

Prostate Cancer in Minnesota

FACTS AND FIGURES

About prostate cancer

The prostate gland is part of the male reproductive system. The prostate produces and secretes prostatic fluid carried in semen. Almost all prostate cancers start when cells in the gland grow out of control. Prostate cancer most often does not have any symptoms but can be detected by a prostate specific antigen (PSA) test.

Most prostate cancers are slow growing. However, a small percentage of prostate cancers are aggressive, progress quickly to advanced stage, and are often fatal.¹⁻³ This cancer is the leading cancer diagnosis in Minnesota males and the second leading cause of cancer death.

Screening

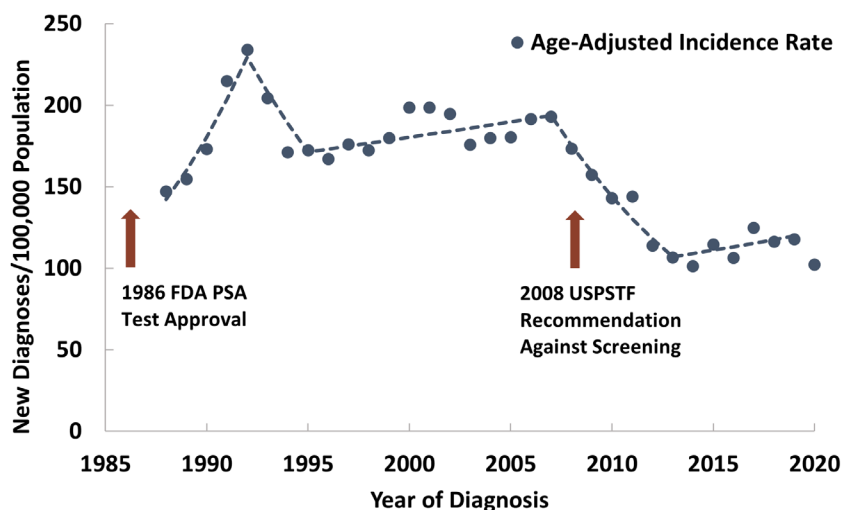
PSA screening has resulted in diagnosing slow growing prostate cancers that would not have caused symptoms or death. To account for the harms from over-diagnosing and over-treating prostate cancer and the small reduction in prostate cancer mortality, in 2018, the U.S.

Preventive Services Task Force (USPSTF) recommended that individuals talk with a health care provider about their risk of prostate cancer and if they should get screened.¹

The USPSTF has identified two populations at high risk for prostate cancer including, African American males, and those with a family history of prostate cancer.¹ Research suggests other factors may affect prostate cancer risk.⁴

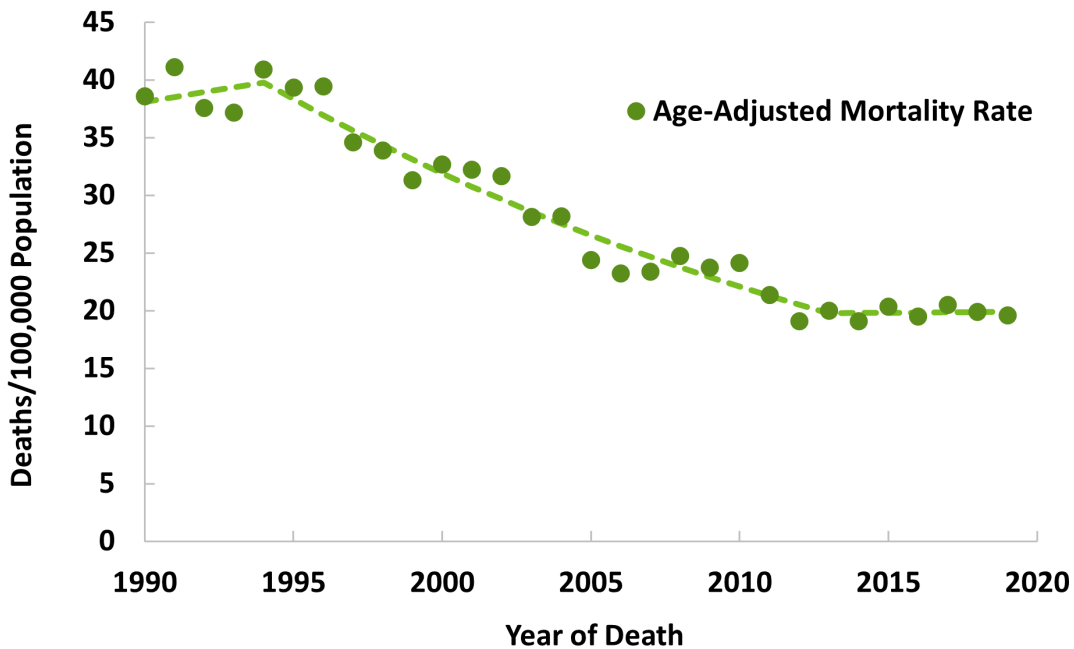
Prostate cancer trends

Prostate cancer incidence (new diagnoses) fluctuated widely since 1988, reflecting changes in prostate cancer screening practices.



Incidence rates quickly rose to a peak in 1991³ after PSA testing was approved for prostate cancer screening in 1986. Between 1991 and 2007, incidence rates fluctuated. Between 2008 and 2013, incidence rates declined sharply after the USPSTF recommended against PSA testing for men 75 or more years of age in 2008 and then for all men in 2012. Since 2013, prostate cancer incidence rates have stabilized.

Prostate cancer mortality (death) rates decreased from 1995 and 2012 and stabilized between 2013 and 2020.

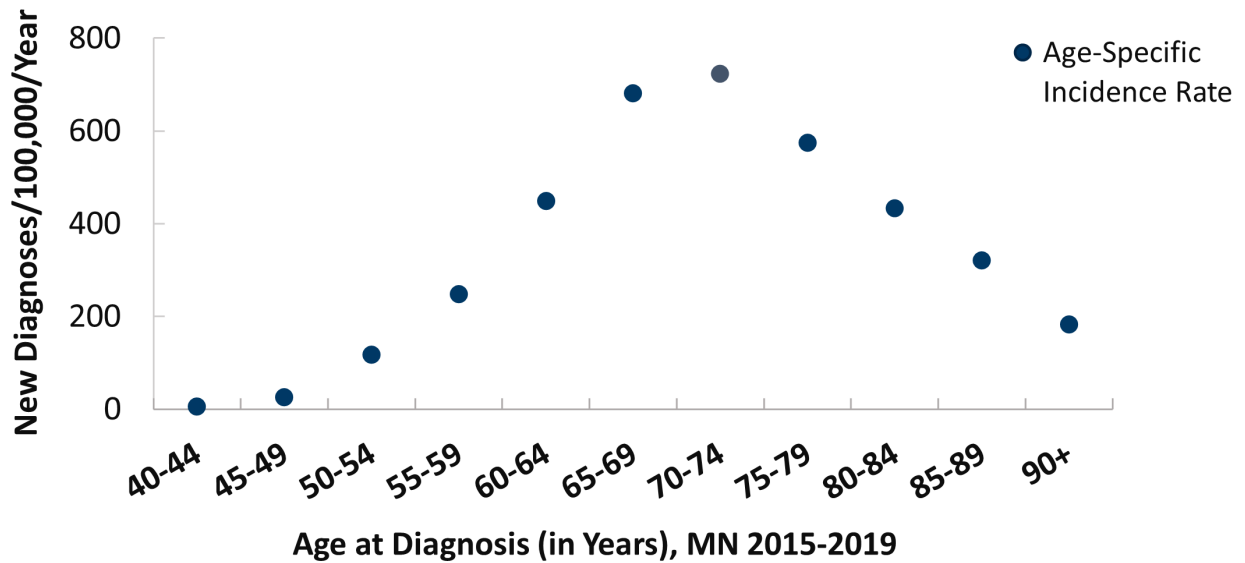


Minnesota’s prostate cancer mortality rate peaked in 1994. Between 1994 and 2013 the mortality rate dropped by half (50%). Since 2013, prostate cancer mortality rates leveled off and have remained stable from 2013 to 2020.

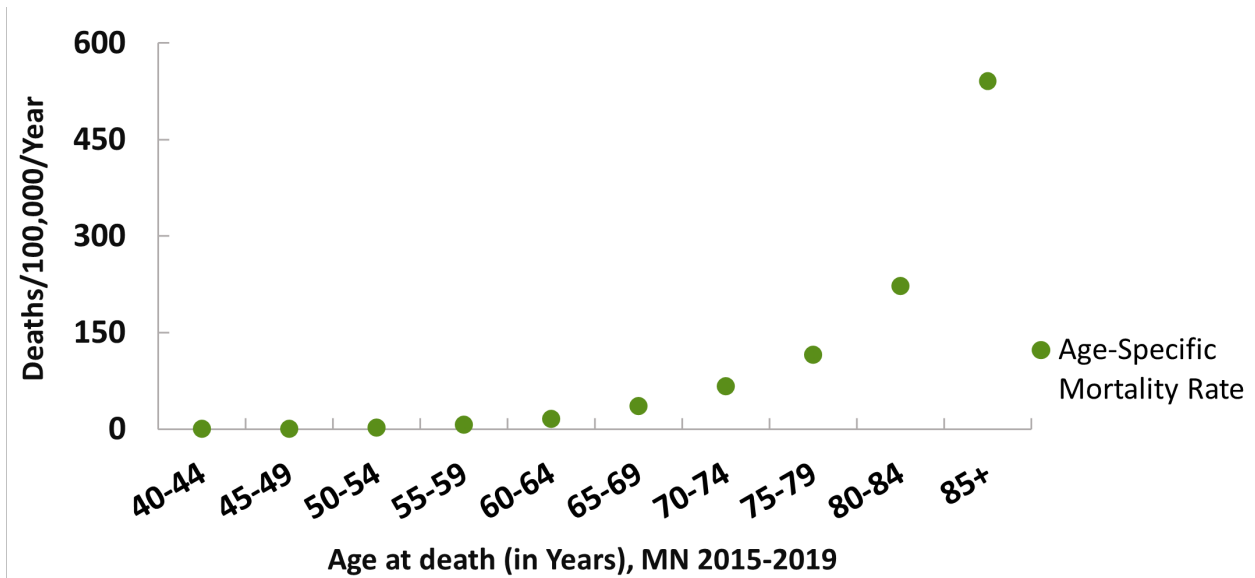
Prostate cancer burden in Minnesota

An average of 3,959 prostate cancers were diagnosed every year in Minnesota between 2015 and 2019. This represents an age-adjusted incidence rate of 116.1 newly diagnosed cases per 100,000 per year. Over this period, an average of 564 males died of prostate cancer each year. This represents an age-adjusted mortality rate of 19.9 deaths per 100,000 per year.

Prostate cancer incidence (new diagnoses) peaks around 70 to 74 years of age.



Prostate cancer mortality (deaths) increases with age.

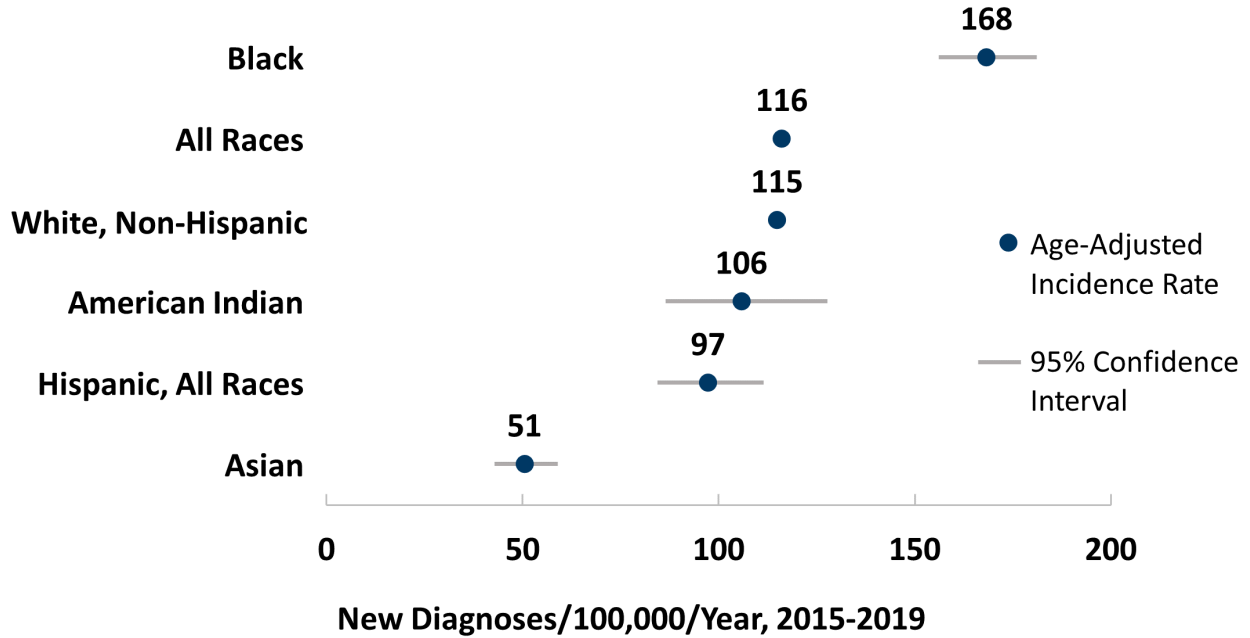


Prostate cancer stage at diagnosis

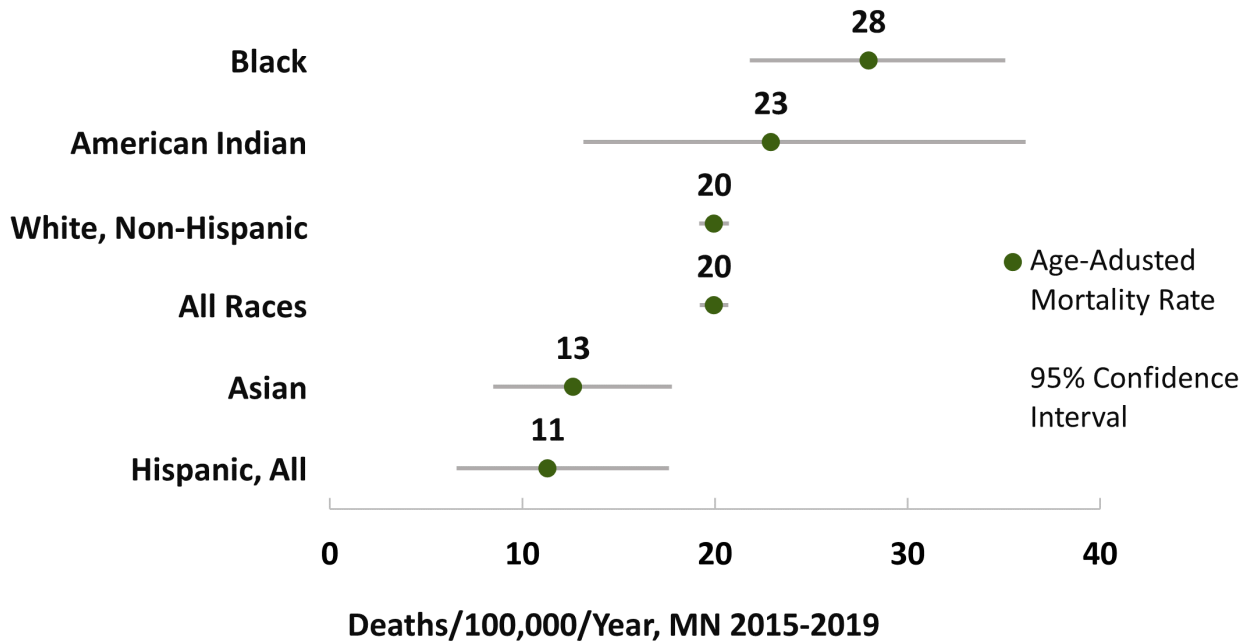
The SEER Summary Stage system classifies cancers according to how far they have spread in the body at the time of diagnosis. The majority (68%) of prostate cancers are diagnosed at the local stage, 17% at regional stage and 9% at distant stage. However, males who are 65 years of age and older are more likely to be diagnosed with distant stage cancer than males younger than 65 years of age.

Prostate cancer differences by race/ethnicity

Prostate cancer incidence is highest in Black males.



Prostate cancer mortality is highest in Black males.



Prostate cancer in the Twin Cities metro vs. non-metro

Between 2015 and 2019, the rate for prostate cancer incidence was slightly higher in the 7-county Twin Cities metro area than in the non-metro (120 vs. 112 new diagnoses/100,000/year). During this period, the mortality rates for the Twin Cities metro and non-metro areas were similar (19.3 vs. 20.4 deaths/100,000/year).

Prostate cancer prevalence (survivors)

Cancer prevalence estimates the number of people in a population who have ever been diagnosed with cancer and remain alive as of a given calendar date. As of Jan. 1, 2020, an estimated 53,770 males in Minnesota were living with a prostate cancer diagnosis. Males with prostate cancer account for a large percentage (37%) of all male cancer survivors in Minnesota.

Prostate cancer survivors can experience various physical and emotional side effects from cancer and its treatment. Some of these effects can include urinary, erectile, and bowel dysfunction; bone fractures and osteoporosis; depression or anxiety; and second cancers.⁵ Cancer survivor care plans are available to survivors and primary care providers to assess and manage these and other effects.^{6,7,8}

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Minnesota Department of Health
Minnesota Cancer Reporting System
625 Robert Street North
PO Box 64975
St. Paul, MN 55164-0975
651-201-5900
health.mcrcs@state.mn.us
www.health.state.mn.us

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