



## DEADLY TO IGNORE

Each year in the United States 30,000 new cancer cases of the oral cavity and pharynx (lip, salivary glands, mouth and throat) are diagnosed. In California alone more than 15,600 people were diagnosed with oral cancers from 1992-1996. In California 4,390 people died from oral cancer from 1992-1996. These cancers account for almost four percent of all malignant cancers.

Tobacco (including smokeless tobacco) and alcohol are the major risk factors for oral cancer. Recent studies show that smoking and drinking are independent risk factors for oral cancer that produce a synergistic effect when combined. Past and current research indicates that poor diet and sun exposure also may contribute to an increased risk for oral cancer.

The California Behavioral Risk Factor Surveillance System (BRFSS) included questions on oral and mouth cancer screening in 1997 and 1998. These questions were funded by the California Tobacco Control Section and the Office of Oral Health. The data were combined and weighted to the 1990 California population.

Only 26 percent of California adults reported hearing of a test for oral or mouth cancer, and 16.9 percent reported having had a test. When asked to identify an early sign of oral or mouth cancer, the most common

response was a sore or lesion. When those who never had a test for oral or mouth cancer were asked why not, the most common response was "no reason to have one." When asked about specific risk factors, over 90 percent correctly responded that tobacco use increased the chances of oral or mouth cancer.

These results show that California adults need more education about the risk factors, signs and symptoms of oral or mouth cancer. They also need to be aware of the need for and be encouraged to have an oral or mouth cancer screening exam.

### Sources:

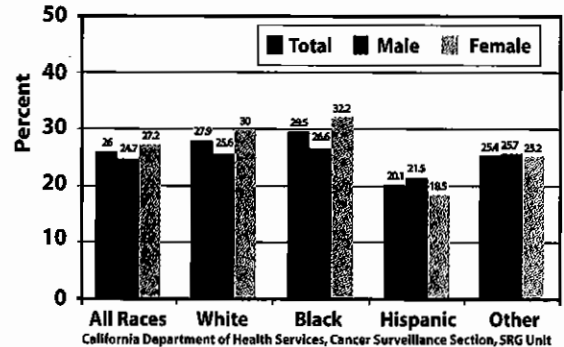
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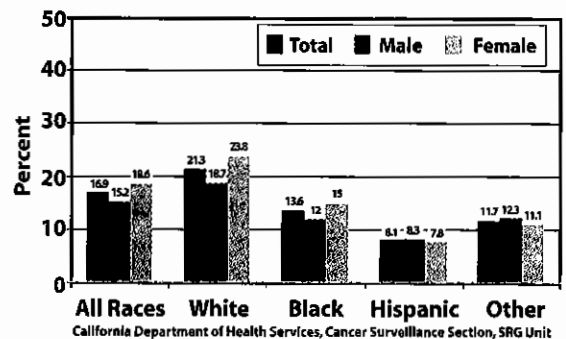
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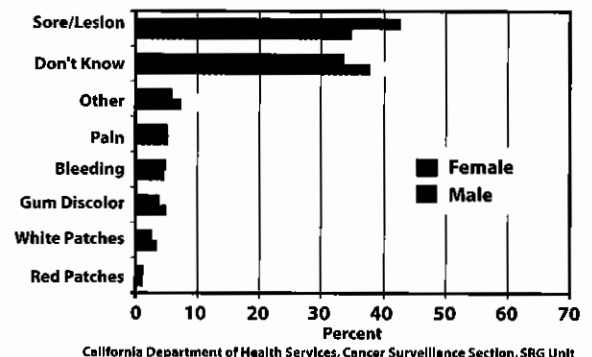
Percent of Adults Who Ever Heard of a Test or Exam for Oral or Mouth Cancer by Sex and Race/Ethnicity, California, 1997-1998



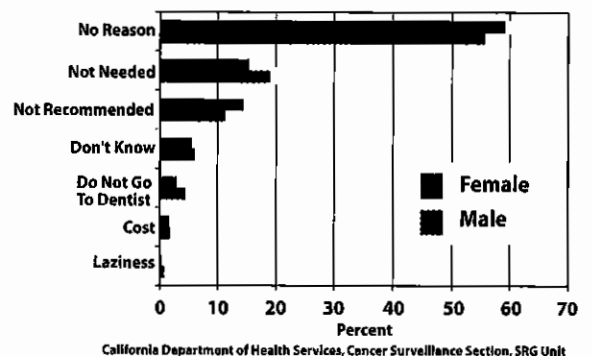
Percent of Adults Who Ever Had a Test or Exam for Oral or Mouth Cancer by Sex and Race/Ethnicity, California, 1997-1998



"What is One Early Sign of Oral or Mouth Cancer?" by Sex, California 1997-1998



"What is the Most Important Reason Why You Never Had an Oral Cancer Exam?" by Sex, California 1997-1998



The California Behavioral Risk Factor Surveillance System (BRFSS) is an ongoing effort by the California Department of Health Services (Prevention 2000 Block Grant Funding) in conjunction with the U.S. Centers for Disease Control and Prevention (CDC) to assess the prevalence of and trends in health-related behaviors in the California population aged 18 years and older. It is supported in part by funds from Cooperative Agreement No. U58/CCU910655-06 from CDC, the U.S. Public Health Service, and part by funds from the California Department of Health Services, Tobacco Control Section and other programs and state departments. Data are collected monthly from a random sample of California adults living in households with telephones. The BRFSS database contains information on Californians from 1984 through the present.

The BRFSS questionnaire is developed each year by the CDC in collaboration with participating state agencies. Wherever possible, questions have been selected from previously conducted national surveys for comparability. The questionnaire has three components. The first component consists of a core set of questions that are administered by all states participating in the BRFSS collection effort.

The second component of the questionnaire consists of a series of topical modules developed by the CDC. States have the option of adding as many modules as they wish to the core questionnaire each year. California has used several of the CDC modules, although the same modules have not been used consistently across all years of the survey.

The final component of the questionnaire consists of questions designed and administered by individual states to address issues of local concern. These have been revised annually in California to address the needs of as many programs as possible. However, the time constraints of a telephone interview have limited the number of questions that can be placed on the survey in any one year.

Participants in the California BRFSS are asked about a wide variety of behaviors such as seat belt use, exercise, weight control, diet, tobacco and alcohol consumption, utilization of cancer screening procedures and other preventive measures. They also are asked for basic demographic information such as age, race/ethnicity, marital and employment status, household income, and education. Participation in the BRFSS is completely voluntary and anonymous.

The age, race/ethnicity, and sex characteristics of the BRFSS sample differ to some extent from the age, race/ethnicity, and sex characteristics of the California population. Weighting adjustments are used to compensate for these differences. Prior to analyzing the BRFSS data, the sample is weighted so that age, race/ethnicity, and gender composition match that of the California population. This allows the findings to be generalized to the California population.

For more information on the BRFSS, contact Holly Hoegh, California Department of Health Services, Cancer Surveillance Section, SRG Unit (916) 779-0334, [holly@ccr.ca.gov](mailto:holly@ccr.ca.gov).