



The Burden of Cancer in Small Asian Populations in Wisconsin

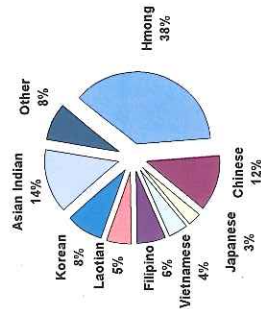
Mary Foote, M.S., Wisconsin Cancer Reporting System, Office of Health Informatics,
Division of Public Health, Department of Health Services.



Introduction

- Cancer statistics for Asian subgroups are not homogeneous but vary among the racial subgroups. Reporting completeness is also less than for white racial groups, so proportional descriptive data provide an initial summation of inter-group variations.
- Wisconsin has a small but diverse Asian population and, as the largest subgroup, Hmong comprise one-third of Wisconsin's Asian population.
- The Wisconsin Cancer Reporting System (WCRS) receives increasing requests for granular race data that address racial disparities and require: 1) aggregation of multiple small populations and 2) separation of subgroups to detect variations.

Wisconsin Asian Populations, 2010

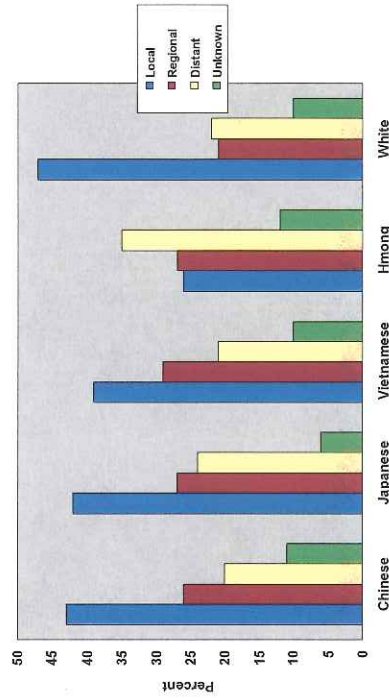


Methods

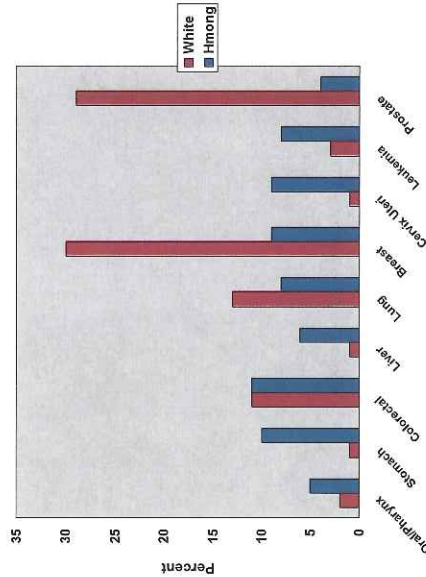
- **Phase 1: Surveyed facilities to learn about Hmong cancer-related patterns of care:** The mail survey collected data about Hmong treatment centers, the number of cancers diagnosed in Hmong, and how cases were reported to WCRS.
- **Phase 2: Improved race data collection:**
 - ✓ Provided webcast training for facilities serving Hmong cancer patients,
 - ✓ Sent letters and recommendations to facility administrators,
 - ✓ Designed pamphlet for Hmong patients about the importance of self identification.
- ✓ **Phase 3: Performed descriptive data analysis to support community programs targeting disparities in cancer incidence and treatment.**

Results

All Cancer Stage at Diagnosis, Asian Groups and Whites, 1995-2008



Distribution of Major Cancer Sites, Hmong and White, 1995-2008



- The Hmong community had low proportions of lung, breast, and prostate cancers, but higher proportions of oral/pharynx, stomach and liver cancers.
- Hmong cancers are generally diagnosed at later stages than white cancers. Between 1995 and 2008, only 25% of cancers diagnosed in Wisconsin's Hmong were diagnosed at the early local stage, compared to 47% for whites.
- Hmong patients are also diagnosed at younger ages; 34% of Hmong cancer patients were under age 40 compared to 5% of white cancer patients.
- Similar patterns of site-specific incidence were reported by California and Minnesota cancer registries.
- Note: Cases were either reported as Hmong or identified as Hmong by the NAACCR Asian Pacific Islander Identification Algorithm that reclassified "Asian, Not Otherwise Specified" to more detailed categories based on Hmong surname and place of birth.

➤ **Program Implications: Increased access to Western medicine, including hepatitis B immunization, antibiotics for bacterial infections and Pap screening, would modify risk factors; current incidence of Hmong cancers could decrease within a generation.**