

## URINARY BLADDER

**T**he highest incidence rates for bladder cancer are found in industrialized countries such as the United States, Canada, France, Denmark, Italy, and Spain. Rates are lower in England, Scotland, and Eastern Europe. The lowest rates are in Asia and South America, where the incidence is only about 30% as high as in the United States. In all countries the rates are higher for men than women.

In the SEER regions, for the period 1988 to 1992, the incidence rates are generally three to four times higher in men than in women. Among men, the highest rates are in white non-Hispanics (33.1 per 100,000). The rates for black men and Hispanic men are similar and are about one-half the white non-Hispanic rate. The lowest rates are in the Asian populations. For women, the highest rates are also in white non-Hispanics and are about twice the rate for Hispanics. Black women, however, have higher rates than Hispanic women. The incidence of bladder cancer increases dramatically with age among men and women in all populations. Rates in those aged 70 years and older are approximately two to three times higher than those aged 55-69 years, and about 15 to 20 times higher than those aged 30-54 years.

Mortality rates are two to three times higher for men than women. While incidence rates in the white population exceed those for the black population, such is not the case for mortality where the rates are much closer together. Black women who have a lower incidence of bladder cancer than white women actually die from the disease at a greater rate. This difference in survival between black and white populations reflects the fact that in whites a larger proportion of these cancers are diagnosed at an early more treatable stage. Mortality rates for Hispanic and Asian men

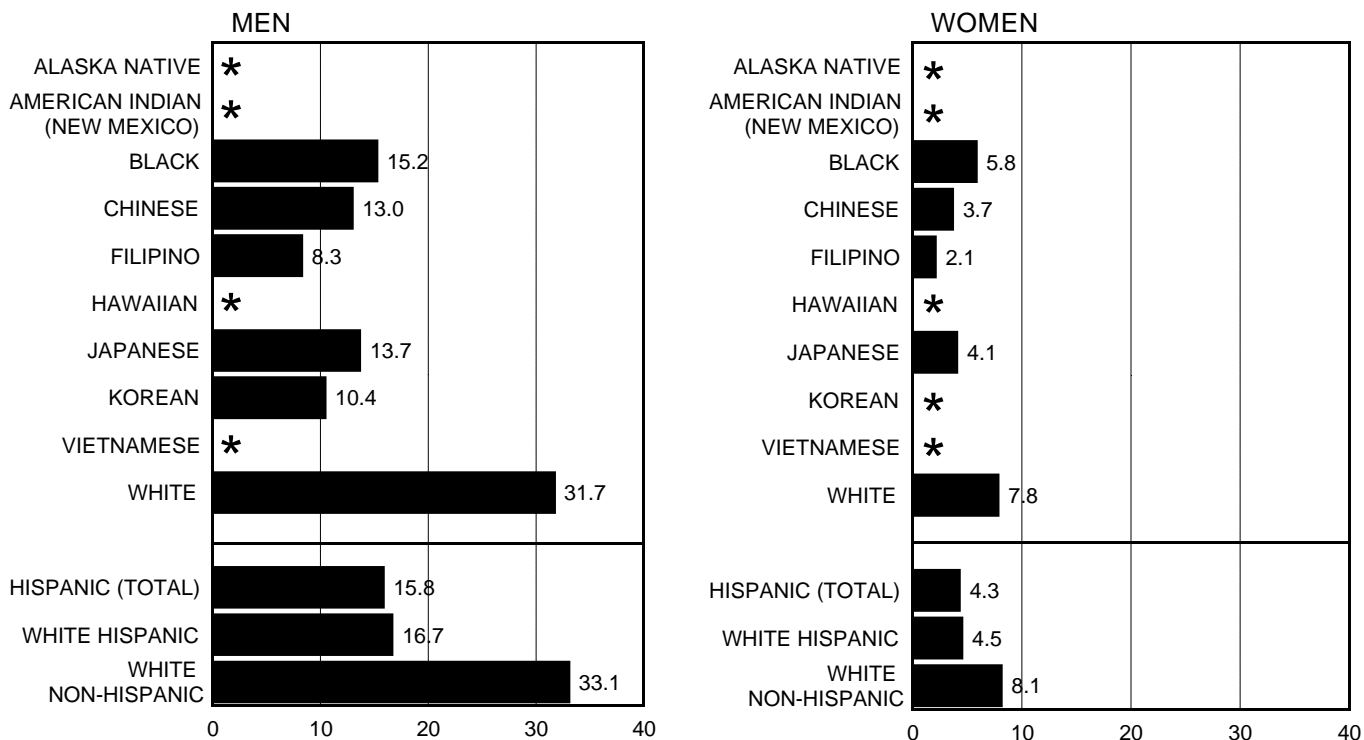
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and women are only about one-half those for whites and blacks.

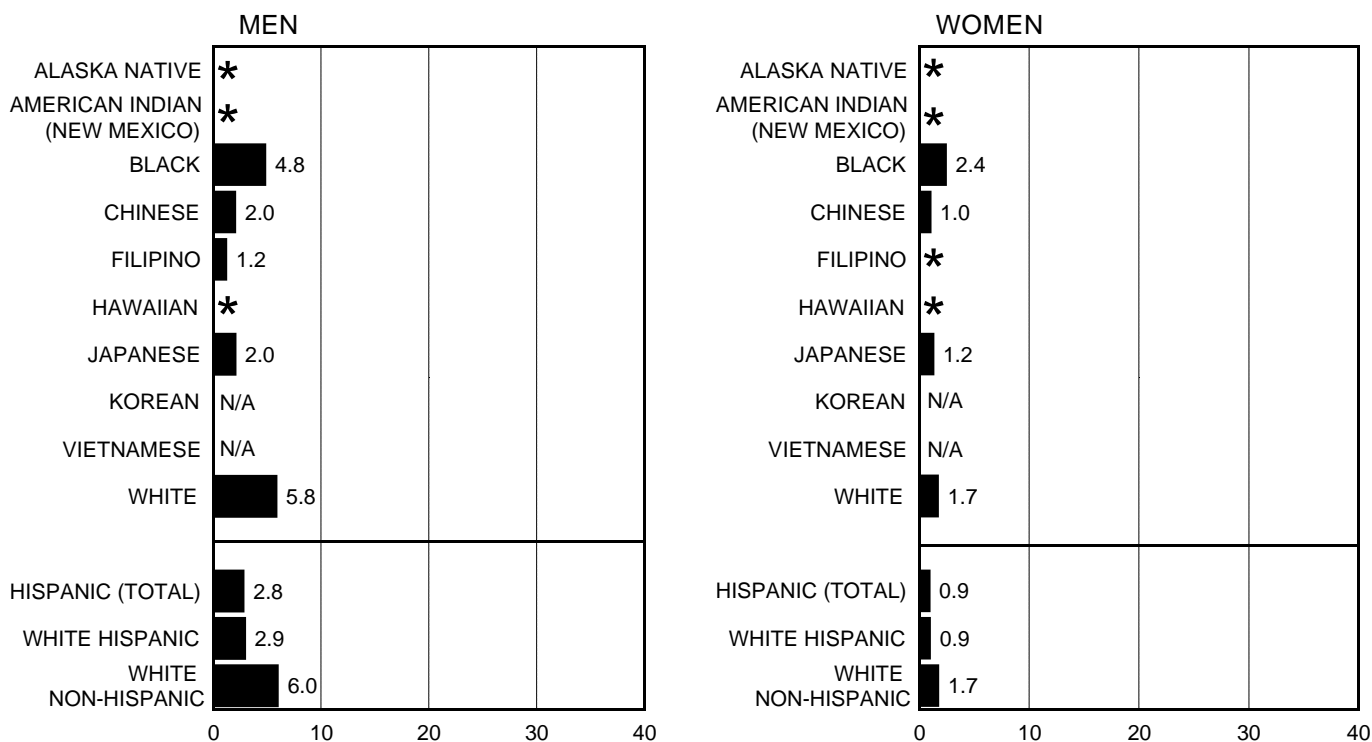
Cigarette smoking is an established risk factor for urinary bladder cancer. It is estimated that about 50% of these cancers in men and 30% in women are due to smoking. Occupational exposures may account for up to 25% of all urinary bladder cancers. Most of the occupationally accrued risk is due to exposure to a group of chemicals known as arylamines. Occupations with high exposure to arylamines include dye workers, rubber workers, leather workers, truck drivers, painters, and aluminum workers. Because of this association with bladder cancer, some arylamines have been eliminated or greatly reduced in occupational settings. Coffee, alcohol, and artificial sweeteners have all been studied as risk factors for bladder cancer, but associations, if they exist, are weak. The greatest prevention strategy is reduction in the consumption of cigarettes. Cigarette use increases one's risk for bladder cancer by two to five times. When cigarette smokers quit, their risk declines in two to four years.

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## SEER INCIDENCE Rates, 1988-1992



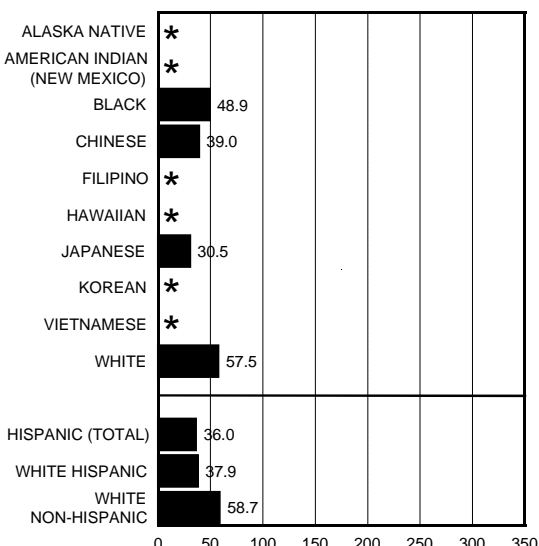
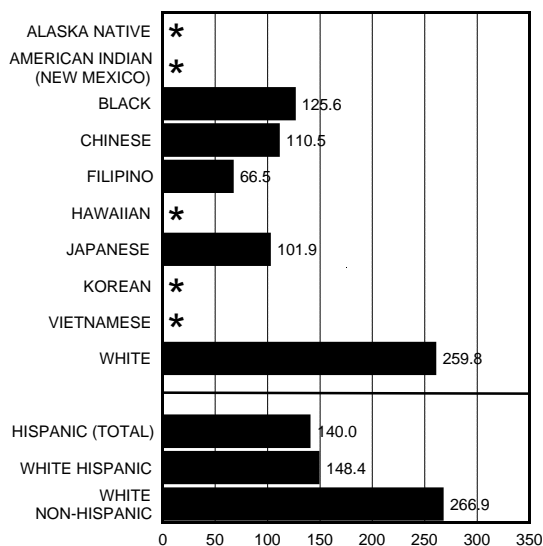
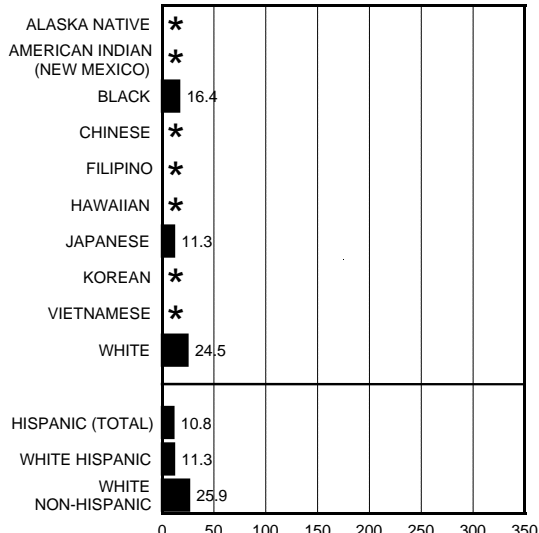
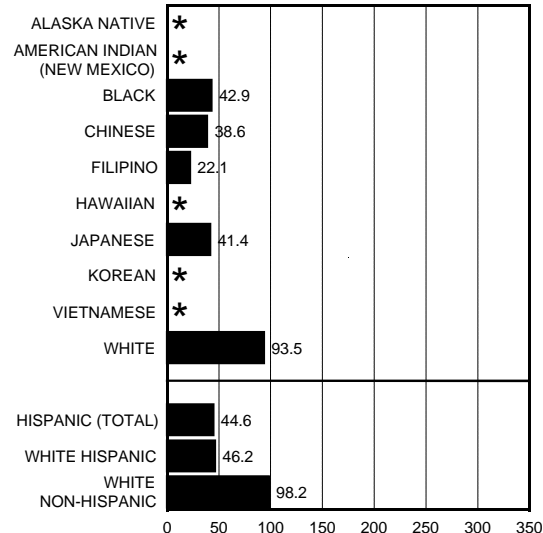
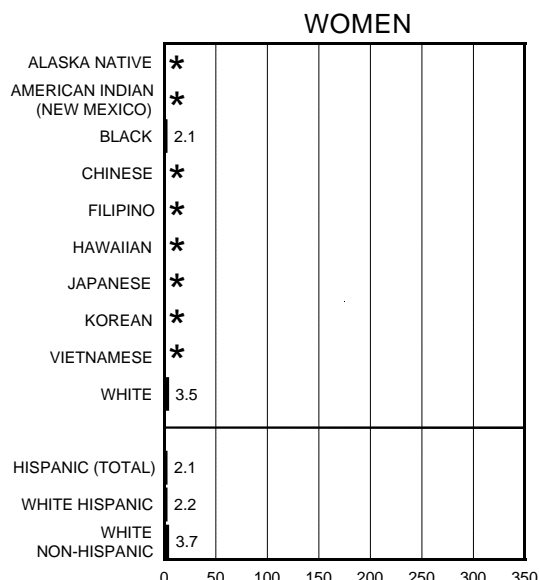
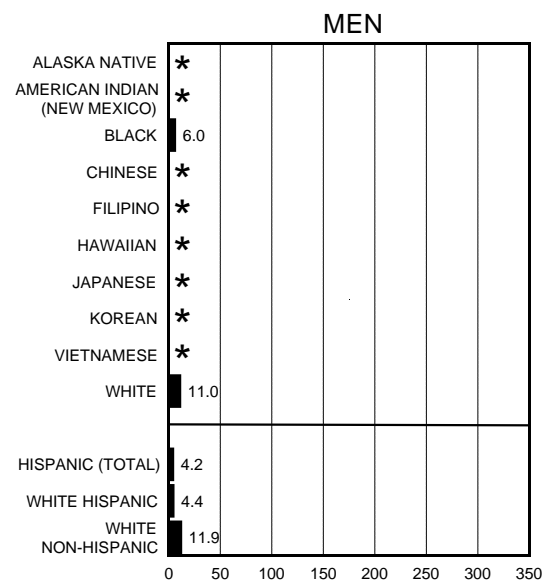
## United States MORTALITY Rates, 1988-1992



NOTE: Rates are "average annual" per 100,000 population, age-adjusted to 1970 U.S. standard; N/A = information not available; \* = rate not calculated when fewer than 25 cases.

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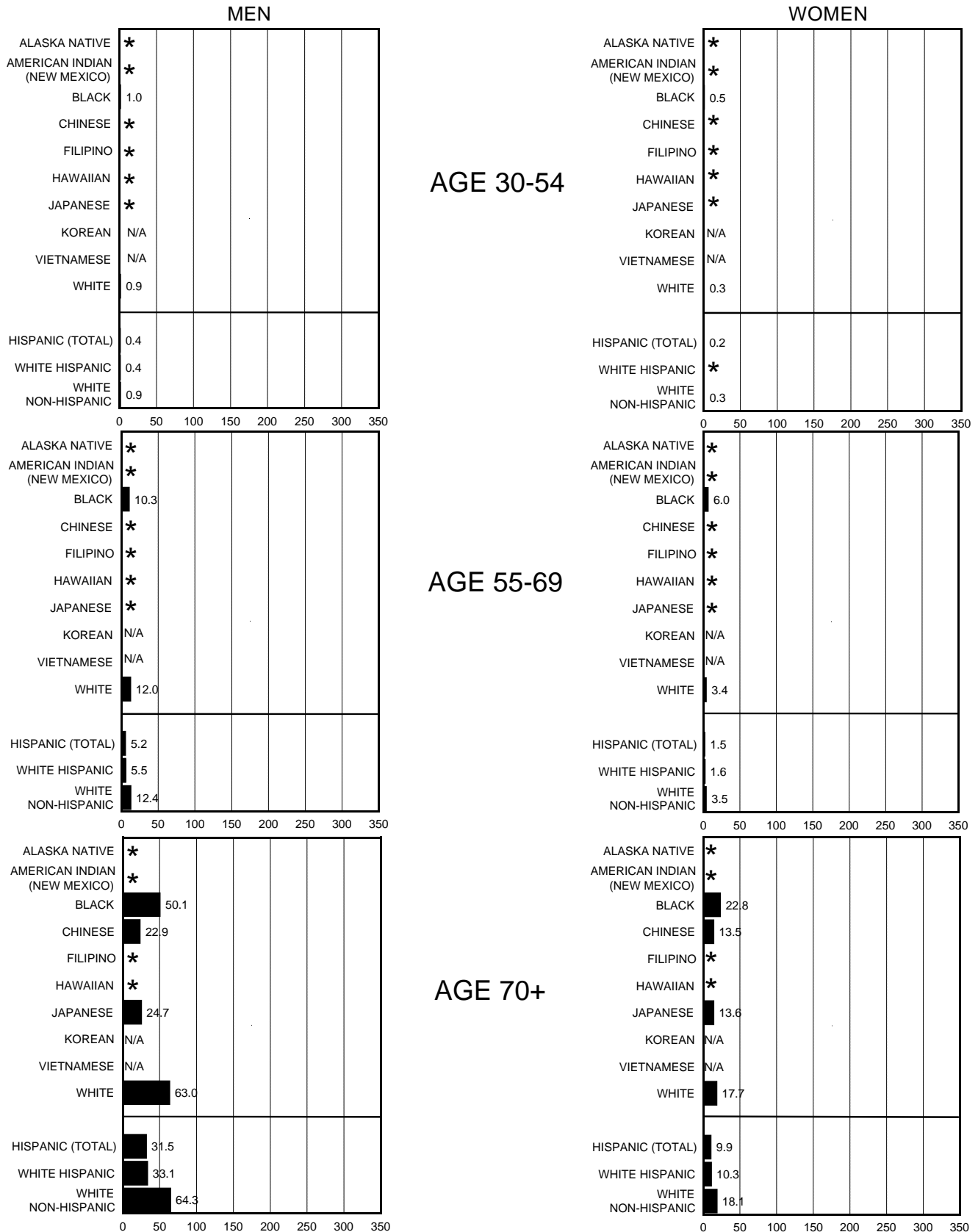
## SEER INCIDENCE Rates by Age at Diagnosis, 1988-1992



NOTE: Rates are per 100,000 population, age-adjusted to 1970 U.S. standard; \* = rate not calculated when fewer than 25 cases.

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## United States MORTALITY Rates by Age at Death, 1988-1992



NOTE: Rates are "average annual" per 100,000 population, age-adjusted to 1970 U.S. standard; N/A = data unavailable; \* = fewer than 25 deaths.