

Thanks to providence for leaving me safe, healthy, cared, and lucky enough to pursue gold at the end of the rainbow. I am a believer in the Chinese proverb that, “it takes a village to raise a child” and am grateful to all those past and present who shared of themselves with family, friends, and strangers.

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Introduction

The first thing one often thinks when hearing the word “cancer” is old age, pain, and death. Although cancer tends to strike at later ages, it also takes the lives of people in their

in the region? What are some of the main risk factors (with attention to specific cultural aspects of the region) influencing its future severity?

I. Describing Cancer

Hundreds of different forms of cancer exist with widely varying causes. Even with this

lived, by examining aspects of the quality of one'

TABLE 1 Other Asia and Islands (OAI)

American Samoa	Maldives	Seychelles
Bangladesh	Marshall Islands	Singapore
Bhutan	Mauritius	Solomon Islands
Brunei Darussalam	Midway Island	South Korea
Cambodia	Mongolia	Sri Lanka
Cook Islands	Myanmar	Taiwan
Federated States of Micronesia	Nauru	Thailand
Fiji	Nepal	Tokelau Island
French Polynesia	New Caledonia	Tonga
Guam	Niue	Tuvalu
Hong Kong	North Korea	Vanuatu
Indonesia	North Mariana Islands	Vietnam
Johnston Isla		

III. Current and Future Health Burden

TABLE 2 Percent of Total Deaths and DALYs due to Cancer by Region—1990 and 2020*

TABLE 3 Top Ten Causes of

IV. Epidemiologic Transition, Population Trends, and Cancer

Knowledge of the epidemiologic transition, the nature of cancer, and population trends in developing countries of the Pacific Rim helps in understanding the previous discussion of cancer

the developed world by the percent of people in those countries who are over the age of sixty from 1950-2030. The figure shows that for each region depicted, the percent of those over sixty has been increasing since 1980 and is projected to increase more dramatically in the next thirty years. In China, nearly 7% of the population was over sixty in 1950 and it is predicted that by

Tables 2 through 4 suggest that cancers are more severe when measured by deaths rather than DALYs. That is because with the generally late onset of cancers the YLL are not as great

One anomaly in Table 7 is the high rate of esophagus cancer in China. The disease accounts for only a small percentage of cancer deaths in OAI and the developed world. China is part of the “

migrants moving from low-risk cancer areas to those with higher risk will often experience dramatic increases in the chance of acquiring cancer in a period as short as ten years. Moreover, after a few generations in the new country, descendants of the former migrants will often take on cancer rates similar to that of the rest of the country (IOM, 1984).

Diet, including obesity and sedentary lifestyles, and tobacco in all of its forms are the two most important risk factors. These two alone combine to cause nearly 70% of all cancers. The fourth risk factor is reproductive and sexual behavior that can increase the chance of acquiring cancers that stem from sexually transmitted . Tpen the. F

TABLE 8 Causes of Cancer Mortality

Risk Factors	% of All Cancer Deaths	
	Best Estimate	Range of Acceptable Estimates

VII. Tobacco

Tobacco consumption in its various forms represents the most preventable cancer causing

adult women smoked in 1993, a rate exceeding that of all but one of the Pacific Rim countries

TABLE 10

VIII. Cancer Transition

Cancer is neither a developing nor a developed world disease. As nations industrialize, they experience different forms of cancers. More affluent countries experience a greater percent of cancers of the breast, prostate, and colo-rectum. Lung cancer rates generally increase with the

Conclusion

Cancer is established in developing countries of the Pacific Rim. To address the problem,

