

State of Illinois
Pat Quinn, Governor

Department of Public Health
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Prostate and Testicular Cancer Program

Report to the Illinois General Assembly

July 2009

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

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Illinois Department of Public Health

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Report Period - Fiscal Year 2009

July 2009

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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 prostate and testicular cancer awareness and screening 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 (Department), 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 the Department to establish a Prostate Cancer Screening Program and to adopt rules to implement the program. In addition, the Department received an appropriation of \$300,000 “for all expenses associated with the Prostate Cancer Awareness and Screening Program.” The fiscal year 2009 appropriation was \$297,000.

II. Executive Summary

This report summarizes the progress of the Illinois Prostate and Testicular Cancer Program for fiscal year 2009 (July 1, 2008 through June 30, 2009). The program has brought together public and private agencies to focus attention on raising men’s awareness and participation in attending to their own health needs addressing prostate and testicular cancer.

In fiscal year 2009, Illinois Prostate and Testicular Cancer Program grants were awarded to 14 agencies and more than 4,500 males were screened for prostate cancer and almost 2,100 were screened for testicular cancer (Table 3).

The Department has either sponsored, co-sponsored or participated in six major public events since July 1, 2008 (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 related screening opportunities an additional 570 men were screened for prostate cancer. These events strive to empower men to seek screening to increase earlier diagnosis and learn the pros and cons of their treatment options. It is through early detection that prostate and testicular cancer mortality be reduced.

III. The Problem

Except for skin cancer, prostate cancer is the most common type of cancer diagnosed in American men. In 2009, there will be approximately 8,080 new cases of prostate cancer in Illinois and an estimated 1,380 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 26.7 percent of 545,349 new cancer diagnoses during 1986-2005 (IDPH, Illinois Cancer Statistics Review 1986-2005, June 2008). Black males had the highest prostate cancer

incidence rates among all race groups, approximately 65 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 2006, the most recent year for which complete data is available. During this time, prostate cancer was the most diagnosed cancer among Illinois males. When compared by race, prostate cancer was most prevalent among black males (235.2 per 100,000) and least prevalent among Asians (91.8 per 100,000).

Table 1: Top 10 Cancer Incidence Rates in Illinois (per 100,000) Males by Race, 2006

White	Incidence Rates	Black	Incidence Rates	Asian and Other	Incidence Rates	Hispanic	Incidence Rates
Prostate	142.3	Prostate	235.2	Prostate	91.8	Prostate	111.9
Lung and Bronchus	86.7	Lung and Bronchus	115.0	Lung and Bronchus	51.7	Lung and Bronchus	40.0
Colorectal	61.1	Colorectal	79.4	Colorectal	43.9	Colorectal	39.6
Bladder	39.6	Kidney	23.0	Oral	20.3	Kidney	16.9
Non-Hodgkin Lymphoma	24.7	Bladder	20.4	Bladder	19.1	Non-Hodgkin Lymphoma	16.2
Kidney	23.0	Pancreas	19.4	Kidney	12.8	Leukemia	15.8
Melanoma	20.8	Stomach	17.1	Non-Hodgkin Lymphoma	13.2	Pancreas	15.0
Leukemia	17.3	Oral	16.3	Stomach	13.2	Bladder	14.5
Oral	15.0	Myeloma	15.2	Liver	11.6	Stomach	11.8
Pancreas	13.5	Non-Hodgkin Lymphoma	14.4	Pancreas	11.6	Liver	11.5

(Source: Illinois Department of Public Health, Illinois State Cancer Registry, November 2008)

Table 2 illustrates the top 10 cancer mortality rates for males in Illinois for 2006, the most recent year for which complete data is available. Prostate cancer is the second leading cause of death for black and white men and the rate for black males is more than twice that of white males (60.1 compared to 22.1 per 100,000).

Table 2: Top Ten Cancer Mortality Rates in Illinois (per 100,000) Males by Race, 2006

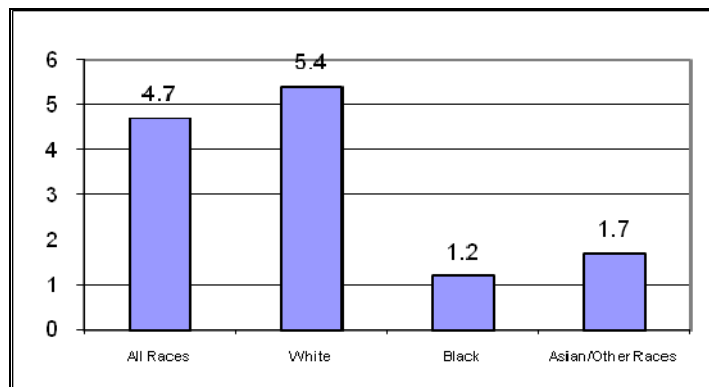
White	Mortality Rates	Black	Mortality Rates	Asian and Other	Mortality Rates	Hispanic	Mortality Rates
Lung and Bronchus	67.4	Lung and Bronchus	92.0	Lung and Bronchus	43.6	Lung and Bronchus	21.7
Prostate	22.1	Prostate	60.1	Colorectal	14.6	Liver	12.1
Colorectal	22.0	Colorectal	34.2	Prostate	4.4	Prostate	11.9
Pancreas	12.4	Pancreas	19.3	Liver	8.9	Colorectal	8.8
Leukemia	10.4	Stomach	10.0	Pancreas	5.9	Pancreas	8.7
Non-Hodgkin Lymphoma	9.7	Liver	9.6	Stomach	5.5	Non-Hodgkin Lymphoma	5.6
Bladder	8.2	Esophagus	8.8	Non-Hodgkin Lymphoma	3.6	Leukemia	5.3
Esophagus	8.0	Leukemia	8.2	Esophagus	3.5	Stomach	4.6
Liver	7.1	Multiple Myeloma	7.8	Oral	2.6	Kidney	4.0
Kidney	6.2	Kidney	6.5	Kidney	1.1	Esophagus	3.8

(Source: Illinois Department of Public Health, Illinois State Cancer Registry, November 2008)

Testicular cancer accounts for only 4 percent of total cancers diagnosed in the United States - 8,000 diagnosed cases and about 370 deaths each year. In 2009, 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 ages 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 incidence 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 raise awareness, provide education and offer screenings for prostate and testicular cancer to at risk 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 Department's 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 2009, funding was provided to 14 grantees and a total of 4,580 prostate-specific antigen (PSA) screenings and 956 digital rectal exams (DRE) screenings were provided to men seeking the early detection of prostate cancer. As a result of these screenings, there were 298 men referred for further diagnostic testing. In addition, 2,088 men were screened for testicular cancer and 19 men were referred for further diagnostic testing. The following table (Table 3) illustrates the program screenings for fiscal year 2009 by location, insurance status, race/ethnicity and grant award amount.

Table 3: Prostate and Testicular Cancer Awareness, Education and Screening Program Results, Fiscal Year 2009

FY 2009 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	151/4	0	0	295	48/37/66	40	111	99	14	38	\$9,000
Champaign-Urbana Public Health District	Urbana	194/8	0	0	332	40/154/0	4	190	90	100	4	18,000
Crawford County Health Department	Robinson	94/7	84	83/1	140	46/32/16	0	94	94	0	0	9,000
East Side Health District	East St. Louis	286/29	8	1104/0	1,200	168/45/1,183	2	1,394	114	1,176	106	30,000
City of Evanston Department of Health and Human Services	Evanston	105/3	0	0	600	60/45/0	3	102	49	45	11	10,000
Fulton County Health Department	Canton	149/18	11	3/0	878	17/111/24	2	147	148	0	1	11,000
Jackson County Health Department	Murphysboro	406/41	131	7/3	406	336/65/38	3	404	362	36	9	27,000
Macon County Health Department	Decatur	876/46	567	541/12	8,430	651/390/201	10	1,227	595	427	215	23,000
Macoupin County Public Health Department	Carlinville	154/21	84	0	1,200	87/23/44	0	154	154	0	0	7,000
Madison County Health Department	Wood River	235/33	61	187/3	798	75/49/272	5	391	320	60	16	27,000
Mercer County Health Department	Aledo	275/10	10	0	8,900	236/14/25	16	259	255	3	17	23,000
Research and Education Foundation of the Michael Reese Medical Staff	Chicago	822/39	0	0	1,044	281/178/120	79	500	74	430	75	30,000
White Crane Wellness Center	Chicago	400/32	0	0	1,392	60/36/304	91	483	196	140	238	30,000
Winnebago County Health Department	Rockford	433/7	0	163/0	1,225	270/179/147	24	572	415	170	11	23,000
Total		4,580/298	956	2,088/19	26,840	2,275/1,348/2,440	279	6,028	2,965	2,601	741	\$277,000

VI. Public Awareness Efforts

The Department believes all men should have the facts about their health. In 2009, it is projected that more than 8,080 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 are related to it and what symptoms may be involved. They often are unprepared for the health risks associated with the prostate. Many men also are unaware of screening options for early detection of prostate and testicular cancer.

Public awareness events and screening activities should be done in concert. Toward that goal, the Illinois Prostate and Testicular Cancer Program has either sponsored, co-sponsored or participated in 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. During fiscal year 2009, in recognition of National Prostate Cancer Awareness Month, the program initiated free PSA blood screenings for prostate cancer through partnerships with the Perry County Health Department at the DuQuoin State Fair in August, the Franklin-Williamson Bi-County Health Department at the Southern Illinois National Hunting and Fishing Days in Carterville during September, and the Chicago Department of Public Health Department at the Greater Chicago Prostate Cancer Run, Walk n’ Roll event in Chicago.

In addition, the program partnered with Northwestern Hospital and Ed Randall’s Bat for the Cure to provide free prostate cancer screenings with the Chicago Bulls and White Sox teams at their respective stadiums. The events were open to the public so men who are not attending the games could get screened. The Department provided several Wellness on Wheels vehicles that were parked near the entrances to the United Center and U.S. Cellular Field on their respective game days. Each vehicle was staffed by Northwestern doctors, nurses, residents and volunteers and Department program staff coordinated the events. These events were very successful and it is hoped that this effort can be expanded to include other major national and minor league sporting events in Illinois.

This additional effort by program staff led to an additional 575 men screened for prostate cancer. Table 4 illustrates the Departments partnership efforts with local health departments and organizations for education, awareness and screening events during fiscal year 2009.

**Table 4: Prostate and Testicular Cancer Program Awareness Event Participation
Fiscal Year 2009**

Program Event	Location	Date	Estimated Participants	Estimated Promotional Materials Distributed	Prostate Cancer Screenings Provided
DuQuoin State Fair	DuQuoin	8/2008	10,000	1,500	48
Southern Illinois Hunting and Fishing Days	Carterville	9/2008	24,000	1,500	140
Greater Chicago Prostate Cancer Run,	Chicago	10/2008	3,000	1,000	93

Walk n' Roll					
African-African American Men's Health and Fitness Experience	Chicago	6/2009	1,000	1,000	NA
Chicago Bulls	Chicago	4/2009	21,000	500	203
Chicago White Sox	Chicago	6/2009	35,000	300	91
TOTAL			94,000	5,800	575

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, the Department 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.

In keeping with the recommendations and strategies of the *Illinois Comprehensive Cancer Control State Plan 2005-2010* to increase the percentage of high-risk men older than age 45 undergoing prostate cancer screenings by digital rectal exams and PSA blood tests, the Illinois Partnership for Cancer Prevention and Control will continue to encourage health care providers to promote annual physical exams and routine screenings. The challenge continues to be reaching those high risk and disparate populations (high risk defined as black men or men with one or more first-degree relatives diagnosed with prostate cancer at an early age), including uninsured and underinsured men 50 years of age or older, many without a primary physician. Annual physicals and screenings are not routine for this population. The Illinois Prostate and Testicular Cancer Program provides an opportunity for information to be disseminated and screening programs to reach the high-risk and disparate populations.

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, Ed Randall's Bat for the Cure, Northwestern and the University of Illinois; the Department 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.