As we saw last week (RHWN #386), for 11 kinds of cancer, the U.S. incidence rate is highest among African-Americans (blacks) than among European-Americans (whites). The incidence rate is the number of new cancers diagnosed among 100,000 individuals of a particular race during a year's time. For all cancers combined, the incidence rate among blacks is about 6% higher than it is among whites; in other words, the chances of a black person getting any cancer are about 6% higher than a white person's chances.

However that is only part of the story. As we also saw last week, for 14 cancers, the U.S. death rate (deaths per 100,000 individuals of a particular race during a year's time) is much higher among blacks than it is among whites. When all cancers are considered together, a black is 1.3 times as likely as a white to die of one cancer or another; i.e., there's a 30% greater chance that any black person will die of cancer, compared to any white person.

In sum, whites have a slightly lower chance of getting cancer and a much higher chance of surviving it. (At a later date, we will examine detailed reasons for this, but it is clear that the root causes are racial and class bias in the health care system.)[1]

Now we will continue examining the details of each cancer, site by site. Our information is taken from Barry A. Miller and others, editors, CANCER STATISTICS REVIEW 1973-1989 [National Institutes of Health Publication No. 92-2789] (Bethesda, Md.: National Cancer Institute, 1992); page numbers inside square brackets refer to this study. This study uses the term "blacks" to refer to African-Americans and we have retained that terminology.

ESOPHAGUS: In 1992, there were an estimated 9700 new male cases and 3200 new female cases (estimated). This is a particularly lethal cancer. Both incidence and mortality rates are about three times as high among black men as among white men. [pg. VIII.[1]]

KIDNEY CANCER: 26,500 new cases estimated for 1992; 10,700 deaths in 1992 estimated. Between 1973 and 1989, incidence of kidney and renal cancer among all races increased about 2% per year. However, among blacks (both males and females) 65 and older, incidence increased twice as fast (4% per year). The largest overall increase was among black males over 64; between 1973 and 1989, the kidney cancer increase was 113.2% among this group. [pg. XI.[1]]

Overall, deaths from this cancer increased at 1% per year, 1973-1989. Among blacks 65 and older, deaths from this cancer increased at 4% per year.

CANCER OF THE LARYNX: 12,500 new cases in 1992, estimated; 3650 deaths in 1992, estimated. [pg. XII.[1]]

This is a tobacco-related cancer. The death rate is dropping among white males but rising among white females and among black males and females. Incidence of this cancer is 1.5 times as high among blacks as among whites, and the death rate among blacks is 2.3 times the death rate among whites.

LIVER CANCER: An estimated 15,400 new cases in 1992 and an estimated 12,300 deaths. [pg. XIV.[1]]

Cancer of the liver occurs more frequently in the old, particularly in black males over 65. For the period 1985-89, black males over 65 had an incidence rate of 39.3 per 100,000; among whites of the same age, the rate was about half as great (20.3 per 100,000). Among black females 65 and over the rate was 11.4 per 100,000 and among white females of the same age, the rate was 8.2 per 100,000. [pg. XIV.[4]]

In 1989 black males over 65 has a death rate of 33.7 per 100,000; the death rate among same-aged whites was 22.6 per 100,000. The rate among black females 65 and older was 15.0 per 100,000; among same-aged white females the rate was 10.8 per 100,000. [pg. XIV.[5]]

LUNG CANCER: 168,000 new cancers in 1992 (estimated) and 146,000 deaths (estimated). [pg. XV.[1]]

The incidence rate in the period 1985-89 was 63.7 per 100,000 for white males and 102.9 per 100,000 among black males. The disparity among women was less: 31.8 among white females and 35.3 among black females. [pg. XV.[4]]

During 1985-89, the death rate among white males was 56.0 per 100,000 and among black males was 83.1 per 100,000. Among white women the rate was 23.1 and among black women it was 23.2. [pg. XV-5.]

MULTIPLE MYELOMA: 12,500 new cases in 1992 (estimated) and 9200 deaths (estimated). [pg. XVII.[1]]

Multiple myeloma is a cancer of the old, especially of older blacks. In 1985-89, black males 65 and older had an incidence rate of 64.3 per 100,000, twice the rate for whites of the same age group (32.4 per 100,000). The same is true for black females of the same age group whose rate of 42.7 per 100,000 is twice that of white females (21.3 per 100,000).

The pattern appears again in the death rate. In 1985-89 black males 65 and older had a death rate of 47.7 per 100,000, twice the rate seen in white males of the same age group (23.6 per 100,000). The death rate among females over 65 was similarly skewed: 31.1 per 100,000 among blacks vs. 15.4 per 100,000 among whites.

Between 1973 and 1989, mortality rates for multiple myeloma increased by almost 2% each year among whites over age 65, but 3% to 4% per year among same-aged blacks.

NON-HODGKIN'S LYMPHOMA: 41,000 new cases in 1992 (estimated); 20,000 deaths in 1992 (estimated). Whites get this disease 2 to 3 times as often as blacks, but even here there is bad news for blacks: Between the periods 1974-76 and 1983-88 the survival rates improved significantly for whites but not for blacks. [pg. XVIII.[1]]

CANCER OF THE ORAL CAVITY AND PHARYNX: 30,300 new cases in 1992 (estimated); 8000 deaths in 1992 (estimated). [pg. XIX.[1]]

In people less than 65 years old, the incidence rate among blacks is nearly twice what it is among whites. Furthermore, in general, among males, incidence rates are declining for whites (1973-1989) but are increasing for blacks.

Over the age of 65, incidence rates are increasing among both black and white women. Among females under the age of 65, incidence rates are falling for whites but rising for blacks.

Survival rates are higher for whites than for blacks. Black males diagnosed in 1983-87 have a five-year survival rate that is half that for whites (26.2 vs. 52.4 percent).

Mortality rates have significantly declined for white males of all ages and for white females under 65 years of age. In recent years (1985-1989) there is a downward trend in mortality among white females of all ages. Among blacks, on the other hand, during the same period there were increases in mortality for both males and females of all ages, for males less than age 65, and for males and females 65 and over.


During 1973-89, incidence declined among white males (-14.8%) and females (-3.7%) and black males (-13.9%), but increased...
among black females (+7.2%). During the same period, the death rate declined 11.1% among white males, but increased 3.2% among white females while the death rate among black males rose 10.6% and among black females rose 25.5%.  

PROSTATE: 132,000 new cases estimated for 1992; 34,000 deaths estimated for 1992. 

Incidence rates are higher among blacks (139.7 per 100,000) than among whites (98.8 per 100,000) in the period 1985-89. 

Between 1973 and 1989, mortality increased at 1.7% per year among blacks vs. 0.8% per year among whites. Black men in the U.S. have the highest reported death rate for prostate cancer in the world. 

No one has a good explanation for the high prostate cancer rate in the U.S. The NCI [National Cancer Institute] says that studies of migrants "suggest that environmental exposures play a more important role than genetic [inherited] factors." 


In general, rates of incidence and death are declining, but rates among black males and females remain about twice as high as rates among whites. 

Figure 1 shows which cancer death rates have increased and which have diminished, 1973-1989, among blacks and whites. Examination of Figure 1 reveals that death rates among whites are improving, relative to death rates among blacks, for 18 out of 24 cancers: for these 18, either the death rate has increased among blacks faster than it has among whites, or the death rate has decreased more slowly among blacks than it has among whites. The trend is clear: as time passes, cancer inequities between blacks and whites in the U.S. are continuing to worsen. --Peter Montague, Ph.D. 


