

**State of Illinois**

Rod R. Blagojevich, Governor

**Department of Public Health**

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# Prostate and Testicular Cancer Program Report to the Illinois General Assembly

2008

**Report to the General Assembly**

Public Act 90-599 – Prostate and Testicular Cancer Program  
Public Act 91-0109 – Prostate Cancer Screening Program

**State of Illinois**  
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**Illinois Department of Public Health**

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## **I. Background**

The primary goal of the Illinois Prostate and Testicular Cancer Program is to improve the lives of men across their life-span by initiating, facilitating and coordinating programs throughout the state.

On June 25, 1998, Public Act 90-599 established the Illinois Prostate and Testicular Cancer Program, and required the Illinois Department of Public Health (IDPH), subject to appropriation or other available funding, to promote awareness and early detection of prostate and testicular cancer.

On July 13, 1999, Public Act 91-0109 required IDPH to establish a Prostate Cancer Screening Program and to adopt rules to implement the program. In addition, IDPH received an appropriation of \$300,000 “for all expenses associated with the Prostate Cancer Awareness and Screening Program.”

## **II. Executive Summary**

This report summarizes the progress of the Illinois Prostate and Testicular Cancer Program for fiscal year 2008 (July 1, 2007 through June 30, 2008). The program has brought together public and private agencies to focus attention on raising men’s health awareness and participation in attending to their own health needs.

In fiscal year 2008, Illinois Prostate and Testicular Cancer Program grants were awarded to 15 agencies and more than 4,000 males were screened for prostate cancer and almost 1,500 were screened for testicular cancer (Table 3).

Public awareness events and activities must go hand-in-hand with screening efforts. Toward that goal, the program has either sponsored, co-sponsored or participated in two major public events since July 1, 2007 (Table 4), reaching out to thousands of men, their family members and friends to promote the awareness and early detection of prostate and testicular cancer. Through these awareness events and screening opportunities, IDPH strives to empower men to seek an earlier diagnosis and learn the pros and cons of their treatment options. Only then can substantive and demonstrable progress be made toward reducing the incidence and mortality of prostate and testicular cancer.

## **III. The Problem**

Prostate cancer is the most common type of cancer diagnosed in American men, except for skin cancer. In 2008, there will be approximately 7,970 new cases of prostate cancer in Illinois and an estimated 1,350 men in the state will die of this disease (IDPH, Illinois State Cancer Registry, November 2007). In Illinois, prostate cancer is the second leading cause of cancer death in men, exceeded only by lung cancer. Black men develop prostate cancer at a higher rate and are more than twice as likely to die of prostate cancer than men of other racial and ethnic groups.

For Illinois males, prostate cancer was the most frequently diagnosed invasive cancer, accounting for more than 27 percent of 512,801 new cancer diagnoses during 1986-2004 (IDPH, Illinois Cancer Statistics Review 1986-2004, April 2007). Black males had the highest prostate cancer incidence rates among all race groups, approximately 48 percent higher than those

observed for white males and nearly three times those observed for males of Asian/other races in Illinois.

Table 1 illustrates the top 10 cancer incidence rates for males in Illinois for 2004, the most recent year for which data is available. During this time, prostate cancer was the most diagnosed cancer among Illinois males. When compared by race, prostate cancer was highly prevalent among black males (193.3 per 100,000) and less prevalent among Asians (75.0 per 100,000).

**Table 1: Top 10 Cancer Incidence Rates in Illinois (per 100,000) Males by Race, 2005**

White	Incidence Rates	Black	Incidence Rates	Asian and Other	Incidence Rates	Hispanic	Incidence Rates
Prostate	128.5	Prostate	193.3	Prostate	75.0	Prostate	107.1
Lung and Bronchus	85.5	Lung and Bronchus	110.7	Lung and Bronchus	47.6	Colorectal	41.0
Colorectal	61.5	Colorectal	72.3	Colorectal	42.7	Lung and Bronchus	40.1
Bladder	42.2	Kidney	22.2	Non-Hodgkin Lymphoma	19.7	Bladder	18.5
Non-Hodgkin Lymphoma	23.8	Pancreas	19.4	Bladder	17.4	Kidney	17.9
Kidney	20.9	Stomach	19.2	Stomach	14.1	Non-Hodgkin Lymphoma	17.5
Melanoma	20.4	Oral	17.5	Kidney	12.6	Stomach	14.8
Leukemias	16.5	Bladder	16.1	Liver	10.8	Liver	13.1
Oral	15.0	Non-Hodgkin Lymphoma	15.2	Oral	10.5	Esophagus	9.3
Pancreas	13.2	Leukemias	13.0	Leukemias	9.0	Leukemias	9.0

(Source: Illinois Cancer Statistics Review 1986 – 2005, November 2007)

Table 2 illustrates the top 10 cancer mortality rates for males in Illinois for 2005, the most recent year for which data is available. Prostate cancer is the second leading cause of death for black and Hispanic men and the rate for black males is more than twice that of white males (60.5 compared to 22.8 per 100,000).

**Table 2: Top Ten Cancer Mortality Rates in Illinois (per 100,000) Males by Race, 2005**

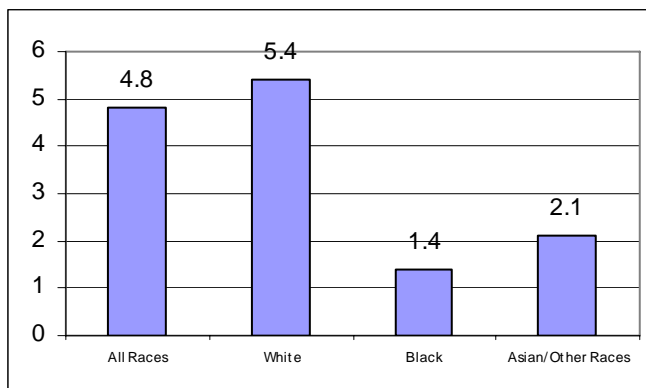
<b>White</b>	<b>Mortality Rates</b>	<b>Black</b>	<b>Mortality Rates</b>	<b>Asian and Other</b>	<b>Mortality Rates</b>	<b>Hispanic</b>	<b>Mortality Rates</b>
<b>Lung and Bronchus</b>	<b>67.5</b>	<b>Lung and Bronchus</b>	<b>93.5</b>	<b>Lung and Bronchus</b>	<b>29.1</b>	<b>Lung and Bronchus</b>	<b>24.2</b>
Prostate	23.5	Prostate	58.9	Colorectal	10.5	Prostate	15.2
Colorectal	21.8	Colorectal	35.0	Prostate	8.4	Liver	9.9
Pancreas	12.6	Pancreas	19.5	Liver	8.3	Stomach	8.4
Leukemias	10.8	Stomach	11.0	Pancreas	8.3	Colorectal	7.3
Non-Hodgkin Lymphoma	10.2	Liver	10.6	Stomach	6.8	Kidney	6.4
Esophagus	8.9	Esophagus	9.7	Non-Hodgkin Lymphoma	6.5	Non-Hodgkin Lymphoma	6.1
Bladder	7.9	Leukemia	8.6	Leukemias	6.4	Pancreas	6.0
Liver	7.4	Multiple Myeloma	7.6	Oral	3.0	Leukemias	5.2
Kidney	6.9	Kidney	7.5	Kidney	2.9	Esophagus	5.0

(Source: Illinois Cancer Statistics Review 1986 – 2005, November 2007)

Testicular cancer accounts for only 1 percent of all cancers in men in the United States - 8,000 diagnosed cases and about 370 deaths each year. In 2008, there will be approximately 320 new cases of testicular cancer in Illinois and an estimated 20 males in Illinois will die of this disease (IDPH, Illinois State Cancer Registry, November 2007).

Testicular cancer occurs most often in men between age 20 to 39, and is the most common form of cancer in men age 15 to 34. Testicular cancer is more common among white males (5.4 per 100,000), especially those of Scandinavian descent. The testicular cancer rate has more than doubled among white men in the past 40 years, but has only recently begun to increase among black males. Figure 1 illustrates testicular cancer incidence rates for Illinois during the period of 1986 – 2005.

**Figure 1: Testicular Cancer Incidence Rates (per 100,000), Males by Race, 1986-2005**



(Source: Illinois Cancer Statistics Review 1986 – 2005, November 2007)

#### **IV. Illinois Prostate and Testicular Cancer Program Components**

- Promoting awareness and educating Illinois citizens about the incidence, mortality, risk factors, benefits of early detection, and treatment options for prostate and testicular cancer.
- Establishing and promoting screening programs and ensuring referrals for appropriate follow-up services.

Currently, the program focuses on prostate cancer in uninsured and under insured men 50 years of age or older and uninsured and under insured men between 40 and 50 years of age at high risk for prostate cancer. The high risk population focus includes all black males older than 40 years of age and males older than age 40 who have a family history of prostate disease. The at-risk population for testicular cancer is much younger and the program targets males, ages 14 to 35, but does not exclude others because of age.

The program has accomplished its goals through the following:

- Awarding grants to local health departments and community-based organizations to provide screenings, education and awareness of prostate cancer and testicular cancer through public screenings in targeted communities;
- partnering with agencies and organizations to sponsor public events promoting awareness of prostate and testicular cancer issues, as well as general male health issues; and
- providing a general resource center for the public.

#### **V. Screening, Education and Awareness Grants**

Beginning in fiscal year 2000, the IDPH Office of Health Promotion provided Illinois Prostate and Testicular Cancer Program pilot grants to eight community organizations and local health departments. The Illinois Project for Local Assessment of Needs (IPLAN) and Illinois State Cancer Registry (ISCR) data were used to identify specific geographic areas at high risk for prostate cancer. The funds were released in May 2000, to support the development of partnerships with local health departments, state and local agencies, and other health-related and professional groups. These pilot grants provided the financial support to begin building a local

infrastructure to conduct prostate and testicular cancer education and screening services for men. The funding was viewed as a first step in the development of partnerships among all the stakeholders, where these agencies and their partners will eventually become self-sustaining to address local priorities.

During fiscal year 2008, funding was provided to 15 grantees and a total of 4,055 PSA screenings and 774 DRE screenings were provided. There were 302 men referred for further diagnostic testing. The following table (Table 3) illustrates the program screenings for Fiscal Year 2008 by location, insurance status, ethnic/race and grant award amount.



**Table 3: Prostate and Testicular Cancer Awareness, Education and Screening Program Results, Fiscal Year 2008**

FY 2008 Grantees	Geographic Location	PSA Screening/ Referred	DRE Screening	Testicular Screening/ Referred	Individuals Receiving Awareness	Insured/ Uninsured/ Underinsured	Hispanic	Non Hispanic	White	Black	Asian/ Other	Grant Award
Cass County Health Department	Virginia	157/10	18	0	1,570	74/13/70	10	147	154	3	0	\$11,000
Champaign-Urbana Public Health District	Urbana	178/5	0	0	200	42/126/10	2	176	50	121	7	20,000
Crawford County Health Department	Robinson	108/12	105	105/1	1,080	0/36/73	0	109	109	0	0	10,000
East Side Health District	East St. Louis	360/15	2	839/0	368	195/68/943	1	1,158	242	955	5	32,500
City of Evanston Department of Health and Human Services	Evanston	152/3	0	0	650	80/72/0	2	150	54	90	8	10,000
Fulton County Health Department	Canton	69/9	4	0	1,032	0/58/11	0	69	69	0	0	12,000
Jackson County Health Department	Murphysboro	524/46	132	7/5	525	276/66/249	2	523	466	42	7	27,000
Lawrence County Health Department	Lawrenceville	46/4	46	46/0	460	5/3/38	1	45	44	1	0	4,300
Macon County Health Department	Decatur	352/22	285	358/6	6,198	155/289/148	5	588	257	260	76	23,000
Macoupin County Public Health Department	Carlinville	82/9	77	0	820	15/2/65	0	82	82	0	0	7,000
Madison County Health Department	Wood River	245/50	91	135/12	1,828	151/44/91	3	283	265	17	4	27,000
Mercer County Health Department	Aledo	247/3	14	3/0	272	183/38/97	3	315	316	2	0	24,200
Research and Education Foundation of the Michael Reese Medical Staff	Chicago	687/47	0	0	1,427	281/237/159	117	513	25	436	216	30,000
White Crane Wellness Center	Chicago	400/42	0	0	1,713	258/332/1,123	207	1,506	379	495	839	30,000
Winnebago County Health Department	Rockford	448/25	0	0	4,480	281/157/147	33	551	428	143	14	23,000
<b>Total</b>		<b>4,055/302</b>	<b>774</b>	<b>1,493/24</b>	<b>22,623</b>	<b>1,996/1,541/3,224</b>	<b>383</b>	<b>6,215</b>	<b>2,940</b>	<b>2,565</b>	<b>1,176</b>	<b>\$290,000</b>

## VI. Public Awareness Efforts

IDPH believes all men should have the facts about their health. In 2008, it is projected that more than 7,970 men will be diagnosed with prostate cancer (IDPH, Illinois State Cancer Registry, November 2007). Many men are unaware of the fact they have a prostate, let alone where it is located, what role it performs, what health problems it may develop and what symptoms may be involved. They often are unprepared for the health risks associated with the prostate.

Public awareness events and screening activities must be done in concert. Toward that goal, the Illinois Prostate and Testicular Cancer Program has either sponsored or co-sponsored public events, reaching out to thousands of men, their family members and friends to promote the awareness and early detection of prostate and testicular cancer. Table 4 illustrates the IDPH-sponsored and local community agency education and awareness events for fiscal year 2008.

**Table 4: Prostate and Testicular Cancer Program Awareness Event Participation  
Fiscal Year 2008**

<b>Program Event</b>	<b>Location</b>	<b>Date</b>	<b>Estimated Participants</b>	<b>Estimated Promotional Materials Distributed</b>
Southern Illinois Hunting and Fishing Days	Carterville	9/2007	24,000	1,500
African-African American Men's Health and Fitness Experience	Chicago	6/2008	1,500	1,000
<b>TOTAL</b>			<b>25,500</b>	<b>2,500</b>

## VII. Future Challenges and Opportunities

The Illinois Prostate and Testicular Cancer Program will continue to provide screenings to help diagnose cancer as early as possible and, at the same time, provide awareness programs to encourage males to practice sound personal health activities for a healthier life. These efforts will help reduce incidence, morbidity and mortality from prostate and testicular cancer. In support of the program, IDPH is working through local community agencies to develop ways for anyone diagnosed with prostate and testicular cancer to seek out and receive health care through local, statewide and national organizations and resources. This is vital to the mission of the program and the health of the people being served.

Additionally, in 2006 the Illinois Comprehensive Cancer Control Program published a statewide comprehensive state plan that addresses prevention, early detection, rehabilitation, supportive care, access to care, tobacco control and data surveillance priorities. Over the next three years, strategies addressing these priorities will be implemented through the Illinois Partnership for Cancer Prevention and Control. Illinois Prostate and Testicular Cancer Program activities will be integrated into these statewide activities.

Awareness, education and advocacy are key components to reduce prostate and testicular cancer incidence and mortality. By partnering with other state agencies, such as the Illinois Department on Aging and the Illinois Department of Human Services; and national, regional and local organizations, such as US TOO!, the American Cancer Society, National Cancer Institute,

Illinois Fatherhood Initiative, Men's Health Network and the University of Illinois; IDPH will strive to develop the Illinois Prostate and Testicular Cancer Program into a statewide program. The program has the potential to reduce the incidence, mortality and suffering from late-stage diagnosis of prostate cancer through screenings, diagnostic services, follow-up, education, treatment and advocacy services.

Early detection is the best defense. Prostate and testicular cancers can be detected in their early stages through screenings provided by a health care professional. The Illinois Prostate and Testicular Cancer Program will continue its efforts to increase public awareness and screening activities.