

## Healthy People 2010 Operational Definition

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### **21-6. Increase the proportion of oral and pharyngeal cancers detected at the earliest stage.**

<b>National Data Source</b>	Surveillance, Epidemiology, and End Results Program (SEER), NIH, NCI.
<b>State Data Source</b>	State cancer registries.
<b>Healthy People 2000 Objective</b>	Not applicable.
<b>Changes since the 2000 Publication</b>	Revised baseline (see Comments). Revised target (see Comments).
<b>Measure</b>	Percent.
<b>Baseline (Year)</b>	36 (1990-95)
<b>Target</b>	51
<b>Target-Setting Method</b>	Better than the best racial/ethnic subgroup.  For a discussion of target-setting methods, see Part A, section 4.
<b>Numerator</b>	Number of diagnosed incidents of cancer cases in stage 1 (localized) of the oral cavity and pharynx (ICD-9 codes 140-149).
<b>Denominator</b>	Number of diagnosed incidents of all cancer cases of the oral cavity and pharynx (ICD-9 codes 140-149).
<b>Population Targeted</b>	Resident population (selected areas-see Comments).
<b>Questions Used To Obtain the National Baseline Data</b>	Not applicable.
<b>Expected Periodicity</b>	Annual.
<b>Comments</b>	A description of the SEER program has been published by NCI. <sup>1</sup>  SEER data are based on data from population-based registries in Connecticut; New Mexico; Utah; Iowa; Hawaii; Atlanta, GA; Detroit, MI; Seattle-Puget

Sound, WA; and San Francisco-Oakland, CA.

The original baseline of 35 percent was revised to 36 percent as a result of the expansion of the number of sites added to the SEER Cancer Registry. The target was proportionally adjusted from 50 percent to 51 percent to reflect the revised baseline using the original target-setting method.

See Part A, section 8 for more information on the International Classification of Diseases (ICD).

See Appendix A for focus area contact information.

## References

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1. Ries, L.A.G.; Kosary, C.L.; Hankey, B.F.; et al.; eds. SEER Cancer Statistics Review, 1973-1996. Bethesda, MD: National Cancer Institute, 1999.