

## AYA Cancer Fact Sheet

### Incidence

- Cancer occurring between the ages of 15 and 30 years is 2.7 times more common than cancer occurring during the first 15 years of life, yet is much less common than cancer in older age groups, and accounts for just 2% of all invasive cancer.
- The incidence of cancer in this age group increased steadily during the past quarter century.
- The increase is declining and at the older end of the age range appears to be returning to the incidence of the 1970s.
- Males in the 15-29 year age group have been at higher risk of developing cancer, with the risk directly proportional to age.
- Non-Hispanic whites have had the highest risk of developing cancer during this phase of life, and Asians, American Indians and Alaskan Natives the lowest.
- Males had a worse prognosis than females. African-Americans, American Indian/Alaska Natives had a worse prognosis than white non-Hispanics and Asians.
- Cancer in adolescents and young adults is unique in the distribution of the types that occur. Hodgkin lymphoma, melanoma, testis cancer, female genital tract malignancies, thyroid cancer, soft-tissue sarcomas, non-Hodgkin lymphoma, leukemia, brain and spinal cord tumors, breast cancer, bone sarcomas, and non-gonadal germ cell tumors account for 95% of the cancers in this age group.
- The frequency distribution of cancer types changes dramatically from age 15 to 30, such that the pattern at the youngest age does not resemble the one at the oldest.

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Childhood cancers, importantly, differ from adult cancers in significant ways. They comprise a spectrum of malignancies that differ in site of origin, tissue structure and organization type, and incidence across age groups. Rainbow Babies & Children's Hospital and the AYA Cancer Initiative recognize this age group cannot be merely overlooked.

The physical, psychosocial, and financial consequences of effective therapy have created a need for new venues of research and specialized care for survivors.

There is little financial incentive or support for the development of new drugs and biologic therapies. There are disparities in outcomes in adolescents and young adults, and many children worldwide lack access to effective therapy.

Years ago, childhood cancer was almost uniformly fatal. Today, most patients survive if treated appropriately. Further progress requires novel approaches for patients at greater risk and greater coordinated efforts to develop less toxic therapies for the more curable cancers

There is also a need to establish and support evidence-based national pediatric oncology standards of care, to develop new incentives for drug development specific to childhood cancer, to increase support for translational research, to develop comprehensive management strategies for survivors, and to develop and finance national initiatives to improve the outcome of adolescents and young adults with cancer. Because many remaining research questions will require the study of large populations and access to high-quality biologic specimens, more efficient and productive international collaborations are needed.

The AYA Cancer Initiative is working hard to forge those relationships for its patients and families, as well as the general public at large.

The gains we have achieved to date are promising and we are fully committed and driven by the remaining challenges ahead.

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