

NASOPHARYNX

Cancer of the nasopharynx is a rare neoplasm in most countries. However, it occurs at high frequencies in China and Southeast Asia. The highest incidence rates in the SEER regions occur among the Chinese. Rates are also high in Vietnamese and Filipino men, two groups that include persons of Chinese heritage. Incidence rates of nasopharyngeal cancer are also available for black, Hispanic

and white men and for white women in the SEER areas. There were too few nasopharyngeal cancers diagnosed between 1988 and 1992 in the other racial/ethnic groups to provide meaningful incidence rates.

The average annual age-adjusted incidence rate of nasopharyngeal cancer in Chinese men, 10.8 per 100,000, is 1.4 times greater than that of Vietnamese men and nearly 2.8 times greater than that of Filipino men. In fact, the rate among Filipino men, although relatively high, is the same as that for Chinese women. Rates of one per 100,000 and lower occur in black men, Hispanic and non-Hispanic white men and non-Hispanic white women.

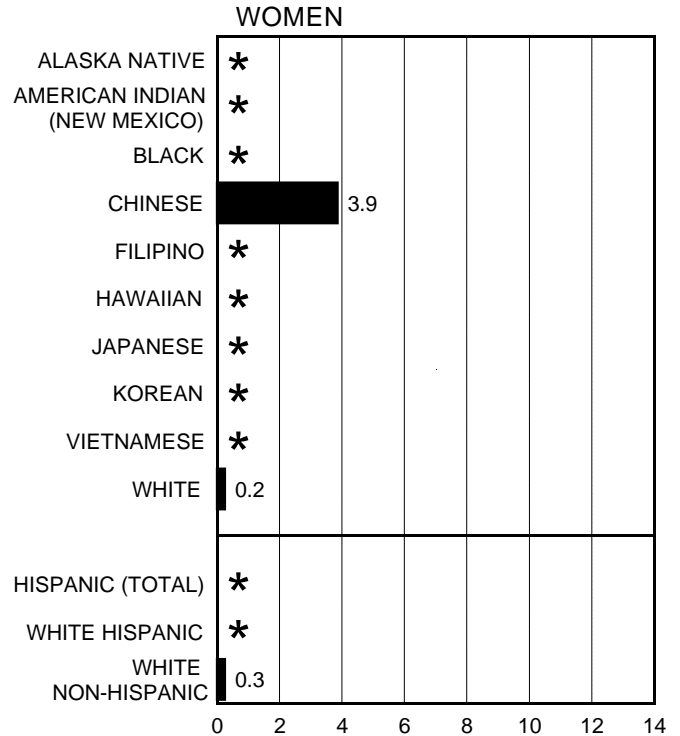
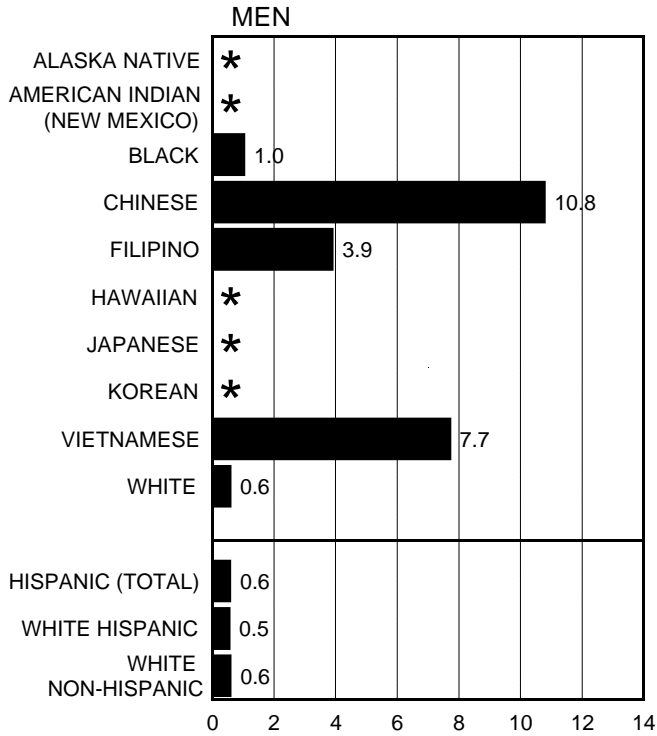
The United States mortality rates for cancer of the nasopharynx reflect patterns similar to those for SEER incidence rates. Mortality is highest in Chinese, lower in Filipinos and lowest among blacks, Hispanics and non-Hispanic whites. No mortality rates are currently available for Vietnamese. Incidence-to-mortality rate ratios vary, with Chinese and Filipinos having higher incidence relative to mortality (2.3 for men in both groups and 3.2 for Chinese women) than other groups (ranging from about 1.7 for white Hispanic men to two for non-Hispanic white men). Incidence and mortality rates for nasopharyngeal cancer increase through the oldest age group, although the small number of cases

precluded the calculation of reliable rates for many populations.

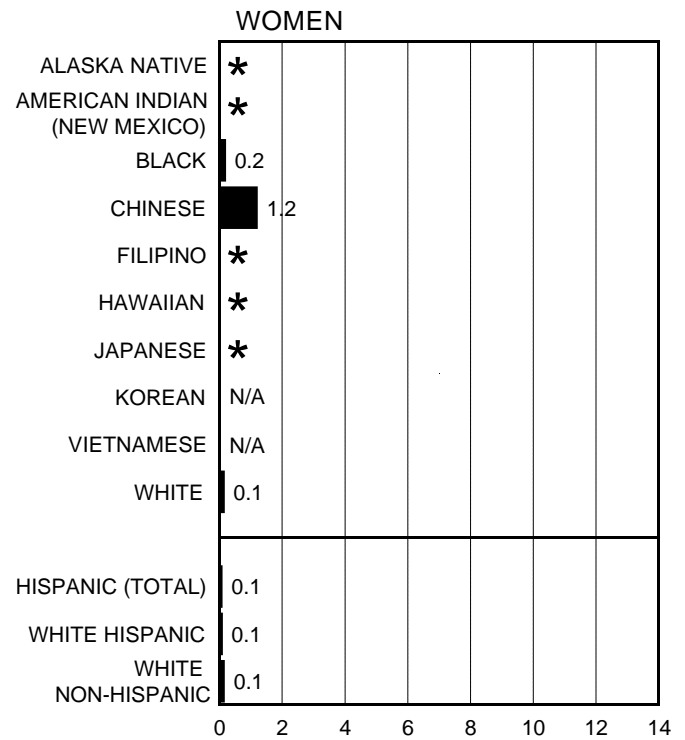
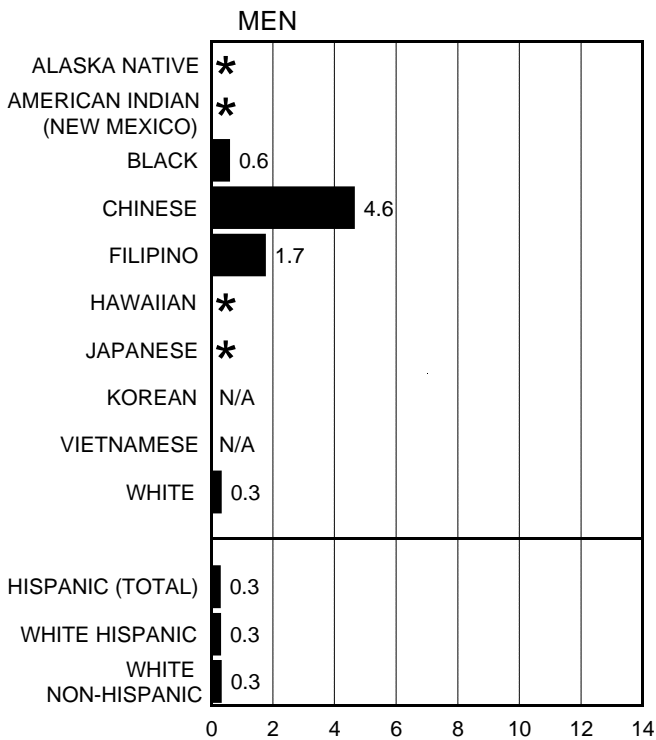
The major modifiable risk factor identified for cancer of the nasopharynx is the consumption of Cantonese salted fish, which is a common food item eaten from early infancy onward by groups with high risk of this disease. Other possible risk factors include extensive exposures to dusts and smoke and regular consumption of other fermented foods. The role of Epstein-Barr virus in the development of nasopharyngeal cancer continues to be explored.

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SEER INCIDENCE Rates, 1988-1992



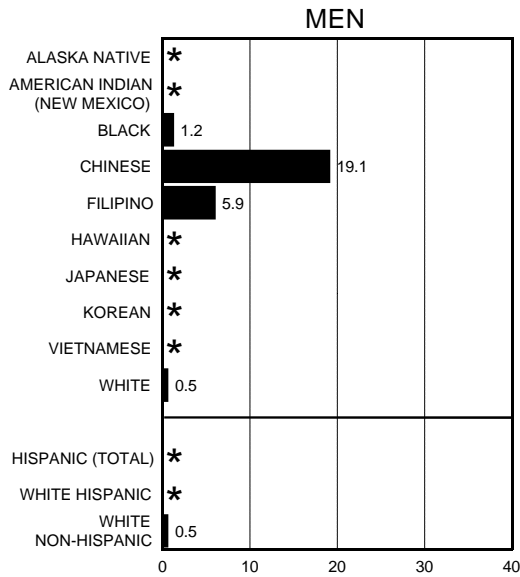
United States MORTALITY Rates, 1988-1992



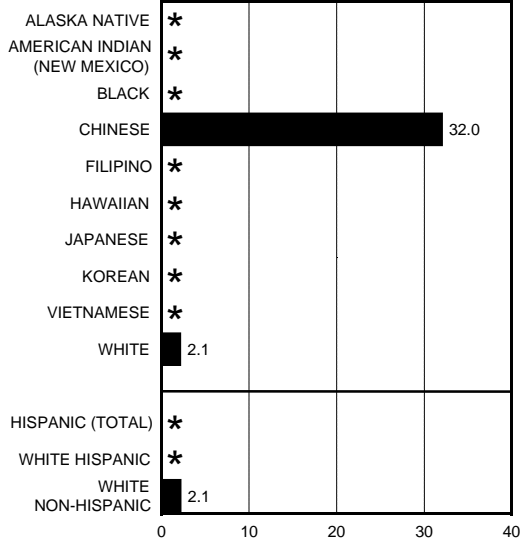
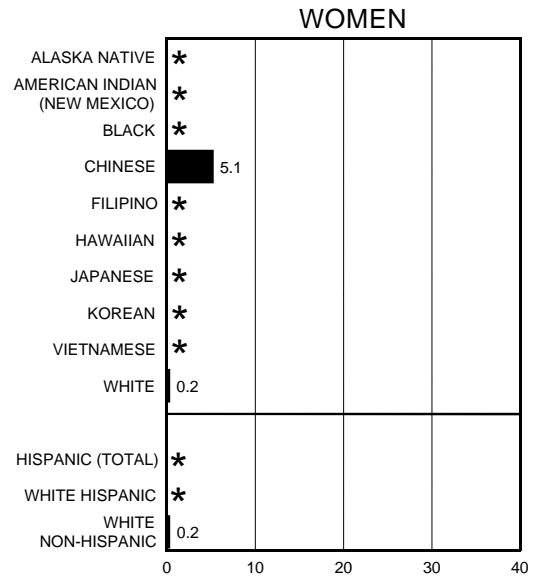
NOTE: Rates are "average annual" per 100,000 population, age-adjusted to 1970 U.S. standard; N/A = information not available; * = rate not calculated when fewer than 25 cases.

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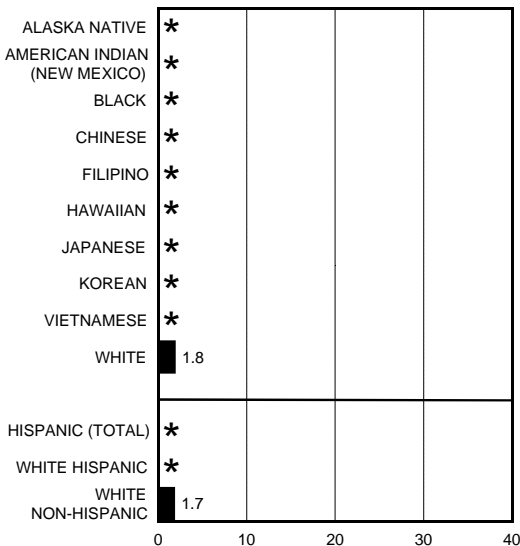
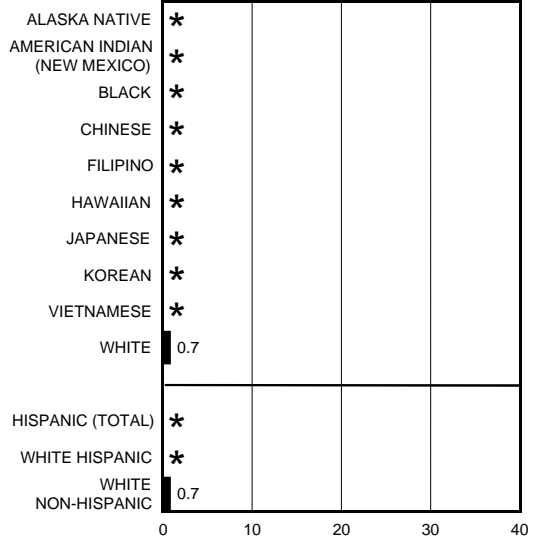
SEER INCIDENCE Rates by Age at Diagnosis, 1988-1992



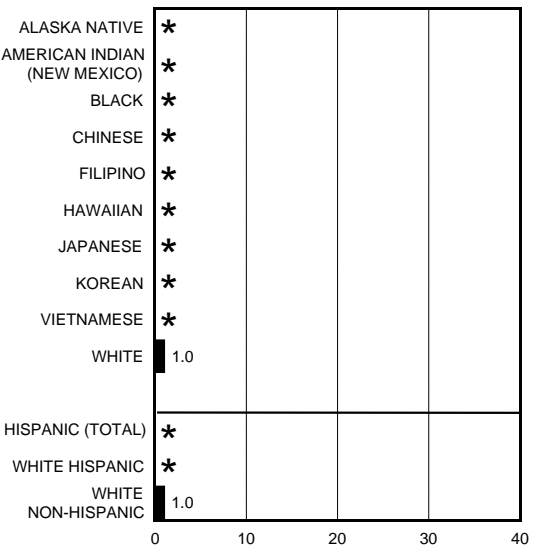
AGE 30-54



AGE 55-69



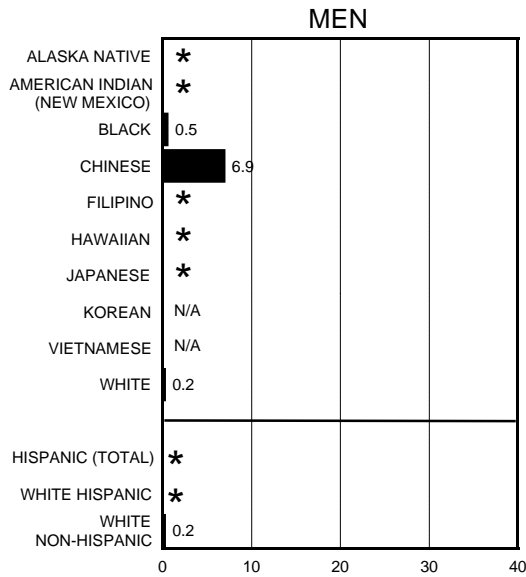
AGE 70+



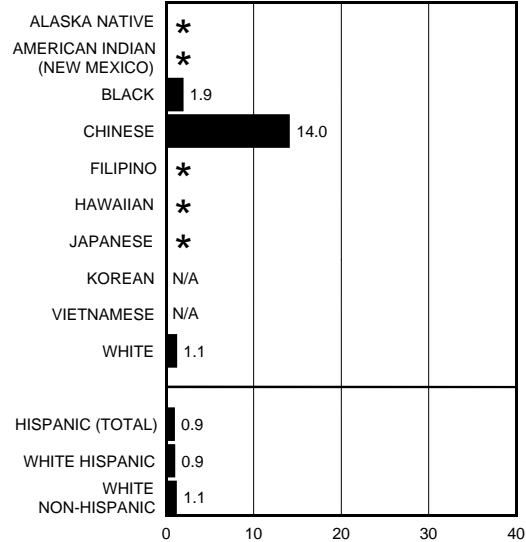
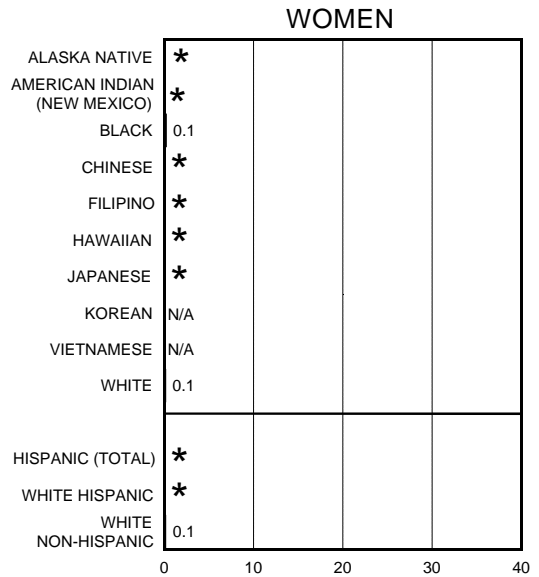
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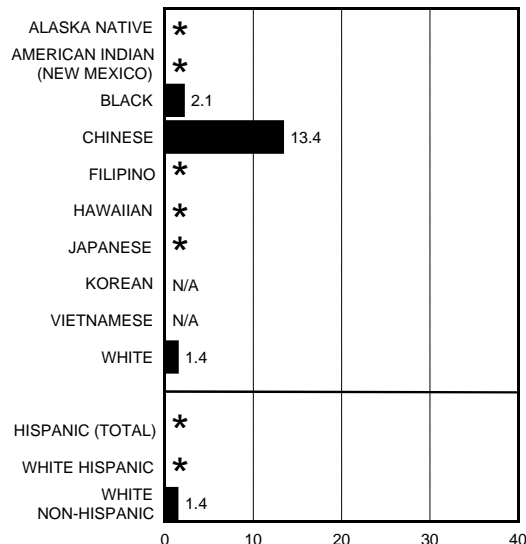
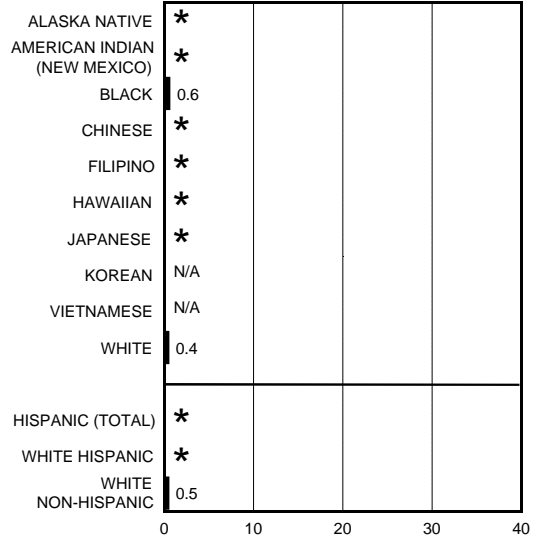
United States MORTALITY Rates by Age at Death, 1988-1992



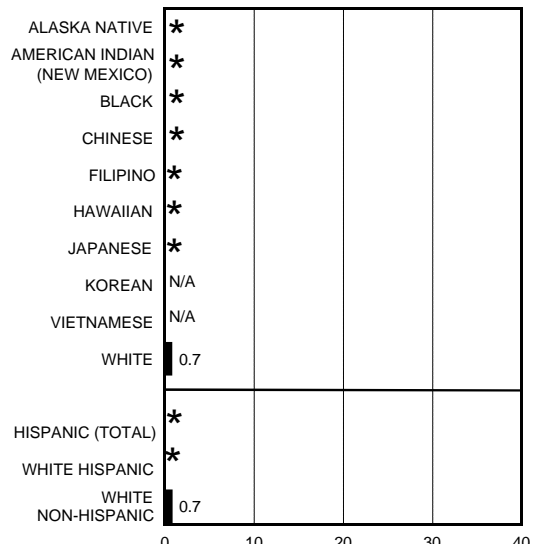
AGE 30-54



AGE 55-69



AGE 70+



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