# COMMUNITY HEALTH NEEDS ASSESSMENT CANCER CARE 2015

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#### **Purpose**

The Community Health Needs Assessment, Cancer Care, 2015 is a companion document to the St. Luke's Community Health Needs Assessment.

The community health needs assessment for cancer care is performed to identify:

- The needs of the population served.
- The potential to improve cancer health disparities.
- Gaps in resources.
- Barriers to providing services.

The results of the assessment will serve as building blocks for cancer care program development, program implementation and program evaluation.



#### **About St. Luke's**

St. Luke's, a comprehensive regional health care system, offers a comprehensive continuum of care serving the 17-county region of northeastern Minnesota, northwestern Wisconsin and the Upper Peninsula of Michigan. The system includes St. Luke's Hospital in Duluth, Minnesota, Lake View Hospital and Clinic in Two Harbors, Minnesota, 11 primary and 27 specialty clinics, six urgent care locations and one retail express care clinic. Primary care clinics are located in Duluth, Hermantown, Hibbing, Two Harbors, Mountain Iron and Silver Bay, Minnesota, and Ashland and Superior, Wisconsin. In addition, Urgent Care and Q Care express medical services are available. St. Luke's is verified by the American College of Surgeons and the state of Minnesota Department of Health as a Level II trauma center.

In addition to family medicine, other specialties include cardiology, cardiac surgery, oncology, OB/GYN, plastic surgery, pulmonary medicine, allergy, neurosurgery, dermatology, endocrinology, gastroenterology, infectious disease, internal medicine, surgery, occupational health, orthopedics & sports medicine, pediatrics, physical medicine and rehab, rheumatology, psychiatry and urology. St. Luke's Home Care and Hospice Duluth provide services to patients within a 30-mile radius of St. Luke's hospital.

Also, in collaboration with the University of Minnesota Medical School, Duluth Campus, St. Luke's is involved with clinical research activities in the areas of cancer, lung and heart disease through the Whiteside Institute for Clinical Research.



For a full listing of hospitals, clinics and services see Appendix A.

#### **Mission**

The patient above all else.

#### **Vision**

To be the provider and partner of choice for the region.

#### **Values**

These values provide the foundation for our culture as we pursue our Mission and Vision:

- The patient comes first
- Quality is our expectation
- People make it happen
- Everyone is treated with respect



## **Background**

St. Luke's 2015 Community Health Needs Assessment – Cancer Care provides an overview of the impact of cancer in northeast Minnesota (Carton County, Lake Count, St. Louis County) and Douglas County in Wisconsin. Among the assessment's findings:

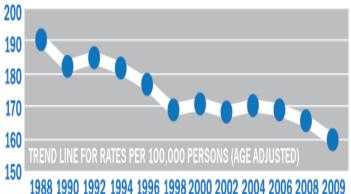
#### According to Minnesota Cancer Alliance, in Minnesota

- Five out of every 10 men in Minnesota are likely to be diagnosed with cancer in their lifetime.
- Four out of every 10 women in Minnesota are likely to be diagnosed with cancer in their lifetime.

# Rate of new cases is relatively stable

# 490 480 470 460 450 1988 1990 1992 1994 1996 1998 2000 2002 2004 2006 2008 2009

# Rate of cancer deaths is declining

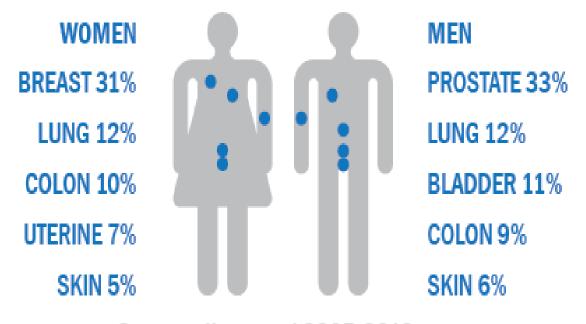


- Minnesotans living 5 years after being diagnosed with cancer 68%
- As of January 2012, the estimated number of MN cancer survivors was 266,510
- Estimated number of new cancer cases in Minnesota for 2014, excluding basal cell and squamous cell skin cancers and in situ carcinomas except urinary bladder was 29,340.
- According to Minnesota Department of Health, lung cancer is the leading cause of cancer deaths in MN



#### The top newly diagnosed cancers in Minnesota were (2005 - 2010):

# Most commonly diagnosed cancers

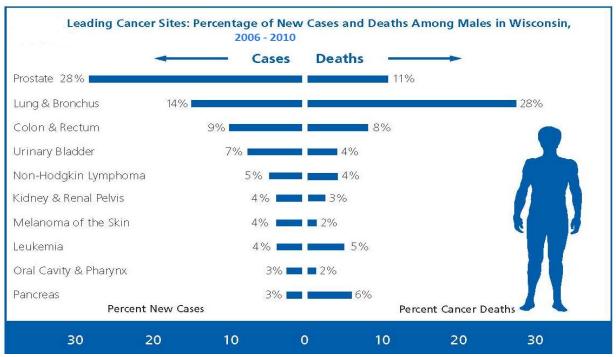


Cancers diagnosed 2005-2010

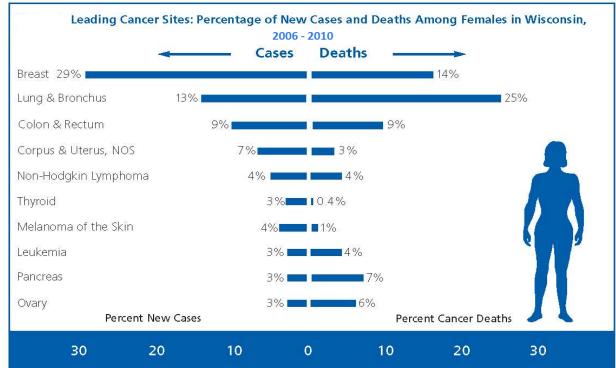
## According to the American Cancer Society, in Wisconsin

- Cancer is currently the leading cause of death in Wisconsin, with a 2010 mortality rate of 173.7.
- Lung cancer remains the leading cause of cancer deaths among both males and females in Wisconsin, with a yearly (2006-2010) average of 1,591 men and 1,316 women dying from the disease.





Data taken from Wisconsin Cancer Facts and Figures 2013-2014, American Cancer Society



Data taken from Wisconsin Cancer Facts and Figures 2013-2014, American Cancer Society



#### **Service Area**

St. Luke's provides patient and family centered care; supports the conduct of cancer clinical research and education; enhance access to improved cancer interventions; and advance the standard of cancer care regionally and beyond.

The St. Luke's area is made up of 17 counties in northeastern Minnesota, Wisconsin and the Upper Peninsula of Michigan. The counties are:

Minnesota Counties: Aitkin, Itasca, Koochiching, Carlton, Pine, Lake, Cook and St. Louis

Wisconsin Counties: Douglas, Bayfield, Ashland, Burnett, Washburn, Sawyer and Iron

Michigan Counties: Gogebic and Ontonagon

The communities served were determined by analyzing inpatient origin data by zip code. The top 13 zip codes account for approximately 70% of St. Luke's patient origin. These zip codes encompass a 30-mile radius from Duluth. In the following report, data are presented at the County and state levels to ensure stability of the estimates.

The primary market is made up of 13 zip codes that include Duluth, Superior, Two Harbors and Cloquet.

55802	55803	55804	55805	55806	55807	55808
55810	55811	55812	55720	55616	54880	

The secondary market is all of the remaining zip codes within the 17 counties.



The four counties referenced throughout this report are St. Louis County, Lake County and Carlton County in Minnesota, and Douglas County in Wisconsin.

	St. Luke's Inpatient Discharges - 2014											
			Femal	e					M	Male		
County	25-44	45-64	65 and Older	Total	17 and Under	25-44	45-64	65 and Older	Total	Grand Total		
St. Louis	1.38%	7.96%	16.96%	26.30%	0.00%	0.00%	14.19%	16.61%	30.80%	57.09%		
Douglas	0.00%	2.77%	6.23%	9.00%	0.35%	0.69%	2.77%	3.11%	6.92%	15.92%		
Carlton	0.00%	1.38%	7.61%	9.00%	0.00%	0.00%	2.77%	1.73%	4.50%	13.49%		
Lake	0.35%	0.35%	1.04%	1.73%	0.00%	0.00%	0.69%	2.42%	3.11%	4.84%		
Low Vol Ctys	0.69%	0.00%	1.38%	2.08%	0.00%	0.00%	0.35%	0.35%	0.69%	2.77%		
Itasca	0.00%	0.00%	0.35%	0.35%	0.00%	0.00%	0.35%	1.73%	2.08%	2.42%		
Ashland	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.69%	0.35%	1.04%	1.04%		
Aitkin	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.69%	0.00%	0.69%	0.69%		
Cook	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.35%	0.35%	0.35%		
Sawyer	0.00%	0.35%	0.00%	0.35%	0.00%	0.00%	0.00%	0.00%	0.00%	0.35%		
Bayfield	0.00%	0.00%	0.35%	0.35%	0.00%	0.00%	0.00%	0.00%	0.00%	0.35%		
Koochiching	0.00%	0.00%	0.35%	0.35%	0.00%	0.00%	0.00%	0.00%	0.00%	0.35%		
Pine	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.35%	0.35%	0.35%		
<b>Grand Total</b>	2.42%	12.80%	34.26%	49.48%	0.35%	0.69%	22.49%	26.99%	50.52%	100.00%		



# Top Sites for Total New Cancers at St. Luke's

0010		
2012		
Cancer site	# of patients	Percentage
Lung	107	16.9%
Breast	98	15.5%
Prostate	87	13.7%
Bladder	42	6.6%
Colon	31	4.9%
Total	365	57.6%
2013		
Cancer site	# of patients	Percentage
Lung	105	15.8%
Prostate	97	14.6%
Breast	96	14.5%
Bladder	34	5.1%
Colon	34	5.1%
Total	366	55.1%
2014	-	
Cancer site	# of patients	Percentage
Breast	106	18.6%
Lung	103	18.1%
Prostate	76	13.4%
Bladder	31	5.4%
Colon	27	4.7%
Total	344	60.2%

These patients were either diagnosed at St. Luke's or received first course treatment for their cancer at St. Luke's.



#### **County Health Rankings**

County Health Rankings reports were used to obtain a better health picture of the community served. Health outcomes represent how healthy a county is while health factors represent what influences the health of the county. Counties with high ranks (e.g., 1 or 2) are estimated to be the "healthiest."

Table 2 shows the health outcomes and health factors for the four counties that make up the service area. The three Minnesota counties are all ranked towards the bottom for the state when it comes to health outcomes. Douglas County in Wisconsin is not ranked as low, but is still in the bottom third of Wisconsin counties.

#### **Community Served Health Outcomes & Health Factors**

County	Health Outcomes Rank	<b>Health Factors Rank</b>
Carlton	66	66
Lake	79	37
St. Louis	74	59
Douglas	50	51

Data taken from National County Health Rankings ~ http://www.countyhealthrankings.org/



**Community Demographic Profile 2014** 

	Community Bemograpme 110me 2011											
<b>Conditions</b>	Minnesota	Wisconsin	Carlton	Lake	St. Louis	Douglas						
			County	County	County	County						
						· ·						
Total	5,457,173	5,757,564	35,348	10,818	200,319	43,785						
Population												
Female, %	50.3%	50.3%	16,973 <sub>(54.6%)</sub>			22,072						
Male, %	49.7%	49.7%	18,413 (45.4%)	4,387 (49.2%)	100,207 (49.3%)	22,087 (48.3%)						
		Eth	nicity (	<mark>%)</mark>								
White Non-	86.2%	88.1%	88.9%	97.2%	92.3%	92.5%						
Hispanic												
alone												
American	1.3%	1.1%	5.7%	N/A	2.1%	1.9%						
Indian and												
Alaska Native												
Alone												
Black Non-	5.7%	6.5%	1.4%	N/A	1.3%	1.1%						
Hispanic												
Alone												
Hispanic or	5.0%	6.3%	1.4%	0.7%	1.2%	1.1%						
Latino												
Asian Alone	4.5%	2.5%	0.5%	N/A	0.9%	0.8%						
Two or more	2.3%	1.7%	2.2%	1.2%	2.1%	2.5%						
Races												

Demographics	Minnesota	Wisconsin	Carlton County	Lake County	St. Louis County	Douglas County
% Living in poverty in 2009	11.8%	13.0%	10.9%	12.7%	16.5%	13.3%
Population living without health Insurance in 2000	452,715 estimated	7.7%	9%	8%	9%	10%
Children without health insurance coverage in 2000	76,509 estimated	4.4%	7%	7%	7%	7%



#### **Causes of Death**

In comparing the leading causes of death among the four counties (Carlton, Lake, St. Louis, and Douglas), cancer and heart disease are found to be the major causes of death.

Top 2 Causes of Death	Minnesota	Wisconsin	Carlton County	Lake County	St. Louis County	Douglas County
Cancer	#2	#1	#2	#1	#1	#1
Heart Disease	#1	#2	#1	#2	#2	#2

## **Cancer Sites by County**

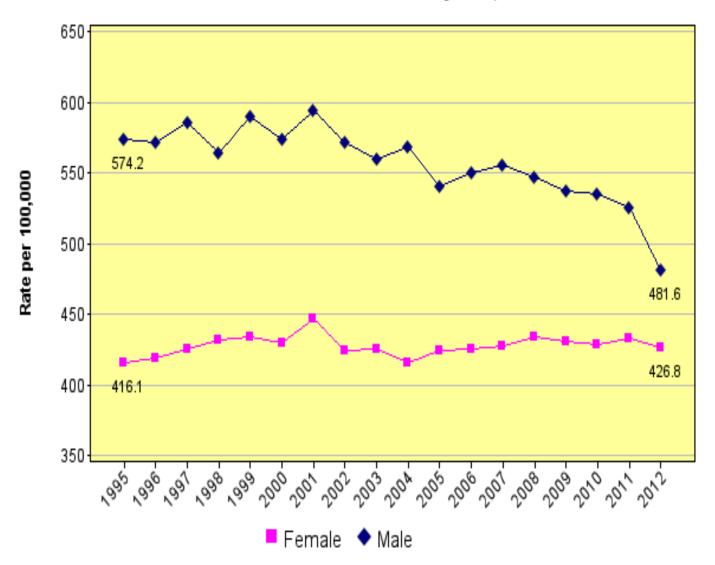
Site	Minnesota	Carlton	Lake	St. Louis	Year
All Cancer Types combined	475.1	465.0	447.4	488.8	2007 - 2011
Bladder	22.6	23.3	23.9	26.7	2007 - 2011
Brain and other nervous system	6.6	7.3	9.8 (UR)	6.6	2007 - 2011
Breast	130.7	109.5	83.9	124.3	2007 - 2011
Chronic Lymphocytic Leukemia	6.4	6.2	3.2 (UR)	6.2	2007 - 2011
Colorectal	42.8	44.1	33.3	43.8	2007 - 2011
Esophagus	4.9	4.1 (UR)	4.0 (UR)	6.7	2007 - 2011
Kidney	15.8	19.6	18.7	18.1	2007 - 2011
Larynx	3.1	4.4	4.4 (UR)	3.4	2007 - 2011
Leukemia	15.7	14.0	4.3 (UR)	14.2	2007 - 2011
Liver and Bile duct	4.9	4.5	5.3 (UR)	4.2	2007 - 2011
Lung and Bronchus	56.5	62.3	55.1	62.0	2007 - 2011
Melanoma	26.1	21.4	26.0	23.1	2007 - 2011
Mesothelioma	1.3	4.7	1.1 (UR)	3.3	2007 - 2011
Non- Hodgkin Lymphoma	23.2	20.6	21.6	24.8	2007 - 2011
Oral and Pharyngeal	11.8	10.8	14.8	14.5	2007 - 2011
Pancreas	10.8	12.5	16.6	10.9	2007 - 2011
Thyroid	11.8	9.1	6.1 (UR)	11.4	2007 - 2011

<sup>\*</sup> Age-adjusted rate per 100,000

<sup>\*</sup>UR – unreliable due to low numbers



## Wisconsin Cancer Incidence Rates by Sex, 1995-2012



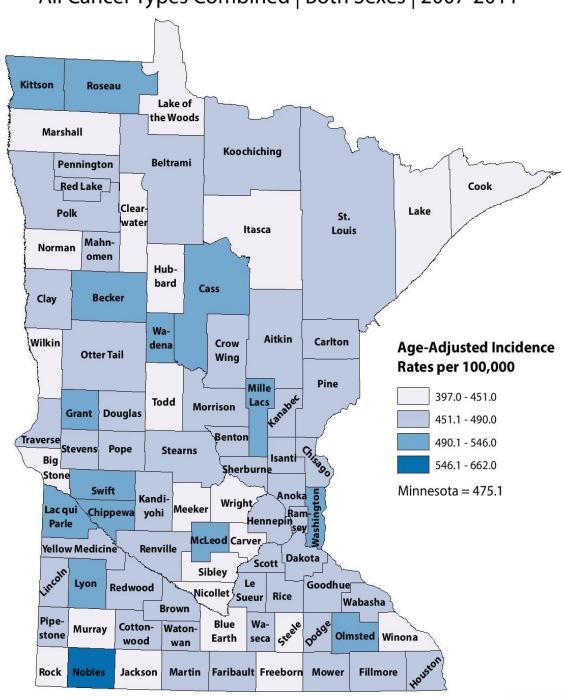
Note: Rates are age-adjusted to the 2000 U.S standard population.

The age-adjusted incidence rate for all cancer in males declined from 574.2 per 100,000 population in 1995 to 481.6 per 100,000 in 2012. The age-adjusted rate for cancer in females remained more stable, at 416.1 in 1995 and 426.8 in 2012. The rate of cancer incidence remained consistently higher in males than females.



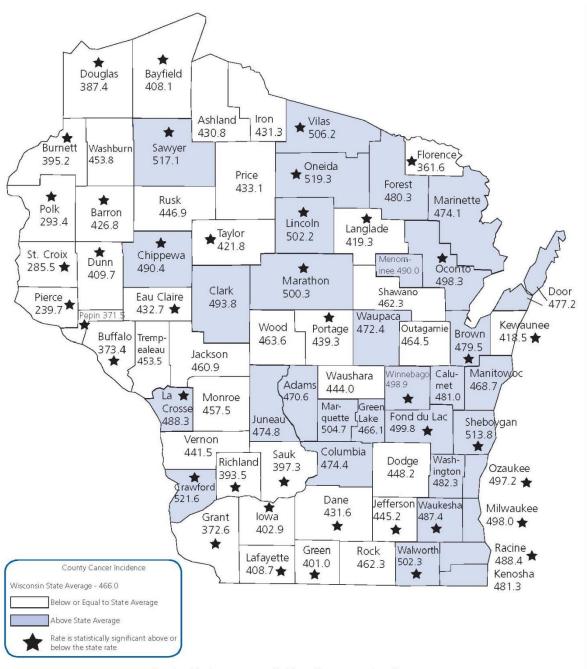
#### **Minnesota Cancer Incidence Rates**

All Cancer Types Combined | Both Sexes | 2007-2011





#### **Wisonsin Cancer Incidence Rates**



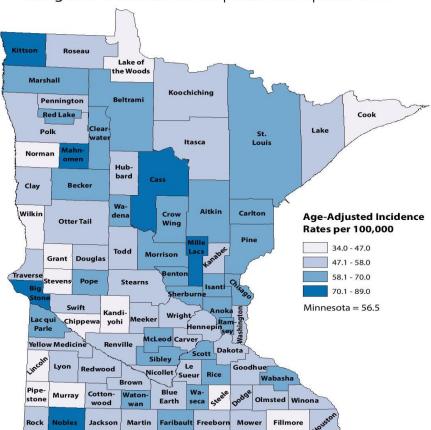
Source: Wisconsin Cancer Reporting System, Office of Health Informatics, Division of Public Health, Department of Health Services, 2013. \*Rates are per 100,000 and age-adjusted to the 2000 US standard population.

Note: Counties on Minnesota border are not adequately reported from all Minnesota facilities.



#### **Minnesota Cancer Incidence Rates**

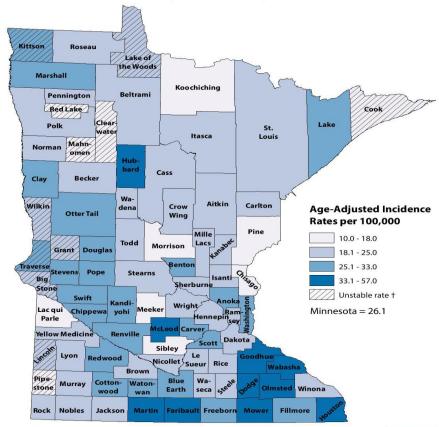
Lung and Bronchus Cancer | Both Sexes | 2007-2011



# Minnesota Environmental Public Health Tracking Program Minnesota Public Health Data Access https://apps.health.state.mn.us/mmdata

#### **Minnesota Cancer Incidence Rates**

Melanoma | Both Sexes | 2007-2011



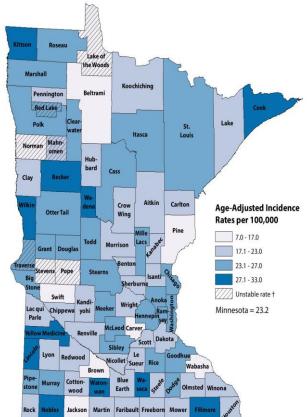
† Rates are based on counts less than or equal to 10 should be interpreted with caution; the rate may be unstable because it can change dramatically with the addition or subtraction of one case.





#### Minnesota Cancer Incidence Rates

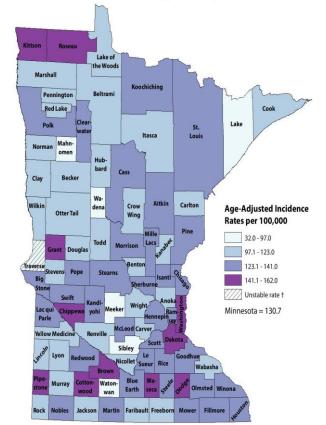
Non-Hodgkin Lymphoma | Both Sexes | 2007-2011



# Minnesota Environmental Public Health Tracking Program Minnesota Environmental Public Health Tracking Program Minnesota Public Health Tracking Program Minnesota Public Health Tracking Program Minnesota Environmental Public Health Tracking Program Minnesota Environmental Public Health Tracking Program Minnesota Public Health Tracking Program Minnesota Environmental Public Health Tracking Program Minnesota Env

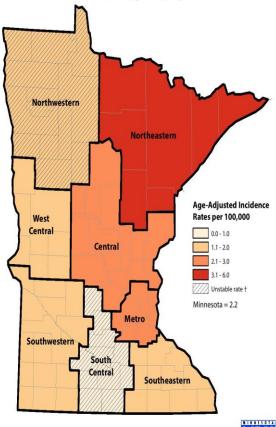
#### Minnesota Cancer Incidence Rates

Breast Cancer (Female) | All Ages | 2007-2011



Innesota Environmental Public Health Tracking Program
Minnesota Public Health Data Access
https://app.health.state.meu.w/mndata

† Rates are based on counts less than or equal to 10 should be interpreted with caution; the rate may be unstable because it can change dramatically with the addition or subtraction of one case.



**Minnesota Cancer Incidence Rates** 

Mesothelioma (Male) | All Ages | 2007-2011

† Rates are based on counts less than or equal to 10 should be interpreted with caution; the rate may be unstable because it can change dramatically with the addition or subtraction of one case.

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Minnesota Environmental Public Health Tracking Program
Minnesota Public Health Data Access
https://apps.health.state.mn.us/mndata



#### 2008-2012 Minnesota Cancer Surveillance System-Incidence by Stage and County

Male and female/		ajastea to the I		opulation (13	ape groups -	CC11343 1 23-11	Joj standaru	, commente	intervals (11	arair illouj ali	2 33/0 101 140	-31
•	I	n situ	Loc	alized	Reg	gional	Dist	tant	Not Ap	plicable	Unst	aged
	Rate	Count	Rate	Count	Rate	Count	Rate	Count	Rate	Count	Rate	Count
Minnesota	55	15,734	203.1	58,532	89.5	25,713	107	30,675	8.7	2,429	64.6	18,713
Carlton	44.7	96	188.2	408	98.9	212	100.6	217	10.3	20	48.6	104
Lake	43.2	37	218.8	182	96.4	82	90.5	85	10.8	7	27.2	25
St. Louis	51.9	638	207	2,578	101.5	1,257	109.1	1,385	8.2	91	49.7	659
Male and female/	Colon an	d Rectum										
	I	n situ	Loc	alized	Re	gional	Dist	tant	Not Ap	plicable	Unst	aged
	Rate	Count	Rate	Count	Rate	Count	Rate	Count	Rate	Count	Rate	Count
Minnesota	1.3	375	15.5	4,461	12.4	3,513	6.8	1,962	0	0	6.3	1,844
Carlton	0.9	2	15.7	34	14.7	31	9.2	19	0	0	4.1	8
Lake	1	1	17.2	13	11.9	11	7.4	7	0	0	2.8	2
St. Louis	1.9	24	14.4	185	13.8	178	7.3	93	0	0	3.6	49
Male and female/	Lung and	Bronchus										
	I	n situ	Loc	alized Reg		gional	Dist	tant	Not Ap	plicable	Unst	aged
	Rate	Count	Rate	Count	Rate	Count	Rate	Count	Rate	Count	Rate	Count
Minnesota	0.1	19	10.1	2,827	11.7	3,318	25.6	7,372	0	0	7.9	2,250
Carlton	0	0	5.4	12	16.7	36	31.8	70	0	0	5.4	12
Lake	0	0	6.3	6	16.7	15	24.7	23	0	0	3.4	3
St. Louis	0.3	3	11.2	140	13.5	175	28.4	367	0	0	8.2	109
Male and female/	Breast											
	I	n situ	Loc	alized	Reg	gional	Dist	tant	Not Ap	plicable	Unst	aged
	Rate	Count	Rate	Count	Rate	Count	Rate	Count	Rate	Count	Rate	Count
Minnesota	16.3	4,728	43.4	12,550	19.9	5,718	3.2	939	0	0	2.3	684
Carlton	10.5	22	40.6	88	18.1	39	1.3	3	0	0	0	0
Lake	12.7	9	29.1	24	16	13	2	2	0	0	1.3	1
St. Louis	13.2	161	41.6	521	21.4	255	2.8	32	0	0	0.4	6



#### 2008-2012 Minnesota Cancer Surveillance System-Incidence by Stage and County

Rates are per 100,000 and	age-adjust	ted to the 20	00 US Std P	opulation (19 a	age groups -	Census P25-1	130) standar	d; Confidenc	e intervals (T	iwari mod) a	re 95% for ra	tes.
Male and female/Urina	ry Bladd	ler										
	In	situ	Loc	alized	Reg	gional	Distant		Not Ap	plicable	Unst	aged
	Rate	Count	Rate	Count	Rate	Count	Rate	Count	Rate	Count	Rate	Count
Minnesota	12.1	3,465	6.8	1,952	1.6	444	0.8	233	0	0	1.5	434
Carlton	12.5	28	5.7	12	0.5	1	0.5	1	0	0	0.9	2
Lake	16.7	16	7	7	0.9	1	1	1	0	0	0	0
St. Louis	14.3	186	7.6	102	1.7	22	1.4	17	0	0	1.1	15
Male/All Sites												
	In	situ	Loc	alized	Reg	gional	Dist	tant	Not Ap	plicable	Unst	aged
	Rate	Count	Rate	Count	Rate	Count	Rate	Count	Rate	Count	Rate	Count
Minnesota	50.3	6,451	220.9	29,791	85	11,504	129.2	16,811	7.8	1,038	79.8	10,394
Carlton	39.1	40	206.7	217	98.9	105	123.2	122	12	12	53.3	52
Lake	42	20	257	111	86.1	39	108.8	51	8.5	4	37.3	17
St. Louis	48.3	281	233.2	1,376	100.3	588	135.3	787	6.5	35	62.6	375
Male/Colon and Rectur	n											
	In	situ	Loc	Localized		Regional		tant	Not Ap	plicable	Unstaged	
	Rate	Count	Rate	Count	Rate	Count	Rate	Count	Rate	Count	Rate	Count
Minnesota	1.4	196	17.7	2,314	13.6	1,776	7.9	1,047	0	0	7	902
Carlton	1.1	1	16.3	16	19.9	19	9.4	9	0	0	4.4	4
Lake	2.1	1	22	8	15.2	7	3.9	2	0	0	5.6	2
St. Louis	1.8	12	17.3	100	15.8	92	9.8	57	0	0	4.5	28
Male/Lung and Bronch	us											
	In	situ	Loc	alized	Reg	gional	Dist	tant	Not Ap	plicable	Unst	aged
	Rate	Count	Rate	Count	Rate	Count	Rate	Count	Rate	Count	Rate	Count
Minnesota	0.1	10	10.2	1,283	13.1	1,700	30.2	3,982	0	0	9.1	1,139
Carlton	0	0	3.9	4	17.9	19	38.7	39	0	0	6.2	6
Lake	0	0	8.6	4	16.3	7	31.1	15	0	0	6.8	3
St. Louis	0.3	2	10.6	60	16.1	98	31.8	189	0	0	10.5	62



#### 2008-2012 Minnesota Cancer Surveillance System-Incidence by Stage and County

Male/Breast			•			•	•	•	•			
	In	situ	Loc	Localized		Regional		Distant		plicable	Unst	aged
	Rate	Count	Rate	Count	Rate	Count	Rate	Count	Rate	Count	Rate	Count
Minnesota	0.2	19	0.6	80	0.6	77	0.1	6	0	0	0.1	7
Carlton	0	0	0	0	0.7	1	0	0	0	0	0	0
Lake	0	0	0	0	0	0	0	0	0	0	0	0
St. Louis	0.2	1	0.9	5	1.6	8	0	0	0	0	0.1	1
Male/Prostate												
	In	situ	Loc	alized	Reg	gional	Dist	tant	Not Ap	plicable	Unst	aged
	Rate	Count	Rate	Count	Rate	Count	Rate	Count	Rate	Count	Rate	Count
Minnesota	0.1	17	100.9	14,036	16.2	2,391	6	754	0	0	21.7	2,916
Carlton	0	0	94.3	105	16.7	20	6.7	7	0	0	11.8	13
Lake	0	0	127.1	60	19.1	9	9	4	0	0	6.8	3
St. Louis	0	0	105.2	649	15.8	104	9.2	55	0	0	14.1	90
Male/Urinary Bladder												
	In	situ	Localized		Regional		Dist	tant	Not Applicable		Unstaged	
	Rate	Count	Rate	Count	Rate	Count	Rate	Count	Rate	Count	Rate	Count
Minnesota	20.9	2,633	12.4	1,534	2.5	316	1.3	164	0	0	2.6	320
Carlton	19.3	19	11.6	11	1.1	1	1.1	1	0	0	1.4	1
Lake	24.7	12	10.5	5	1.9	1	0	0	0	0	0	0
St. Louis	21.6	129	15	87	2.9	17	1.9	11	0	0	1.9	10
Female/All Sites												
	In	situ	Loc	alized	Reg	gional	Dist	tant	Not Ap	plicable	Unst	aged
	Rate	Count	Rate	Count	Rate	Count	Rate	Count	Rate	Count	Rate	Count
Minnesota	62.4	9,283	191	28,741	94.8	14,209	89.8	13,864	9.6	1,391	52.6	8,319
Carlton	53.7	56	171.6	191	99.1	107	85	95	8.1	8	47.7	52
Lake	44.4	17	180.5	71	107.3	43	72.4	34	12.9	3	16.9	8
St. Louis	57.7	357	188.1	1,202	103.8	669	89.7	598	9.9	56	39.5	284



#### 2008-2012 Minnesota Cancer Surveillance System-Incidence by Stage and County

Rates are per 100,000 and age-adjusted to the Female/Colon and Rectum	2000 03	otu ropula	LIUII (15 d)	ge groups - t	Lelisus PZ3	-1130/ Stanua	iru, comiden	ce intervals (	iiwaii iiiou)	aie 33% iUl l	ales.	
	In	situ	Loc	alized	Reg	gional	Dist	ant	Not Ap	plicable	Unst	aged
	Rate	Count	Rate	Count	Rate	Count	Rate	Count	Rate	Count	Rate	Count
Minnesota	1.1	179	13.7	2,147	11.2	1,737	5.9	915	0	0	5.7	942
Carlton	0.8	1	15.1	18	10.5	12	8.8	10	0	0	3.3	4
Lake	0	0	12.6	5	8.5	4	10.8	5	0	0	0	0
St. Louis	2.1	12	12	85	12.3	86	5.2	36	0	0	2.9	21
Female/Lung and Bronchus												
	In	situ	Loc	alized	Reg	gional	Dist	ant	Not Ap	plicable	Unst	aged
	Rate	Count	Rate	Count	Rate	Count	Rate	Count	Rate	Count	Rate	Count
Minnesota	0.1	9	10.3	1,544	10.7	1,618	22.1	3,390	0	0	7.1	1,111
Carlton	0	0	6.6	8	16	17	26.8	31	0	0	5	6
Lake	0	0	4.3	2	17.3	8	18	8	0	0	0	0
St. Louis	0.3	1	11.9	80	11.3	77	26.1	178	0	0	6.4	47
Female/Breast	_				T		1		1		T	
	In	situ	Loc	alized	Reg	gional	Dist	ant	Not Ap	plicable	Unst	aged
	Rate	Count	Rate	Count	Rate	Count	Rate	Count	Rate	Count	Rate	Count
Minnesota	31.5	4,709	82.1	12,470	37.9	5,641	6.1	933	0	0	4.1	677
Carlton	21	22	79.7	88	35	38	2.8	3	0	0	0	0
Lake	25.4	9	58.4	24	32.2	13	3.7	2	0	0	2.6	1
St. Louis	25.4	160	78.7	516	39.8	247	5.5	32	0	0	0.6	5
Female/Urinary Bladder												
	In situ		Loc	alized	Regional		Distant		Not Applicable		Unstaged	
	Rate	Count	Rate	Count	Rate	Count	Rate	Count	Rate	Count	Rate	Count
Minnesota	5.3	832	2.5	418	0.8	128	0.4	69	0	0	0.6	114
Carlton	7.6	9	0.5	1	0	0	0	0	0	0	1	1
Lake	8.6	4	3.6	2	0	0	2.1	1	0	0	0	0
St. Louis	8.4	57	2	15	0.7	5	1	6	0	0	0.5	5



# Surveillance, Epidemiology and End Results (SEER) Cancer Statistics Review (CSR), 2005 - 2011

Incidence by SEER summary stage for selected sites, excludes In situ cases with the exception of bladder

Site	Localized	Regional	Distant	Unstaged	
Breast	61%	32%	6%	2%	
Colon	39%	36%	20%	5%	
Lung	16%	22%	57%	5%	
Prostate	80%	12%	4%	4%	
Urinary bladder	35%	7%	4%	3%	51% In situ

SEER data is a snapshot of the incidence of cancer in the United States. The SEER data is representative of 28% of the population of the U.S, taking into consideration all races and ethnicities. Using census data from the state and the SEER data, one can extrapolate the expected incidence of cancer in Minnesota based on the SEER data.

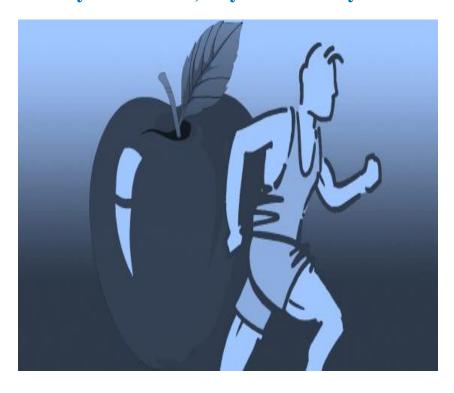
Howlader N, Noone AM, Krapcho M, Garshell J, Miller D, Altekruse SF, Kosary CL, Yu M, Ruhl J, Tatalovich Z, Mariotto A, Lewis DR, Chen HS, Feuer EJ, Cronin KA (eds). SEER Cancer Statistics Review, 1975-2012, National Cancer Institute. Bethesda, MD, <a href="http://seer.cancer.gov/csr/1975\_2012/">http://seer.cancer.gov/csr/1975\_2012/</a>, based on November 2014 SEER data submission, posted to the SEER web site, April 2015.



#### **Health Risk Behavior**

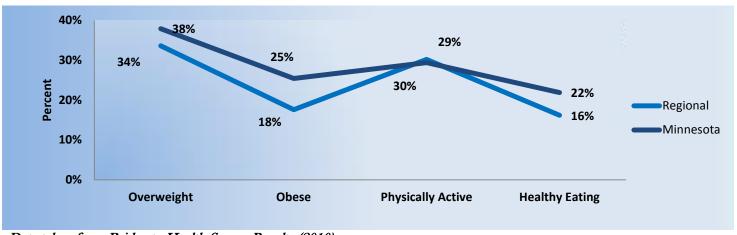


#### **Obesity – Nutrition, Physical Activity**

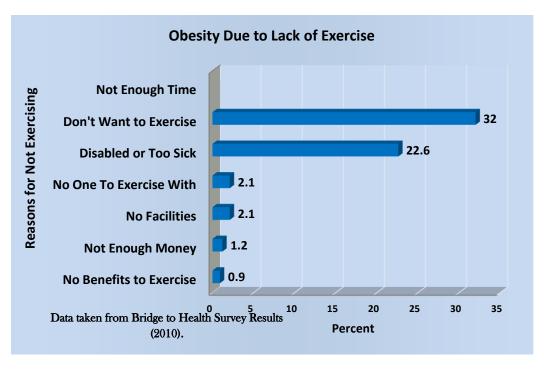


Over 25% of adults in the four Counties are considered Obese.





Data taken from Bridge to Health Survey Results (2010)

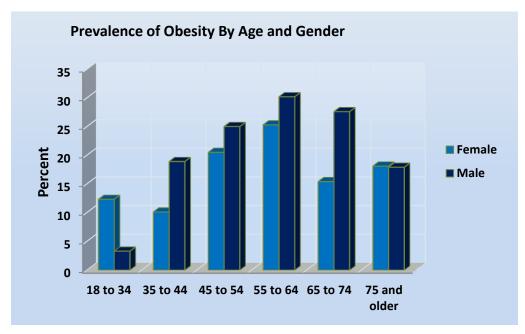


Overweight and obesity are clearly associated with increased risk for developing many cancers ~ American Cancer Society.

Overweight and obesity	Minnesota	Regionally		Lake County	St. Louis County	Douglas County
% of population	63.3%	51.2%	59.4%	61.2%	47.1%	49.3%

Data Source - Bridge to health Survey - 2010





Data taken from Bridge to Health Survey Results (2010).

# **Tobacco Use and Second hand Smoke Exposure**



obesity and Smoking are two health behaviors that have shown to have a significant impact at increasing risks for cancer. The data reveals that the four Counties follow the national trend for prevalence.



	Bridge to		Healthy		
	Health 2010	Minnesota	Wisconsin	National	People 2020 goal
<b>Current smokers</b>	14.6%	16.8%	18.8%	17.9%	12.0%
Smoke everyday	N/A	11.3%	12.6%	12.7%	N/A
Former Smoker	21.8%	26.4%	26.9%	25.5%	N/A
Never smoked	63.6%	56.8%	54.3%	55.5%	N/A

Data taken from Bridge to Health Data

## **Prevention and Screening**

- ✓ 26.8% of women age 40 and over have not been screened for breast cancer with in the past 2 years
- ✓ 10% women age 40 and over have never been screened for breast cancer
- ✓ 24.7% of women age 18 and over have not been screened for cervical cancer with in the past 2 years
- ✓ 6.4% of women age 18 and over have never been screened for cervical
- ✓ 62.2 of males age 50 and older haven't had prostate exam in the past year
- ✓ 14% of males age 50 and older have never had prostate exam
- ✓ 45% of men and women age 50 and over have not been screened for colorectal cancer with in the past 5 years
- ✓ 32% of men and women age 50 and over have never been screened for colorectal cancer

Data Source – Bridge to health Survey – 2010



# Requested Survivorship Lecture Series Topics by Attendees of Survivorship Lectures

Education about specific types of cancer	19	20%
Nutrition	15	16%
Survivor support	11	12%
Research Opportunities/Treatment Options	10	11%
Mental Health Issues	10	11%
Exercise	9	10%
Support Group Availability	5	5%
Chemo brain	3	3%
Financial resources	3	3%
Cancer Image Control - family/friends	3	3%
Hospice - When to transition/benefits	2	2%
Dental Care	1	1%
Advance Directives/Legal/Ethics/End-of-life	1	1%
Social Services Availability	1	1%
Total	93	100%



## Barriers to Care Expressed by Attendees of Survivorship Lecture Series

Of the approximately 630 community members, who attended the 2014 and 2015 Survivorship Lecture Series, the following is a synopsis of the barriers to care which they identified:

#### **Nutrition and Fitness**

Diet suggestions to supplement side effects of treatments

Effect of food on medications

Nutritional support during and after treatment

Post-treatment issues which affect diet and recovery (i.e. dysphagia)

Returning to work

Exercise-can I, How much, what type

#### Financial and Legal

Dealing with Social Security
Financial Management
Paying for treatments
Dealing with insurance companies
Living wills, Health Care Directives

#### **Diagnosis and Treatment**

How to communicate with physicians and caregivers and get them to listen Medication and treatment side effects
Mental Health during and after diagnosis and treatment
Personal decision making with regards to treatment/Treatment decisions
Disease-specific information
Research options

#### Supportive

Lack of information on Biofeedback and stress management Family dynamics Long and short term survivorship issues with self and family Pain management Help for caregivers End of life issues

Access to support personnel and support groups closer to home



## Next Steps

- ➤ Incorporate information and resultant planning of programs identified in this oncology focused Community Health Needs Assessment into future updates of the St. Luke's Community Health Needs Assessment and involvement with community partners.
- ➤ Continue the St. Luke's Survivorship Lecture series, selecting topics requested by patients or identified as barriers by patients or care providers.
- Focus individual patient education on smoking cessation, nutrition and physical fitness, increasing the number of primary care clinicians and staff who implement the Institute for Systems Improvement (ICSI) Healthy Lifestyles and Obesity guidelines.
- ➤ Encourage enrollment in clinical trials and make access to information about clinical trials easily accessible to patients/families/care providers.
- Direct patients with questions about financing their health care needs to financial counselors.
- ➤ Ensure as many patients as possible have access to early detection and screening, promoting programs such as SAGE, a breast and cervical cancer screening program and low dose CT scans for early detection of lung cancer.



#### Appendix A

#### **Hospitals**

- St. Luke's Hospital
- Lake View Hospital

#### **Pharmacies**

- Northland Pharmacy
- Lake View Pharmacy Regional Centers
- St. Luke's Regional Cancer Center
- St. Luke's Regional Heart Center
- St. Luke's Regional Trauma Center

#### **Family Medicine**

- Bay Area Medical Clinic, Silver Bay, MN
- Chequamegon Clinic, Ashland, WI
- Denfeld Medical Clinic, Duluth, MN
- Hibbing Family Medical Clinic, Hibbing, MN
- Lake View Clinic, Two Harbors, MN
- Laurentian Medical Clinic, Mountain Iron, MN
- Lester River Medical Clinic, Duluth, MN
- Mariner Medical Clinic, Superior, WI
- Miller Creek Medical Clinic, Hermantown, MN
- Mount Royal Medical Clinic, Duluth, MN
- P.S. Rudie Medical Clinic, Duluth, MN

#### **Specialty Care**

All specialty clinics are located in Duluth, MN. Many of the specialists visit the family medical clinics on a daily basis.

- St. Luke's Allergy & Immunology Associates
- St. Luke's Anesthesia Associates
- St. Luke's Cardiology Associates
- St. Luke's Cardiothoracic Surgery Associates
- St. Luke's Dermatology Associates
- St. Luke's Duluth Internal Medicine Associates
- St. Luke's Emergency Services
- St. Luke's Endocrinology Associates
- St. Luke's Gastroenterology Associates
- St. Luke's Infectious Disease Associates
- St. Luke's Internal Medicine Associates St. Luke's Interventional Radiology
- St. Luke's Neurosurgery Associates
- St. Luke's Obstetrics & Gynecology Associates
- St. Luke's Occupational Health Clinic
- St. Luke's Oncology & Hematology Associates

- St. Luke's Ophthalmology Associates
- St. Luke's Orthopedics & Sports Medicine
- St. Luke's Pavilion Surgical Associates
- St. Luke's Pediatric Associates
- St. Luke's Physical Medicine & Rehab Associates
- St. Luke's Plastic Surgery Associates
- St. Luke's Psychiatry Associates
- St. Luke's Pulmonary Medicine Associates
- St. Luke's Radiation Oncology Associates
- St. Luke's Rheumatology Associates
- St. Luke's Surgical Associates
- St. Luke's Urology Associates

# Medical & Surgical Services

- Acute Inpatient Rehabilitation
- Acute Renal Dialysis
- Allergy and Immunology
- Anesthesiology
- Cardiology
- Cardiothoracic Surgery
- Colorectal Surgery
- Dermatology
- Emergency

Medicine/Trauma Care

- Endocrinology
- Family Medicine
- Gastroenterology



- General Surgery
- Infectious Disease
- Internal Medicine
- LASIK Surgery
- Mental Health
- Nephrology
- Neurology
- Neurosurgery
- Obstetrics/Gynecology

da Vinci® Surgery

(Minimally Invasive

Robotic-Assisted Surgery)

for Gynecology

- Occupational Medicine
- Oncology/Hematology
- Ophthalmology
- Oral and Maxillofacial Surgery
- Orthopedic Surgery
- Otolaryngology
- Pathology
- Pediatrics
- Physical Medicine and

#### Rehabilitation

- Plastic Surgery
- Podiatry
- Pulmonary Medicine
- Radiation Oncology
- Radiology
- Rheumatology
- Sports Medicine
- Urology da Vinci®

Surgery (Minimally

Jungery (Williamy

Invasive Robotic-Assisted Surgery)

- Vascular Surgery
- VATS (Video Assisted

Thoracoscopic Surgery)

• Weight Loss Essentials (Medical and Surgical)

#### Diagnostic &Therapeutic

#### Services

- Anticoagulation Clinic
- Biofeedback /

Neurofeedback

- Breast Center
- Capsule Endoscopy
- Cardiac Angioplasty
- Cardiac Diagnostics
- Cardiac Rehabilitation
- Cardiology Device Clinic
- Chemotherapy
- Coronary CT

Angiography (Computed

Tomography)

- CT Scanning
- 3D and 4D Conformal

Radiation

- Diabetes Care
- Electrophysiology
- Endoscopic Vein

Harvesting

 $\bullet Endoscopy/Proctoscopy/$ 

Colonoscopy

• EECP® (Enhanced

**External Counterpulsation**)

- Guided Imagery
- Hand Therapy
- Hearing Assessments –

Lake View

- Heart Failure Clinic
- Hypnosis
- Infusion Therapy
- IMRT

(IntensityModulated

Radiation

Therapy)

- Laboratory
- Lithotripsy
- Lymphedema Services
- Mammography (Digital)

- Mental Health
- MRI (Magnetic

Resonance Imaging)

Neurological

Screening/Diagnostics

• Neuromuscular Electrical

Stimulation (NMES)

- Nutrition Counseling
- Occupational Therapy

(Adult and Pediatric)

• Osteoporosis Screening

(DEXA Scan and Heel Ultrasound)

Ostomy/Continence/

Wound Care

• PACE (Professionally

Assisted Customized

Exercise)

Pain Management

• PET/CT Imaging

(Positron Emission

Tomography)

- Pharmacy
- Physical Therapy (Adult

and Pediatric)

- Psychological Services
- Pulmonary Rehabilitation

• Radiation Therapy

Radioembolization

• Radio-Frequency

Ablation

- Radiology
- Rehabilitation (Inpatient

and Outpatient)

- Respiratory Therapy
- Saebo Rehabilitation (Stroke and Neurological

Injury)

- Sleep Disorders Center
- Speech Therapy (Adult and Pediatric)



- Stereotactic Radiosurgery
- Stroke Program
- Transcatheterarterial chemoembolization
- TMJ Services
- Ultrasound
- Vascular Services
- Vestibular Rehabilitation Therapy
- Vision Rehabilitation Program
- VNUS Closure for Varicose Veins
- Women's Heart Clinic

# Community & Regional Services

- Childbirth Education
- Child Car Seat Safety Clinics (Partnership with the Duluth Fire Department and Northland's NewsCenter)
- Clinical Experience Affiliations
- Community Health Education
- Continuing Education Programs (Health Professionals, Physicians and EMS)
- CPR Training
- Diabetes Education
- Employee Assistance Program
- Fall Prevention Program
- Family Practice Residency Program (Joint Sponsorship)
- First Aid Classes
- Home Health Care

- Home Telemonitoring
- Hospice Duluth®
- I Can Cope
- Injury Prevention Programs (TraumaRoo, EN CARE, Think First)
- Joint Replacement PreSurgery

Class

- Kids Can Cope
- Lake View Cottages (Assisted Living)
- Living Well with Chronic Conditions Workshop
- Life Link III Air Medical Transport
- Medical Home
- Osteoporosis Program
- Outpatient Surgery Center – Mariner Medical Clinic
- Outreach Education
- Pavilion Surgery Center
- Physician Outreach Education
- Physical Therapy & Fitness Center (Partnerships St. Ann's Residence, Duluth, MN, and William Kelly High School, Silver Bay, MN)
- Pilates
- St. Luke's Driving Evaluation and Training Program
- St. Luke's International Travel Health Center
- Speaker's Bureau
- Support Groups
- Whiteside Institute for

Clinical Research (In collaboration with the University of Minnesota Medical School, Duluth)
Urgent Care

Urgent Care services for minor, but urgent, injuries and illnesses are offered at five locations.

- St. Luke's Hospital, Duluth, MN
- Denfeld Medical Clinic, Duluth, MN
- Lake View Hospital, Two Harbors, MN
- Laurentian Medical Clinic, Mountain Iron, MN
- Mariner Medical Clinic, Superior, WI
- Miller Creek Medical Clinic, Hermantown, MN

# Q Care, St. Luke's Express Clinic

Q Care, located in the Duluth Cub Foods, offers convenient, walk-in care for minor health concerns for people of all ages. Staffed by a physician assistant or nurse practitioner, the clinic provides basic diagnostic services and prescriptions for treatment, as well as some on-site lab testing



#### References

- American Cancer Society http://www.wicancer.org/documents/wifactsfigures2013\_final.pdf
- Behavioral Risk Factor Surveillance System SMART DATA http://apps.nccd.cdc.gov/ BRFSS- Centers for Disease Control and Prevention (CDC). Behavioral Risk Factor Surveillance System Survey Data. Atlanta, Georgia: U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, [2010]
- Bridge to Health survey 2010, http://bridgetohealthsurvey.com/images/pdfs/BTH%202010%20Regional%20Report.pdf
- County Health Rankings & Roadmaps, http://www.countyhealthrankings.org/app/washington/2014/rankings/outcomes/overall/by-rank
- Minnesota Department of Health, <a href="http://www.health.state.mn.us/divs/hpcd/cdee/mcss/documents/mncancerfactsfigures2011033011">http://www.health.state.mn.us/divs/hpcd/cdee/mcss/documents/mncancerfactsfigures2011033011</a>.
   <a href="pdf">pdf</a>
- Minnesota cancer surveillance system (MCSS) (2011)
   ,http://www.health.state.mn.us/divs/hpcd/cdee/mcss/documents/mncancerfactsfigures2011033011.
   pdf
- U.S. Census Bureau, 2000 Census of Population and Housing, Summary File 1; U.S. Census Bureau, 2010 Census of Population and Housing, Summary File 1.
- U.S. Department of Commerce United States Census Bureau Quick Facts, http://quickfacts.census.gov/qfd/states/53000.html
- U.S. Department of Health & Humans Services: Community Health Status Indicators [2010], http://wwwn.cdc.gov/CommunityHealth/homepage.aspx?j=1