

Key Facts

- 81.000 Montana adults are cancer survivors.
- 1 in 5 cancer survivors reported having frequent poor physical health.
- 14% of cancer survivors report having pain related to their can-cer or their cancer treatment.
- Over half of cancer survivors (58%) didn't report receiving a summary of their treatment and a follow-up care plan when their treatment was complete.

Cancer Survivorship among Montana Adults

Cancer survivors include all people ever diagnosed with cancer (excluding non-melanoma skin cancer) from the time of their diagnosis through the end of their life! Cancer survivors have many unique con-cerns that need to be addressed. Their physical health may be impact-ed (even after completing treatment) bylong-term side effects of theirtreatment and higher risk of subsequent cancers developing. Theirmental and emotional health maybe impacted by the financial and so-cial impact of cancer? Additionally, cancer survivors are becoming more common as innovations in medical technology have led to earlier diagnoses and improved treatment for many cancers. This report de-scribes characteristics of Montana adult cancer survivors.

In Montana, an estimated 81,000 adults (about 10%) were cancer survivors in 2020 (Figure 1). There was no significant difference in the prevalence of cancer survivorsby sex, race, or educational attainment in Montana (Figure 1).

Figure 1: Proportion of Montana Adults who Reported Ever being Diagnosed with Cancer, BRFSS, 2020

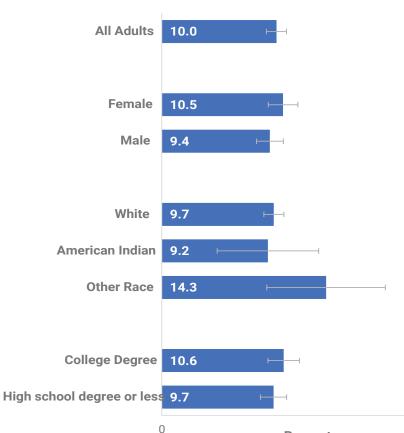


² National Cancer Institute, Cancer Survivorship. Accessed on Sept 20, 2021 at https:// www.cancer.gov/about-cancer/coping/ survivorship

Montana Cancer Control

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publichealth/cancer/index



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Figure 2: Frequent poor health days among cancer survivors compared to adults with no cancer history in Montana, BRFSS, 2020

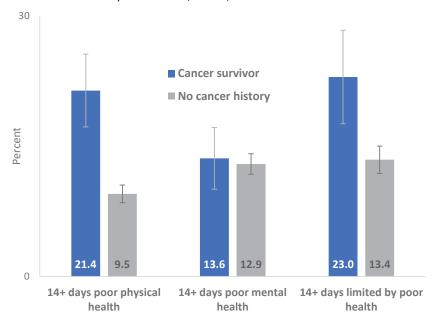
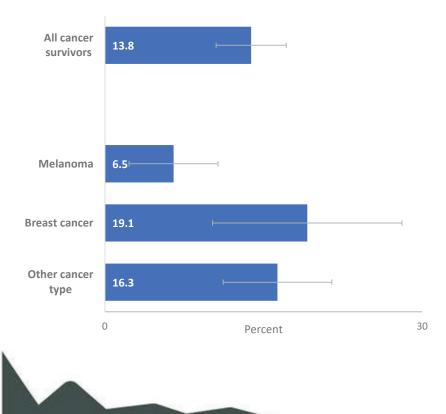


Figure 3: Percent of cancer survivors with current pain due to cancer or cancer treatment by type of cancer, BRFSS, 2020



Among Montana cancer survivors, 80% reported only having one type of cancer and about 70% reported beingfirst diagnosed with cancer after the age of44. Among cancer sur-vivors, melanoma was the most common type of cancer reported. Breast and prostate can-cer were the second and third most common cancers (data not shown).

Health Status of Cancer Survivors

Cancer survivors reported having frequent poor physical health (14or more of the past 30 days) two times more often than adults with no cancer history (Figure 2). Cancer survi-vors also reported being frequently limited in their usual activities by poor health more often than adults with no cancer history. However, there was no significant difference in how of-ten cancer survivors and other adults reported having frequent poor mental health.

Fourteen percent of cancer survivorsin Montana (about 10,000 people) reported currently having pain related to their cancer or cancer treatment (Figure 3). Cancer survivors whose most recent cancer diagnosis was melanoma reported having cancer-related pain signifi-cantlyless often than survivors with other types of cancer. Among cancer survivors who reported having cancer related pain, almost 1in 4 (23%) reported that their pain was not well controlled. That means there were about 2,300 adults living with uncontrolled cancer pain in Montana during 2020.

Survivorship Care Plans

Survivorship care plans are an important tool to empower cancer survivors to manage their own health as they transition back to their pri-mary care provider. They include the follow key components:

summary of cancer treatment receive



- schedule for future check-ups and cancer tests
- potential long-term or late effects of the treatment received
- and ideas for improvingoverall health.

The Institute of Medicine recommends that all cancer survivors receive a survi-vorship care plan when they complete treatment.3 Less than half of cancer survivors in Montana (47%) reported receiving a summary of their cancer treatment (Figure 4). Cancer survivors with less education (a high school de-gree or less) reported getting a sum-mary of their treatment significantly less often than cancer survivors with more education. Seventy-nine percent of Montana cancer survivors reported re-ceiving a follow-up care plan (Figure 5). There were no significant differencesin the proportion of survivors who received a follow-up care plan based on sex or education level. Forty-two percent of survivors reported receiving both a treatment summary and a follow-up care plan. That means that 58% of can-cer survivors didn't report getting both of these important parts of the survivor-ship care plan. Additionally, 17% of can-cer survivors reported they received nei-ther a summary of their treatment nor a follow up plan.

Access to Healthcare among Cancer Survivors

Significantly more cancer survivors in Montana reported having some type of health care coverage than adults with

Figure 4: Proportion of cancer survivors who report having received a care summary after completing their cancer treatment, BRFSS, 2020

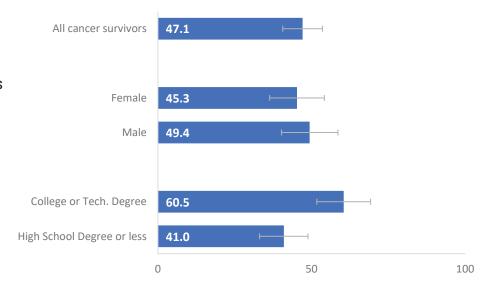
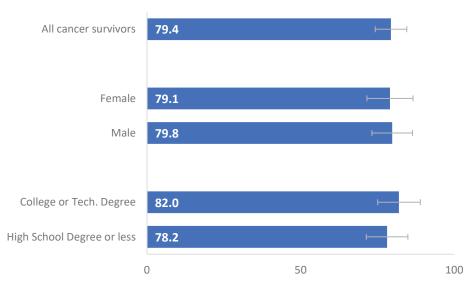


Figure 5: Proportion of cancer survivors who report having received a follow-up care plan after completing their cancer treatment, BRFSS, 2020



3 Institute of Medicine. 2013. *Delivering High-Quality Cancer Care: Charting a New Course for a System in Crisis*. Washington, DC: The National Academies Press. https://doi.org/10.17226/18359.



Figure 6: Health care access indicators among cancer survivors compared to adults with no cancer history in Montana, BRFSS, 2020

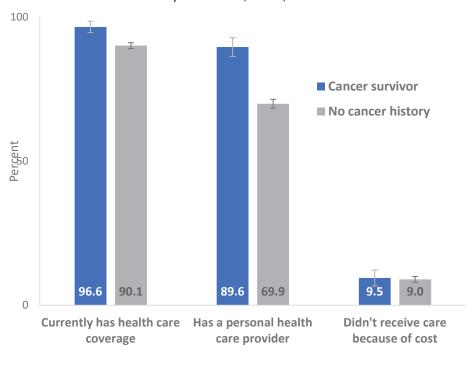
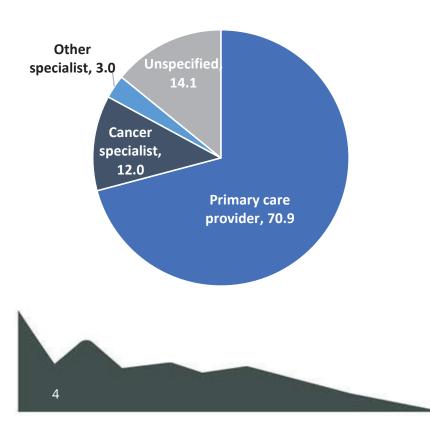


Figure 7: Type of medical professional who provides most of a cancer survivor's health care after completing their cancer treatment, BRFSS, 2020



no cancer history (Figure 6). The higher pro-portion of cancer survivors with health care coverage may be due to cancer survivors being more likely to be over 65 years of age and eligible for Medicare coverage. Addi-tionally, cancer survivors reported having at least one person they think of as their per-sonal doctor or health care provider significantly more often than adults with no can-cer history (Figure 6). Among cancer survi-vors who have completed their treatment, most (71%) reported that they get the ma-jority of their health care from a primary care provider (Figure 7). However, 12% re-ported that they still get most of their medi-cal care from a cancer specialist (a cancer surgeon, gynecologic oncologist, medical oncologist, or radiation oncologist).

Methods and Limitations

The data presented in this report are from the cancer survivor optional module in the 2020 Behavioral Risk Factor Surveillance System (BRFSS) questionnaire. BRFSS is a random digit dialed telephone survey of non-institutionalized adults. It isweighted to be representative of the Montana adult population based on gender, age, race/ ethnicity, education, geographic region, home ownership, and marital status! The data is all self-reported and maybe subject to recall and social desirability bias. As only one year of data is currently available for the cancer survivor module in Montana, this analysis is based on a sample size of 717 individuals. This small sample size lim-ited the ability to analyze the data by some demographic groups.

4 Centers for Disease Control and Prevention.

BRFSS Frequently Asked Questions. Accessed on
Sept 23, 2021 at https://www.cdc.gov/brfss/about/
brfss_fag.htm