

Santa Barbara County
PUBLIC HEALTH
DEPARTMENT

Tri-Counties Regional Cancer Registry

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September 27, 1999

XXXXXXXXXXXXXXXXXX
XXXXXXXXXXXXXXXXXX
Bell Canyon, Ca 91307

Dear XXXXXXXXXXXX

Thank you very much for your call this morning to share your concerns about cancer incidence in your community. Following our phone conversation, I completed a preliminary analysis and would like to share the result with you.

During 1988 to 1996, a total of 129 newly diagnosed invasive cancer cases of all types were observed in census tract 75.03 in Ventura County that includes your neighborhood. For this same period, a total of 124 cases were expected. The difference between 129 and 124 is not significant and reflects normal variation in the occurrence of this type of biological phenomena. For better evaluation of this analysis, please consider the following points:

1. The observed numbers are limited to 1988-1996 period due to the fact that data collection about new cases of cancer is complete for these years. Data collection for 1997 and 1998 are not yet complete and cannot be used.
2. The expected numbers are based on the average regional age, sex, and site-specific incidence rates over the 1990 population counts. Use of the five year average is standard practice and 1990 census is the only accurate population information available for census tracts. Expected numbers for 1990 are multiplied by nine to estimate expected numbers for 1988-1996 period.
3. The analysis used is the Poisson evaluation of the observed and expected numbers at the confidence level of 99%. At this level, the chance of erroneous conclusion is only 1%.

Based on this analysis, I am confident to state that residents of census tract 75.03 in Ventura County that includes your neighborhood, are not at higher risk of being diagnosed with cancer when compared to the rest of the population in the Tri-Counties Region.

I hope that this information will help you with evaluation of cancer issues in your neighborhood. Please do not hesitate to contact me if you have further questions.

Cordially,

Kiumarss Nasser, DVM, MPH, PhD
Research Epidemiologist

cc. Cynthia Creech, CTR, Director, Tri-Counties Regional Cancer Registry
Robert Schlag, Msc. Chief, Research and Surveillance Program, California Cancer Registry.



XXXXXXXXXXXXX
 XXXXXXXXXXXXXXXXXXXX
 Bell Canyon, CA 91307

October 10, 2006

Dear xxxxxxxx

This letter is prepared in response to your call on October 6, 2006 expressing concern about the possible increase in cancer cases in your neighborhood. Considering the recent release of studies suggesting possible increase in cancer cases due to the melt down of the reactor at the Santa Susana Field Laboratory in the 1950s (Study Says Lab Meltdown Caused Cancer, Los Angeles Times October 6, 2006), your concern is understandable. I do not have the means to comment on the facts of the reported studies. However, I can evaluate the occurrences of cancer in your neighborhood and share the results with you.

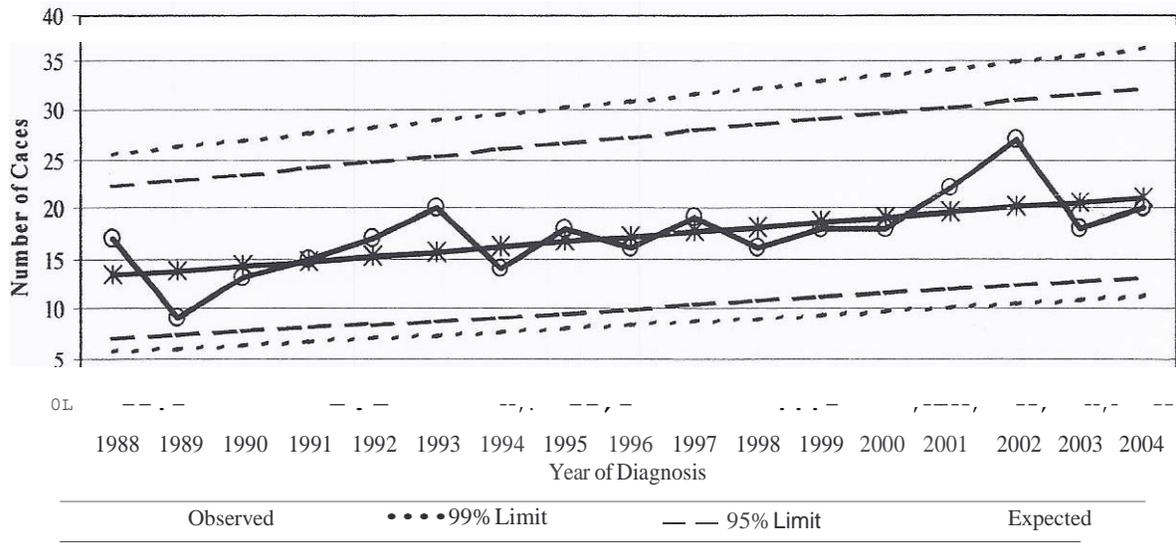
Since 1988, the Tri-Counties Cancer Surveillance Program has registered all newly developed cancer cases in the San Luis Obispo, Santa Barbara, and Ventura Counties. Your neighborhood is located in the census tract 75.03 in Ventura County. From January first 1988 through December 31, 2004 (the last year for which data collection is complete), a total of 297 cases of all types of cancers were registered among residents of this census tract. If we assume that residents of this area have the same chances of developing cancer as the residents of the other parts of the Tri-Counties Region, then we would have expected to register 283 cases of cancer in them. The difference of 14 additional cases over a 17 years period is statistically not significant and represents normal fluctuations expected in any measurement based on biological events. Table 1, below presents the observed and expected numbers for some major cancers in this area. While reviewing this table please note that 1) none of the differences are statistically significant at $p < 0.01$; 2) the total number of other cancers in this period were generally smaller than one per year, and thus are not presented; 3) thyroid cancer is of particular importance because it is the most "radio-sensitive" cancer we know and its incidence is generally expected to increase after significant radiation exposure, as it happened in the case of Chernobyl meltdown in Ukraine in 1986.

Table 1. Observed and Expected Numbers of Newly Diagnosed Cancers in Census Tract 75.03, Ventura County, California 1988-2004						
Cancer Sites	MALE		FEMALE		TOTAL	
	OBS	EXP	OBS	EXP	OBS	EXP
All Sites	172	150	125	133	297	283
Prostate	51	40	-	-	51	40
Breast	*	*	46	47	*	*
Lung and Bronchus	19	20	9	14	28	34
Colon and Rectum	15	15	16	11	31	26
Melanoma of the Skin	16	10	8	6	24	17
Thyroid	*	*	*	*	7	7
Non-Hodgkin Lymphoma	12	7	*	*	*	*
Urinary Bladder	11	10	*	*	*	*

* Counts of less than 5 are not presented according to preserve confidentiality of the data based on the guidelines of the California Cancer Registry.
 - Not Applicable

Figure 1, also shows the long term trends in diagnosis of newly developed cancers in this census tract.

Figure 1. Long Term Trends of Diagnosis of Newly Developed Invasive Cancers in Census Tract 75.03, Ventura County, All Cancers Combined, 1988-2004



As noticed in this figure, the annual incidence of newly developed cancers follows the trends in expected numbers, with few deviations in some years. However, none of the deviations cross over the 99% or even the 95% confidence intervals, and thus are statistically not significant. However, the close examination of this figure also reveals that the number of expected cancers has slightly increased from less than 15 in 1988 to slightly over 20 in 2004. This increase in the numbers, in spite of the fact that age adjusted incidence rate of invasive cancers in this census tract has actually declined by 7.5 percent between 1990 and 2000, is due to the age structure of the population in this census tract. Population of census tract 75.03 has increased by 10 percent between 1990 and 2000 censuses. This increase, however, has not been equal for all ages. Individuals under 35 years of age have actually decreased by 4.5 percent, while older individuals have increased. Persons between 35 and 64 have increased by 28 percent and those 65 and over have increased by 36 percent. Cancer being a disease of the old age is more frequently diagnosed in older people and thus the absolute numbers of cases have increased, while the age adjusted rates have actually decreased like most other locations in California.

Based on this analysis, I conclude that occurrence of newly diagnosed invasive cancers in census tract 75.03 in Ventura County, that includes your neighborhood, does not show any unusual pattern and has actually decreased by 7.5 percent from 1988 through 2004.

I hope that this brief will help you with your concern. Please do not hesitate to contact me if you have further questions, or need more clarification.

Sincerely,

Dr. Kiumarss Nasser,
Epidemiologist

cc. Robert Levin, MD. Health Officer, Ventura County.

Kurt Snipes, PhD. Chief, Cancer Surveillance Section, California Department of Health Services.

Janet Bates, MD. MPH. Chief, Cancer Surveillance Research Unit, California Cancer Registry.

Hal Morgenstern, PhD. Professor and Chair, Department of Epidemiology, School of Public Health, University of Michigan, Ann Arbor, Michigan.