

Summary

Incidence, 2018-2022

1. Number of new cancer cases: New diagnoses of invasive cancer averaged 27,260 cases per year among Louisiana residents ([Table A1](#)).
2. Most frequently diagnosed cancers: For all Louisianans combined, the most frequently diagnosed cancers were prostate (15.2% of all new cases), breast (13.9%), lung (13.0%), colorectal (8.8%), and kidney (4.8%) ([Table A2](#)).
3. Highest annual incidence rates per 100,000 people: The 5 most frequently diagnosed cancers in Louisiana are: (1) prostate (147.2), (2) female breast (131.5), (3) lung (60.9), (4) colorectal (44.3), and (5) kidney/renal pelvis (23.8). In the U.S., however, the following is the order of highest rates: female breast, prostate, lung, colorectal, and melanoma of the skin. The five most common invasive cancers by race/sex group in Louisiana were ([Table B](#)):
 - a. NH White men: prostate (129.9 cases per 100,000 people), lung (71.6), colorectal (49.3), bladder (37.5), and kidney/renal pelvis (34.4).
 - b. NH Black men: prostate (209.6), lung (89.6), colorectal (61.9), kidney (31.8), and liver/bile duct (21.7).
 - c. NH White women: breast (133.1), lung (55.9), colorectal (37.4), thyroid (21.9), and melanoma of the skin (21.2).
 - d. NH Black women: breast (138.4), lung (45.4), colorectal (43.8), uterus (24.7), and pancreas (16.4).
4. Louisiana vs. nationwide rates: The incidence rates for cancers of all sites combined among NH White and NH Black men as well as NH Black women in Louisiana were significantly higher than those for their national counterparts ($p < 0.05$). However, the rate for NH White women in the state did not differ significantly from the nationwide rate ([Table C1](#)).
5. 7-Parish Industrial Corridor: The 7-Parish Industrial Corridor includes Ascension, East Baton Rouge, Iberville, St. Charles, St. James, St. John the Baptist, and West Baton Rouge parishes. The incidence rates for all cancers combined in the 7-Parish Industrial Corridor for NH Black men, NH White men, NH White women, and NH Black women did not differ significantly from the Louisiana rates ([Table C1](#)).
6. 11-Parish Industrial Corridor: The 11-Parish Industrial Corridor includes Ascension, East Baton Rouge, Iberville, Jefferson, Orleans, Plaquemines, St. Bernard, St. Charles, St. James, St. John the Baptist, and West Baton Rouge parishes. The incidence rates for all cancers combined in the 11-Parish Industrial Corridor for NH Black men, NH White women, and NH black women were significantly lower than the statewide rate. The rate for NH White men did not differ significantly from the state rate ([Table C2](#)).
7. Hispanic Population: The incidence rates for cancers of all sites combined among Hispanic people in Louisiana are significantly lower than those of their national counterparts for men and women. Louisiana Hispanic people also have significantly lower incidence rates of oral cavity and pharynx, colorectal, liver/bile duct, pancreas, lung and bronchus, breast, uterine, ovarian, thyroid, and non-Hodgkin lymphoma cancer among women, and

significantly lower incidence rates of stomach, colorectal, liver/bile duct, pancreas, lung, prostate, testis, kidney, brain/other nervous system, non-Hodgkin lymphoma, and myeloma cancer among men ([Table D1](#)).

8. NH American Indians/Alaska Natives, Asians and Pacific Islanders (AI/AN and APIs): The incidence rates for cancers of all sites combined among NH AI/AN and APIs in Louisiana are significantly lower than those of their national counterparts for women and did not differ significantly for men. Louisiana NH AI/AN and APIs also have significantly lower incidence rates of breast, uterine, ovarian, and non-Hodgkin lymphoma cancer among women and a significantly higher incidence rate of liver/bile duct cancer among men ([Table D2](#)).
9. Cancer among children and adolescents: Louisiana's incidence rates for all sites combined among children and adolescents (aged 0–19) were lower than U.S. rates for both boys and girls, but only the rate for boys was significantly lower ([Figure 11](#)). The most common cancers among children and adolescents in Louisiana are central nervous system tumors ([Tables H1-H3](#)); this is also true for the U.S. However, if you exclude benign and borderline brain tumors, the most common cancer in Louisiana and the U.S. among children is leukemia.
10. Tobacco-Related Cancers: The incidence rates of tobacco-related cancers are significantly higher in Louisiana than in the U.S. for all race and sex groups ([Figure 8](#)).
11. Obesity-Related Cancers: Incidence rates for obesity-related cancers are significantly higher in Louisiana than in the U.S. for the four major race-sex groups, with the exception of incidence for white women, which is not significantly different from the national rate ([Figure 9](#)).
12. HPV-Related Cancers: Incidence rates for HPV-related cancers are significantly higher in Louisiana than in the U.S. for NH White men, NH White women, and NH Black women. The incidence rate for NH Black men is not significantly different from the national rate ([Figure 10](#)).

Cancer Deaths, 2018-2022

1. Total cancer deaths: An average of 9,300 deaths were attributed to cancer each year, 2018-2022 ([Table J1](#)). Only heart disease caused more deaths (an average of 11,949 per year in Louisiana) than cancer.
2. Leading causes of cancer death: For all Louisiana residents combined, cancer mortality was highest for cancer of the lung (25.2% of all cancer deaths), colorectum (9.0%), pancreas (7.5%), breast (7.2%), and liver/bile duct (5.6%) ([Table J2](#)).
3. Highest annual mortality rates: The highest rates for cancer death in Louisiana were ([Table K](#)):
 - a. NH White men: lung (52.9 per 100,000 person-years), colorectum (16.9), prostate (16.0), pancreas (13.4), and liver/bile duct (11.5).
 - b. NH Black men: lung (65.7), prostate (34.5), colorectal (25.0), liver/bile duct (17.7), and pancreas (17.1).
 - c. NH White women: lung (34.1), breast (20.0), colorectal (11.5), pancreas (10.4), and ovary (6.0).
 - d. NH Black women: lung (28.8), breast (28.1), colorectal (15.6), pancreas (13.1), and uterus (7.5).
4. Louisiana vs. nationwide rates: Statewide, each of the four major race/sex groups had a significantly higher death rate for all sites combined than its national counterpart. Lung and kidney mortality rates were significantly higher in Louisiana than in the U.S. for all four race-sex groups ([Table L1](#)).
5. 7-Parish Industrial Corridor: Death rates for all cancers combined were significantly lower than those for Louisiana among NH White men, NH White women, and NH Black women; NH Black men in the Industrial Corridor experienced about the same mortality rates as their counterparts statewide ([Table L1](#)).
6. 11-Parish Industrial Corridor: Death rates for all cancers combined were significantly lower than those for Louisiana among all race/sex groups in the 11-Parish Industrial Corridor ([Table L2](#)).
7. Cancer death among those aged 0-19: In Louisiana's 0–19 age-group, the mortality rates were about the same in Louisiana and the U.S. for both boys and girls. ([Figure 11](#)).
8. Tobacco-Related Cancers: The mortality rates of tobacco-related cancers are significantly higher in Louisiana than in the U.S. for all race and sex groups ([Figure 8](#)).
9. Obesity-Related Cancers: The mortality rates for obesity-related cancers are significantly higher in Louisiana than in the U.S. for the four major race-sex groups ([Figure 9](#)).
10. HPV-Related Cancers: The mortality rate for HPV-related cancers is significantly higher for NH Black men and women in Louisiana when compared to their national counterparts. The rates for NH White men and women did not differ significantly from the nationwide rates ([Figure 10](#)).

Note: All incidence and death rates in this volume are average annual rates per 100,000 population for the five-year period, except for incidence rates for those 0-19 years of age, which are presented as average annual rates per 1,000,000 population for the five-year period. They are age adjusted to the U.S. 2000 standard and should **not** be compared with rates that are adjusted to the 1970 population.