

AMERICAN CANCER SOCIETY

# Return to Screening Initiative

## #GetScreened



# ***Get Screened*** Public Awareness Campaign

*A public campaign to drive routine cancer screening and care*

- **Deliver concise, high-impact awareness messaging**
- **Clear call-to-action**
- **Clear path to more information**
- **Flexible and adaptable with long-term sustainability**
- **Communicate the science in plain language**



## **Cancer doesn't wait. Neither should you.**

**Regular cancer screening  
can save your life.**

Many tests are available for free or covered by insurance.  
Talk to a doctor about which screening tests are right for you.

**Age 25+** Cervical screening

**Age 45+** Colorectal & breast screening

**Age 50+** Discuss lung screening with doctor

Learn more at [cancer.org/get-screened](https://cancer.org/get-screened)

# TODAY'S CANCER SCREENING TOPICS



- ★ Why is screening important?
- ★ Cancer screening guidelines
- ★ Reduce your cancer risk
- ★ Questions

# decline in screening-related procedures was experienced this past year, disrupting more than 22 million screening tests.

Months of limited screening tests resulted in nearly 80,000 potential missed or delayed diagnoses, which limit treatment options and increase risk of death in the future. An estimated 10,000 more deaths are estimated from breast and colorectal cancer alone.

Source: IQVIA Institute, April 2020.

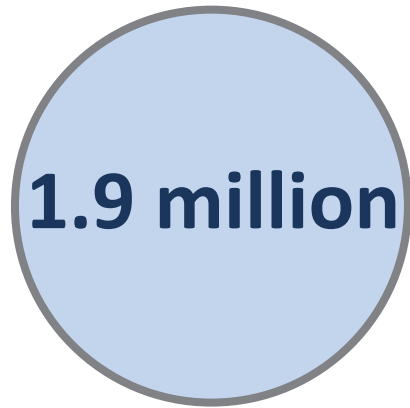
Source: National Cancer Institute, 2020.



# Why is cancer screening important?



1 in 3 Americans will develop cancer in their lifetime, but finding cancer early means it may be easier to treat.  
(CF&F 2020)



Nearly 1.9 million people will be diagnosed with cancer in 2021  
(Cancer Statistics, 2021)

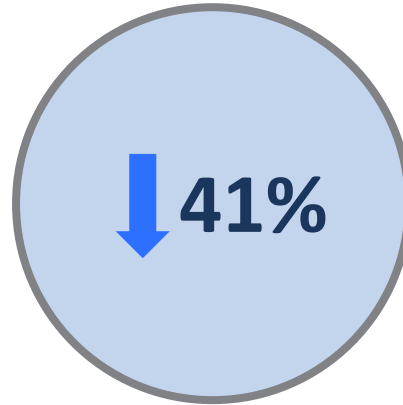
## Because YOU are important



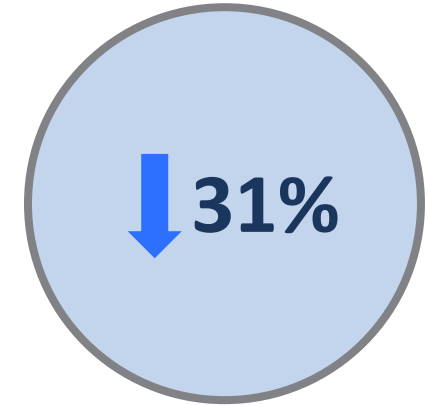
# SCREENING SAVES LIVES



277,000 colorectal cancer cases that could be prevented if 80% of eligible population is screened  
(Meester et al. Cancer 2015)



Decline in breast cancer mortality. Est. 403,200 breast cancer deaths averted between 1989–2018, due to screening & treatment  
(Cancer Statistics, 2020)



Decline in cancer mortality since 1991  
(Cancer Statistics, 2020)

# Arizona

## AT A GLANCE

Estimated new cases,  
2021

**39,640**

Estimated deaths, 2021

**12,510**

Incidence rates, 2013-  
2017

**386.3**

Average annual rate per 100,000,  
age adjusted to the 2000 US  
standard population.

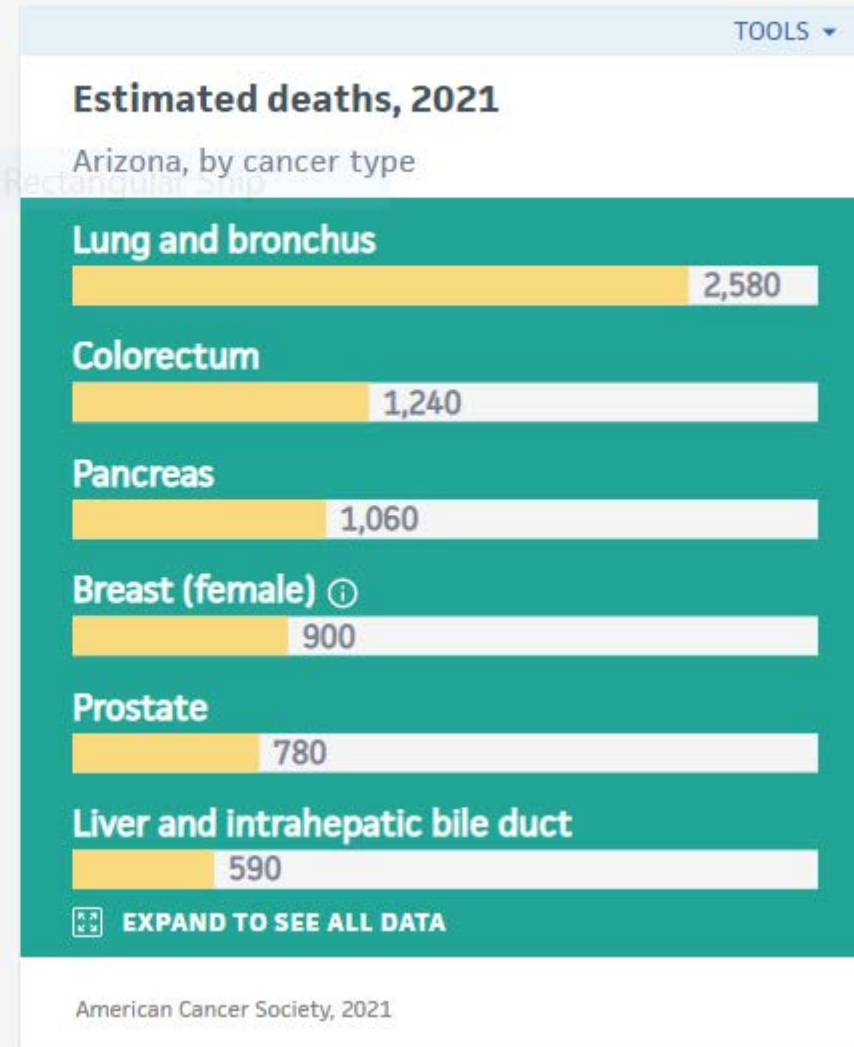
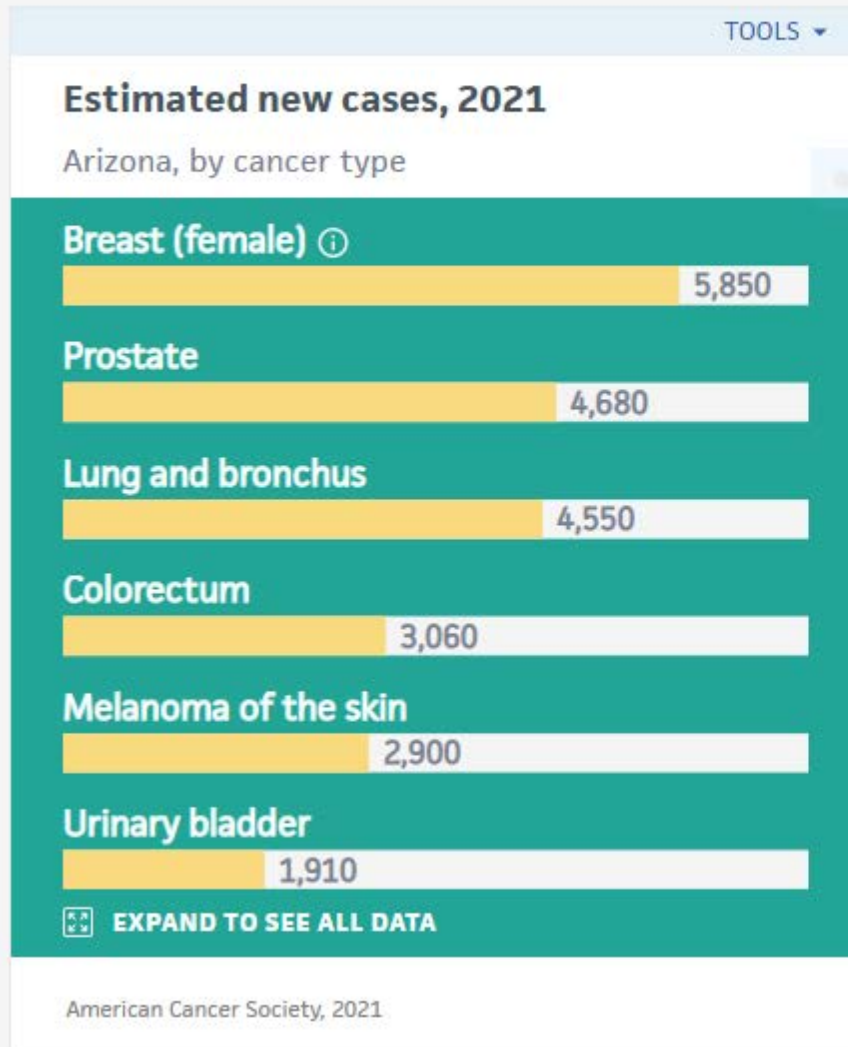
Death rates, 2014-2018

**137.9**

Average annual rate per 100,000,  
age adjusted to the 2000 US  
standard population. Rates for PR  
are for 2012-2016.



## 2021 ESTIMATES









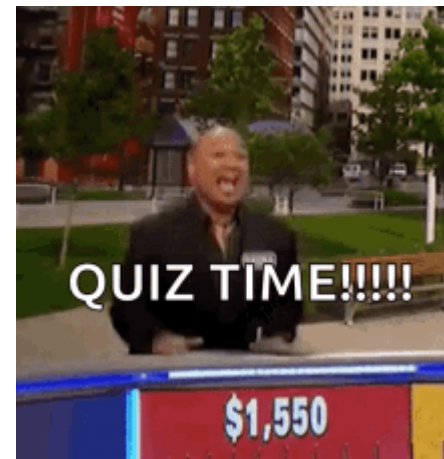
# POP QUIZ #1! TRUE OR FALSE

1. Cancer screenings are meant only for those at high risk of developing cancer.
2. Women begin getting a cervical cancer screening at age 25.



LET'S TEST OUR KNOWLEDGE

# POP QUIZ #2!



Which cancer is the leading cause of all cancer deaths in the United States?

- Colorectal
- Breast
- Lung
- Pancreas

Approximately what percentage of lung cancer cases are diagnosed at the local stage when survival is very high?

- 88%
- 44%
- 22%
- 17%

LET'S TEST OUR KNOWLEDGE

## POP QUIZ #2!



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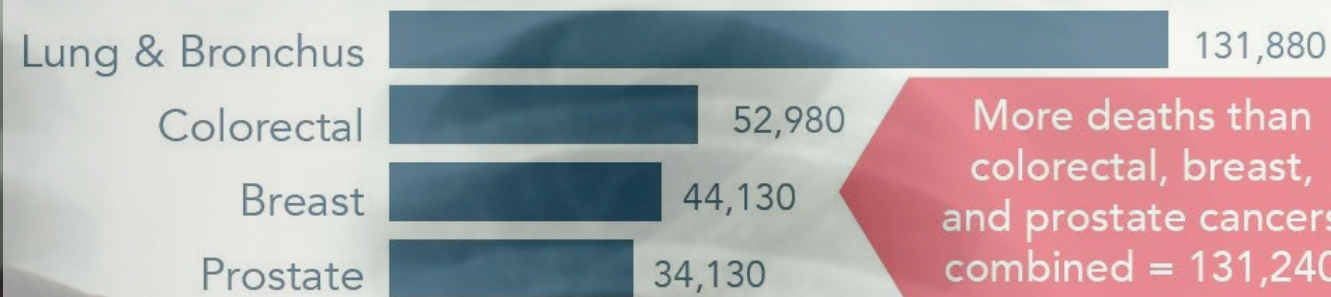
Approximately what percentage of lung cancer cases are diagnosed at the local stage when survival is very high?

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**Survival:** The 5-year relative survival rate for lung cancer is 21% overall (17% for men and 24% for women). Only 17% of lung cancers are diagnosed at a localized stage, for which the 5-year survival rate is 59%.

<https://www.cancer.org/content/dam/cancer-org/research/cancer-facts-and-statistics/annual-cancer-facts-and-figures/2021/cancer-facts-and-figures-2021.pdf>

## Still the #1 Cancer Killer



Source: American Cancer Society, Cancer Facts and Figures 2021

Lung cancer kills more people each year than any other cancer.

Click to add text

Smoking causes about 80 percent of lung cancer deaths.

Each year, more people die of lung cancer than of colon, breast, and prostate cancers combined

Source: Health coalition forms National Cancer Roundtable. Atlanta: American Cancer Society; March 2017.

Source: Howlader N, Noone AM, Krapcho M, Miller D, Brest A, Yu M, Ruhl J, Tatalovich Z, Mariotto A, Lewis DR, Chen HS, Feuer EJ, Cronin KA (eds). SEER Cancer Statistics Review, 1975-2016, National Cancer Institute. Bethesda, MD, [https://seer.cancer.gov/csr/1975\\_2016/](https://seer.cancer.gov/csr/1975_2016/), based on November 2018 SEER data



# LUNG CANCER SCREENING

## Low-dose CT (LDCT) scan:

- Are 50 to 80 years old and in fairly good health,  
*and*
- Currently smoke or have quit in the past 15 years,  
*and*
- Have at least a 20 pack-year smoking history. (This is the number of packs of cigarettes per day multiplied by the number of years smoked. For example, someone who smoked 2 packs a day for 10 years [ $2 \times 10 = 20$ ] has 20 pack-years of smoking, as does a person who smoked 1 pack a day for 20 years [ $1 \times 20 = 20$ ].)

In addition, it's important that people who are going to be screened:

- Receive counseling to quit smoking if they currently smoke,  
*and*
- Have been told by their doctor about the possible benefits, limits, and harms of screening with LDCT scans,  
*and*
- Can go to a center that has experience in lung cancer screening and treatment.

# RISK FACTORS FOR BREAST CANCER

- Gender: 100 times more common in females
- Genes: Genetics accounts for 5 – 10% of cases
- Age: Two-thirds of cases occur in women aged 55+
- Race: Differs in death and incidence rates
- Physical Activity: Low amounts of exercise
- Weight: Overweight, especially for women after menopause
- Alcohol Consumption: Risk goes up with the amount of alcohol you drink



# BREAST CANCER SCREENING

## Women ages 40-44

- your choice to screen during this age; talk to your doctor about frequency and risk factors

## Women ages 45-54

- yearly mammograms

## Women ages 55 and older

- mammograms every 2 years, or can continue yearly screening

**ALL** women should discuss the benefits, limitations and potential harms of breast screening with their doctor.



# COLON CANCER RISK FACTORS

## *Risk Factors - Unmodifiable*

- Age >50
- Family history of polyps or colorectal cancer
- Family history of FAP or HNPCC (genetic disorders)
- Personal history of inflammatory bowel disease, Crohn's
- Type 2 diabetes

## *Risk Factors - Modifiable*

- Smoking
- Heavy alcohol consumption
- Physical inactivity and obesity
- Diet high in red or processed meat coupled with low intake of fruits and vegetables

# COLON CANCER SCREENING

## Screening 45 – 75

### Ages 76-85

- Talk to your doctor

### Ages 86+

- No longer recommend screening

**Talk to your doctor earlier if  
high risk**

**The best test is the one you get!**

## Stool tests – done at home

- Yearly: FIT, gFOBT
- Every 3 years: DNA testing (Cologuard)

## Visual tests

- Every 10 years: colonoscopy
- Every 5 years: CT colonography, flexible sigmoidoscopy

Abnormal stool, CT or sigmoidoscopy tests are all followed up with colonoscopy.

# CERVICAL CANCER SCREENING

## Start screening age 25

Primary HPV (human papillomavirus) every 5 years

- If primary HPV test is not available, a co-test of HPV test + Pap test every 5 years.
- If HPV test is not available, Pap test every 3 years.

**At age 65, with 10 years of normal results, stop screening.**



# CANCER PREVENTION: HPV Vaccine

6

A common virus that can cause 6 types of cancer



Vaccine works best when given to boys & girls 9-12

Best age to build immune response & long before infection exposure

90%

The vaccine can prevent 90%+ of HPV cancers



2 doses, 6-12 months apart.\*

# SKIN CANCER RISK FACTORS

ANYONE CAN GET SKIN CANCER, BUT BE EXTRA CAREFUL IF YOU...



# SCREENING AND THE DERMATOLOGIST

## How often to get screened

- Although the American Cancer Society does not have guidelines for the early detection of skin cancer, **knowing your own skin** is important to finding skin cancer early. You should know the pattern of moles, blemishes, freckles, and other marks on your skin so that you'll notice any new moles or changes in existing moles.
- See a doctor immediately if you **notice warning signs**.

## What to expect at the dermatologist

- Should take at least 15 minutes
- Use of a dermascope in a well lit room
- Make sure all areas of your body are examined, including your palms, nail beds, soles of your feet, scalp, ears, and back
- **Know your own pattern of moles, blemishes, freckles, and other marks – speak up about your uncertainties!**





# SELF CARE: ABCDE METHOD

- Evenly colored brown, tan, or black spot
- Can be either flat or raised
- Can be round or oval
- Less than ¼-inch in diameter (width of a pencil eraser)
- Present at birth or appear later, but stays the same after its appearance
- Use the ABCDE method to determine if a mole is questionable:
  - Asymmetry
  - Border
  - Color
  - Diameter
  - Evolving



# Reduce your cancer risk

- Eat nutritious foods, limit or avoid processed foods and red meat.
- Get to and stay at healthy weight
- Get moving
- Stay away from tobacco
- Limit alcohol
- Protect your skin from sun exposure; check your skin for changes
- Know yourself, family history and your risk
- Get regular check-ups and screenings



# TOP BARRIERS TO CANCER SCREENING



## No Symptoms (27%)

They don't have symptoms, so they don't seek screening.



## Cost (18%)

They are concerned about the affordability of screening.



## Procrastination (22%)

They will be screened eventually, but they have not done it yet.



## COVID-19 (14%)

They are reluctant to visit a medical facility during the pandemic.




## Lack of Recommendation (20%)

Their doctor or health care provider has not recommended it.



## Lack of Insurance (13%)

They don't have insurance, so they are concerned about the cost of going to the doctor.

- 
- ✓ Find cancer early when it's easier to treat.
  - ✓ Regular screening tests can improve and save your life.



# More than a quarter of people with cancer have experienced delays in cancer care due to the pandemic.

Delays in cancer screening, diagnosis, and treatment due to reduced health care access will likely result in a short-term drop in cancer diagnoses followed by increases in late-stage diagnoses and preventable cancer deaths.

Source: *Cancer Facts & Figures 2021*. Atlanta: American Cancer Society, 2021

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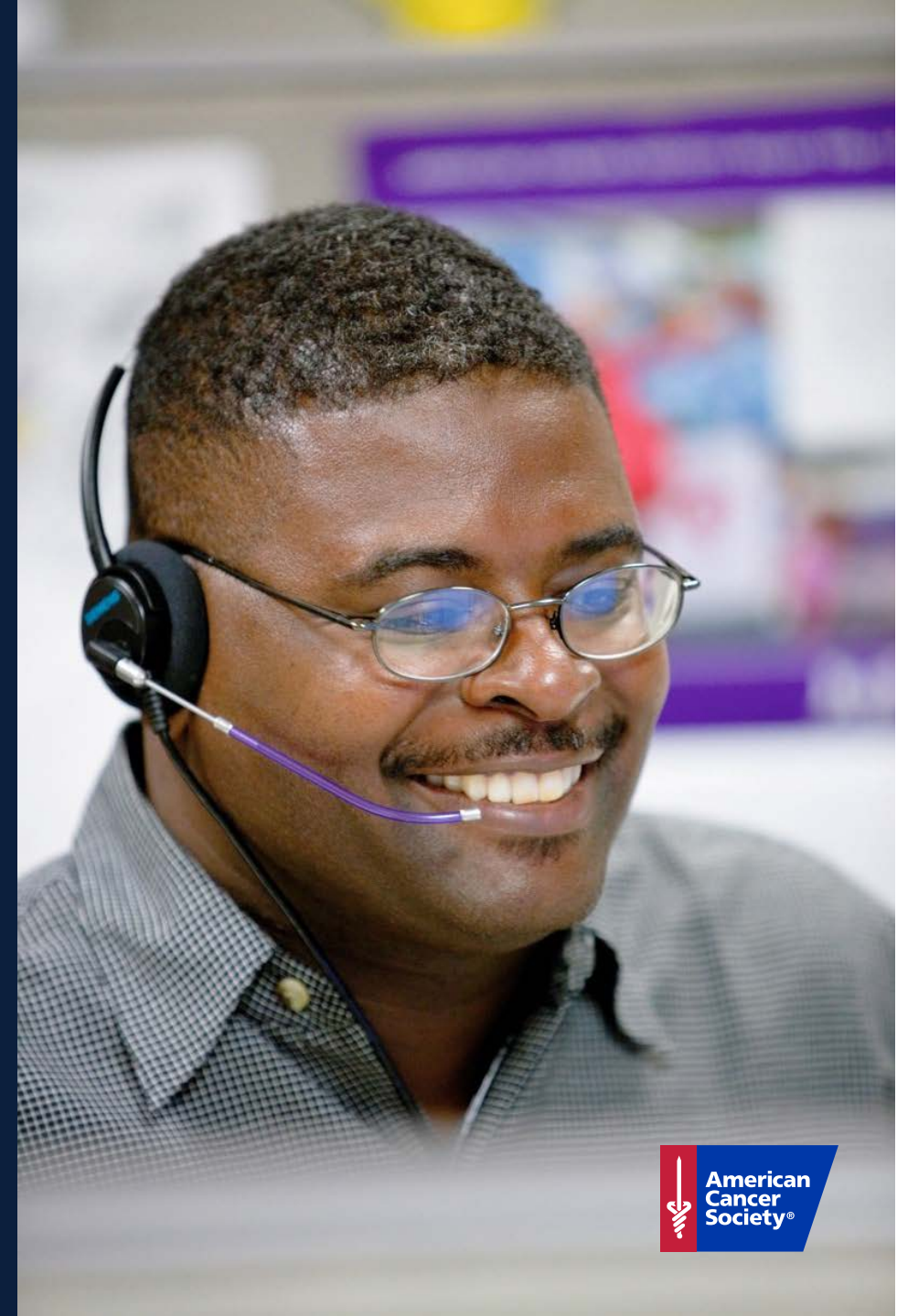
# National Cancer Information Center

Your American Cancer Society is available  
24/7 when you're dealing with cancer

- Cancer Information Specialists
  - Nurse Support
  - Health Insurance Assistance Team
  - Smoking Cessation Assistance & Resources
- 

Staff can answer questions about a diagnosis, identify community resources, provide information on clinical trials, programs and services. Assistance in English, Spanish, and 200 other languages via translation service.

1-800-227-2345



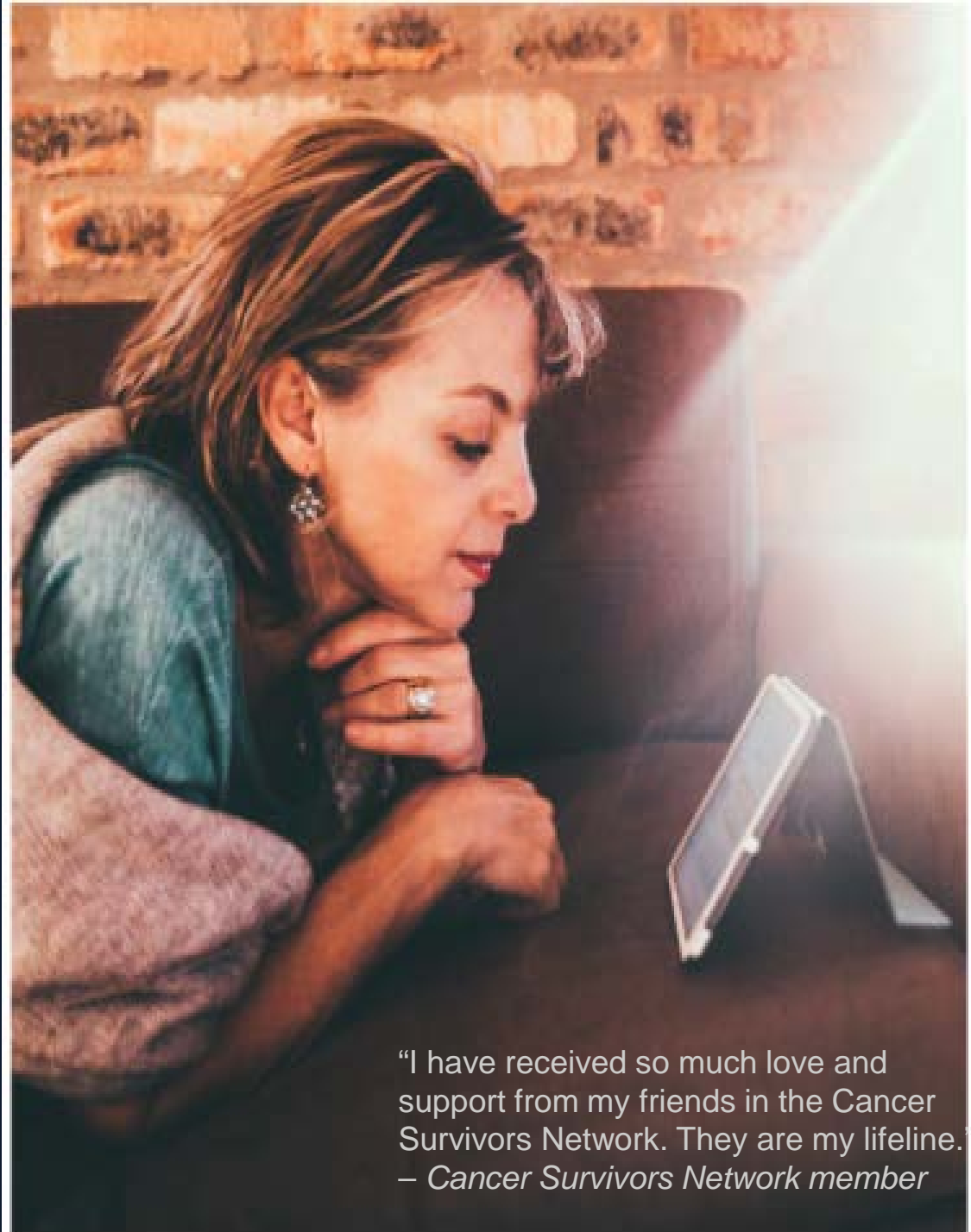
# Cancer Survivors Network

## Support for survivors & caregivers

- **Safe, online community**
- **Share stories, ask questions, get support**
- **Chatroom and 40+ Discussion Boards**

CSN members can also send private messages to other members, build their own support network, post blogs, and more.

To register for a free CSN account, visit [csn.cancer.org](https://csn.cancer.org).



“I have received so much love and support from my friends in the Cancer Survivors Network. They are my lifeline.”  
– *Cancer Survivors Network member*



# Reach To Recovery® Program

Support for newly diagnosed breast cancer patients

- Online support from a trained volunteer who has survived breast cancer
- One-on-one support with diagnosis, treatment side effects, talking with friends and family & more
- Online profile and match with volunteer of similar type of breast cancer, stage and treatment

Logon to the Reach to Recovery website or mobile app to create your online profile.

- Visit [reach.cancer.org](https://reach.cancer.org)
- Search **ACS Reach to Recovery** on Google Play or the App Store



*“My Reach To Recovery volunteer was very helpful, and made me feel like everything I’m feeling is completely normal.”  
- Breast cancer survivor*

## Road To Recovery® Program

Volunteers provide transportation to help patients undergoing cancer treatment get to and from medical appointments.

- Transportation based on volunteer availability
- Background checks on all volunteer drivers
- Sanitation kits located in each car



Road to Recovery was suspended due to Covid-19. Based on Covid rates, plans are to re-launch Road to Recovery in 2022.



AMERICAN CANCER SOCIETY'S

# 2022 Events

## Climb to Conquer Cancer

Phoenix: Saturday, February 26th, 2022 - South Mountain Park

- [Phoenixclimb.com](http://Phoenixclimb.com)

Flagstaff: Saturday, August 20th, 2022 – AZ Snowbowl Ski Resort

- [Flagstaffclimb.com](http://Flagstaffclimb.com)

## Relay For Life Events

Sun Cities: Sunday, February 20th, 2022 – Beardsley Park

- [Relayforlife.org/thesuncitiesaz](http://Relayforlife.org/thesuncitiesaz)

West Valley: Saturday, April 9th, 2022 - Centennial High School

- [Relayforlife.org/glendaleaz](http://Relayforlife.org/glendaleaz)

East Valley: Saturday, April 23rd, 2022 – Perry High School

- [Relayforlife.org/eastvalleyaz](http://Relayforlife.org/eastvalleyaz)

Quad Cities: Friday, June 3rd, 2022 – Prescott Valley Civic Center

- [Relayforlife.org/quadcitiesaz](http://Relayforlife.org/quadcitiesaz)



## Making Strides Against Breast Cancer

Saturday, October 22nd, 2022 - Tempe Beach Park

- [Makingstrideswalk.org/phoenixaz](http://Makingstrideswalk.org/phoenixaz)



National Presenting Sponsor



CLIMB TO CONQUER  
CANCER



**Fit2Be**  
CANCER **2** FREE\*

"Fit2Be is a fun, simple, virtual fundraising effort to promote cancer prevention by empowering healthy activity in the workforce while also raising money for the American Cancer Society. Fit2Be will kick off on April 7, 2022 with the CEO challenge as well as 3-week Employee Challenge where employees can get active and fundraise for ACS."

# Employer Resources – Cancer in the Workplace

- [Employee Tip Sheet](#)
- [HR Tip Sheet](#)
- [Supervisor Tip Sheet](#)
- [Coworker Tip Sheet](#)



# QUESTIONS

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