

# American Cancer Society report assesses progress against goals set for nation

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A new report assesses how the nation fared against the ambitious challenge goal set by the American Cancer Society to reduce the cancer death rates by 50% over 25 years ending in 2015. The report finds areas where progress was substantial, and others where it was not.

The report, appearing in the American Cancer Society journal, *CA: A Cancer Journal for Clinicians*, says the best improvements were seen in cancers for which prevention, early detection, and treatment tools are available, including cancers of the lung, colon, breast, and prostate. How much more progress will be made going forward will depend on how well policy makers and the American public work together to continue progress in those areas, and in making the best available care accessible to all.

In 1996, the Board of Directors of the American Cancer Society challenged the United States to reduce what looked to be peak [cancer](#) mortality in 1990 by 50% by the year 2015. The goals made clear that achieving that challenge goal would require a broad, multi-sectoral effort, not the effort of any single organization.

The current analysis, led by Tim Byers, MD, of the University of Colorado, examined trends in cancer mortality across the 25-year challenge period from 1990 to 2015. The report found:

- In 2015, the overall cancer death rate was 26% lower than in 1990 (32% lower among men and 22% lower among women).

- Among men, mortality rates dropped for lung cancer by 45%, for colorectal cancer by 47%, and for prostate cancer by 53%.
- Among women, mortality rates dropped for lung cancer by 8%, for colorectal cancer by 44%, and for breast cancer by 39%.
- Declines in the death rates of all other cancer sites were substantially smaller (13% among men and 17% among women).
- The major factors that accounted for the drops were progress in tobacco control and improvements in early detection and treatment.

"As we embark on new national cancer goals, this recent past experience should teach us that curing the cancer problem will require 2 sets of actions: making new discoveries in cancer therapeutics and more completely applying those discoveries in cancer prevention we have already made," write the authors.

The report says not fully reaching the goal should be seen as an opportunity. "That the ACS challenge goal to reduce US cancer mortality by 50% over the 25-year period from 1990 to 2015 was only one-half achieved should be seen as a glass half full. This progress should eliminate any historical remnants of cancer fatalism, and it should now stimulate our national imagination about what might be possible to achieve into the future."

The report says the effort also has a valuable lesson in goal-setting: "The best goals are those that stretch the limits of what might actually be achieved by renewed efforts. There is a sweet spot in goal setting between projecting what will likely happen regardless of renewed efforts (setting the bar too low) and creating unrealistic challenges that tend to paralyze us (setting the bar too high)."

The report concludes: "All sectors of civil society will need to join in efforts to further reduce [cancer mortality](#) in the United States, including

those focused on the many social determinants of cancer, including income, availability of care, and many other social and environmental factors impacting cancer-reducing policies and programs. How much more progress we will make will depend on the extent to which policy makers and the American public can join together to create systems and incentives to understand cancer better, to reduce several of the known risk factors for cancer, to better diagnose cancer earlier, and to assure that state-of-the-art treatment is available for all."

**More information:** The American Cancer Society challenge goal to reduce US cancer mortality by 50% between 1990 and 2015: Results and reflections, [DOI: 10.3322/caac.21348](https://doi.org/10.3322/caac.21348) , [onlinelibrary.wiley.com/doi/10.3322/caac.21348/abstract](https://onlinelibrary.wiley.com/doi/10.3322/caac.21348/abstract)

Provided by American Cancer Society

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