation services to eligible Maryland residents.

## **Tobacco Cessation**

Tobacco remains a major cause of cancer, and Maryland offers many tobacco cessation resources, including a free tobacco [Quitline \(1-800-QUIT-NOW\)](#) and the [Maryland Quitting Use and Initiation of Tobacco Resource Center](#). All local health departments provide tobacco cessation and control interventions. In addition, Maryland's Clean Indoor Air Act of 2007 prohibits smoking in nearly all indoor areas open to the public.

## **Health Disparities**

In addition to overall declines in cancer deaths, Maryland has seen reductions in cancer-related health disparities. Racial differences in cancer death rates are narrowing. Although cancer death rates for black residents are still higher than that of white residents, the rates are currently declining more rapidly for black residents such that 75% of the differences between the races has been eliminated. The cancer mortality rate in men continues to be substantially higher than that of women; however, the gap narrowed by more than 60% since the 1990s.

## **Looking Forward**

Maryland's 30-year cancer mortality declines have outpaced other states and are a tremendous accomplishment, but there is still more work to do. In particular, more effort is needed to prevent cancer.

One powerful cancer prevention strategy is the human papillomavirus (HPV) vaccine, which can prevent cervical cancers and other cancers caused by HPV. According to the National Cancer Institute, the vaccine has been shown to offer [nearly 100% protection](#) against HPV types 16 and 18—the strains responsible for greater than 70% of cervical cancers. Although Maryland is ahead of the nation for up-to-date HPV vaccination, there is still significant room for improvement in vaccine coverage among children and younger adults.

It is also important to continue strengthening Maryland's efforts to reduce tobacco use. While the percentage of current smokers in Maryland is lower than for the nation, smoking rates remain high in some regions of Maryland, such as Baltimore City and parts of the rural Eastern Shore. These regions also report higher cancer death rates than the rest of the state, illustrating a geographic health disparity.

## **Survivorship**

As the cancer death rate declines, we must also consider the needs of the increasing number of cancer survivors. Even survivors who remain cancer-free face challenges, including difficulty holding jobs, economic burdens from medical expenses and lost wages, and physical and mental health issues. The Maryland Cancer Collaborative has developed an [online guide](#) for cancer survivorship care that outlines issues that affect cancer survivors throughout their lives.

## **Final Thought**

Maryland has made noteworthy strides over the last three decades, but it seeks even greater improvements in cancer control. In 2021, Maryland will release an updated Cancer Plan with strategies to continue reducing the cancer burden throughout the state.