**KEY FACTS SHEET**

**August 2020**

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**RURAL AND RACIAL DISPARITIES IN COLORECTAL CANCER INCIDENCE AND MORTALITY IN SOUTH CAROLINA 1996 - 2016**

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**PROJECT OVERVIEW**

To examine the burden of colorectal cancer among South Carolina (SC) residents by urban-rural status and race/ethnicity.

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**COLORECTAL CANCER BURDEN OVER TIME IN SC**

- From 1996 to 2016, urban-dwelling residents experienced a larger annual average decline (-2.4%) in colorectal cancer (CRC) incidence over time than rural residents (-1.1%) (Figure A). A similar pattern was true for mortality (Figure C).
- Urban White (-2.6%), urban Black (-2.4%), and rural White (-1.6%) populations experienced significant declines in mortality that was not found among rural Black populations (Figures B & D).

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Healthy People 2020 benchmark
40.0 new colorectal cases per 100,000 persons annually

Disparities in Colorectal Cancer in SC

COLORECTAL CANCER STAGE BY RACE AND RURALITY IN SC

- Local stage cancers are the most treatable and have the highest survival rates, followed by regional stage cancers then distant (cancer moved to new parts of the body).

- Rural residents had a higher percentage of distant staged colorectal cancers compared to urban residents (25.8% vs. 23.6%). Rural residents had fewer local staged cancers, which have the best prognosis for patients (Figure F).

- For both urban and rural residents, Black populations had a higher percentage of distant staged colorectal cancers compared to White populations (26.3% vs. 22.7% respectively in urban and 29.3% and 23.7% respectively in rural).

COLORECTAL CANCER INCIDENCE TRENDS BY RACE, GENDER, AND RURALITY IN SC

- There were no significant average annual declines in CRC incidence among Black rural and urban men and White rural men.

- Urban White men and urban Black women experienced the greatest average annual declines (-2.5%).

- Average annual declines among rural and urban White women and rural Black women were similar (-1.6% to -1.7%).

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