Summary

During the period 1950-65, there were statistically significant average annual increases in the age-adjusted incidence rates for cancer of the large intestine, bronchus and lung, prostate and bladder among males; for cancer of the bronchus and lung, cervix, corpus and bladder among females; and significant decreases in cancer of the stomach and rectum among both sexes. The increases for cancer of the bronchus and lung, cervix and corpus and the decrease for stomach cancer were all highly significant. The increase in cancer of the corpus was associated with a decline in the incidence of uterine cancer "not otherwise specified." Female breast cancer also showed a rising trend in the 1950-65 period.

For the most part, the incidence rate trends in 1950-65 represented continuations of the trends in the 1935-50 period for the 10 sites studied. Cancer of the large intestine showed a highly significant increase for both sexes in the 1935-50 period as did bladder cancer among males. Cancer of the rectum, which increased for both sexes and cervical cancer, which was nearly stable, displayed markedly different trends in the 1935-50 diagnosis period as compared to the later period.

While mortality rates generally followed the trends in the incidence rates, there were decreases in the mortality rates for large intestine, breast, uterine, bladder and prostatic cancer in spite of increased incidence rates for these sites.

A comparison of the Connecticut data with that from Alameda County, California showed many similarities. There were differences noted for cancer of the prostate and lung and bronchus in males.

References

3. Ibid.

Mr. Sullivan is Statistician, Connecticut State Department of Health. Dr. Christine is Director, Connecticut Tumor Registry, Connecticut State Department of Health. Mr. Connelly is Biostatistician, Biometry Branch, National Cancer Institute, and Dr. Barrett is Deputy Commissioner, Connecticut State Department of Health, 79 Elm St., Hartford, Connecticut, 06115. This study was supported in part by Public Health Service Research Grant No. CA09808 from the National Cancer Institute. This paper was submitted for publication in December, 1970.

Erratum

The paper Oral Contraceptive Use in Patients with Thromboembolism following Surgery, Trauma, or Infection, by G. R. Greene, M.D., M.P.H., and P. E. Sartwell, M.D., M.P.H., Vol. 62, No. 5, was supported by the Food and Drug Administration, Contract Number FDA 67-10; the Family Planning Evaluation Activity of the Epidemiology Program, Center for Disease Control, Atlanta, Georgia; and the Population Council, through Grant Number M68.06.