UCLA Third Annual CORICA Symposium 2007
# Leading Cause of Deaths

**USA**

<table>
<thead>
<tr>
<th>Age</th>
<th>Disease</th>
</tr>
</thead>
<tbody>
<tr>
<td>35-44</td>
<td>Cancer</td>
</tr>
<tr>
<td>45-54</td>
<td>Cancer</td>
</tr>
<tr>
<td>55-64</td>
<td>Cancer</td>
</tr>
<tr>
<td>65-74</td>
<td>Cancer</td>
</tr>
<tr>
<td>75-84</td>
<td>Heart Disease</td>
</tr>
<tr>
<td>85+</td>
<td>Heart Disease</td>
</tr>
</tbody>
</table>
# Leading Causes of Cancer Deaths

## Causes of Cancer Deaths in the United States

<table>
<thead>
<tr>
<th>Risk Factor</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tobacco</td>
<td>30%</td>
</tr>
<tr>
<td>Nutrition/Obesity</td>
<td>30%</td>
</tr>
<tr>
<td>Inactivity</td>
<td>5%</td>
</tr>
<tr>
<td>Family history of cancer</td>
<td>5%</td>
</tr>
<tr>
<td>Viruses and other biological agents</td>
<td>5%</td>
</tr>
<tr>
<td>Reproductive factors</td>
<td>3%</td>
</tr>
<tr>
<td>Alcohol</td>
<td>3%</td>
</tr>
<tr>
<td>Socioeconomic status</td>
<td>3%</td>
</tr>
<tr>
<td>Environmental pollution</td>
<td>2%</td>
</tr>
<tr>
<td>Ionizing/ultraviolet radiation</td>
<td>2%</td>
</tr>
</tbody>
</table>

Source: Adapted from the Harvard Report on Cancer Prevention, 1996.
Viruses and Cancer

- Causes of cancer are complex - difficult to pinpoint exact causal agents
- Viruses are causal factors in some cancers
- Examples: cervix and liver cancers
- Effective vaccines to prevent cervical and liver cancer are available
- Vaccination and screening can reduce burden of these cancers in minority communities
Ethnic Variation in Cancer Mortality
USA

Jemel et al., Cancer Statistics 2004, CA A Cancer Journal for Clinicians; 54, 8-29. (SEER data)
Other Modifiable Risk Factors

• Tobacco linked to cervical cancer
  – Smoking
  – Environmental exposure

• Liver cancer
  – Obesity, physical activity, diet
  – Alcohol use
  – Tobacco use
**2004-2009**

**Principal Investigator**
Roshan Bastani, PhD

**Co-Principal Investigators**
Antronette Yancey, MD, MPH
Annette Maxwell, DrPH
Beth Glenn, PhD

**Project Director**
Ritesh Mistry, PhD

**Project Coordinator**
Irene Pena, MA

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**2000-2010**

**Principal Investigator**
Marjorie Kagawa-Singer, PhD, MN, RN

**Co-Principal Investigator**
Roshan Bastani, PhD

**Project Director**
Koy Parada, MPH
Long Term Goal

Reduce cancer disparities in our diverse populations

University

Community
CORICA AIMS

- Conduct & evaluate community-based programs to prevent and control cancer with focus on:
  - Obesity, Nutrition and Physical Activity
  - Cancer Screening
    - HPV and hepatitis B testing and vaccination
  - Tobacco

- Disseminate evidence based approaches
CORICA Community Activities

- Awareness and education activities
  - Annual symposia
  - Newsletters and reports
  - Training events

- Community Pilot Program Funding
  to community-based organizations (CBOs) for cancer prevention and control activities

- Interns placed in CBOs

- Provide technical support for research activities
  - analyze data on CBO-initiated programs
  - co-authoring scientific publications, e.g., journal articles, legislative policy briefs
Community-Based Cancer Prevention and Control Programs are Critical

Important to only implement programs that work

How do you know if a program is effective?

RESEARCH
Long Term Goal

Reduce cancer disparities in our diverse populations

University

Community
Thank You
CORICA Symposium Planning Committee

COMMUNITY

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