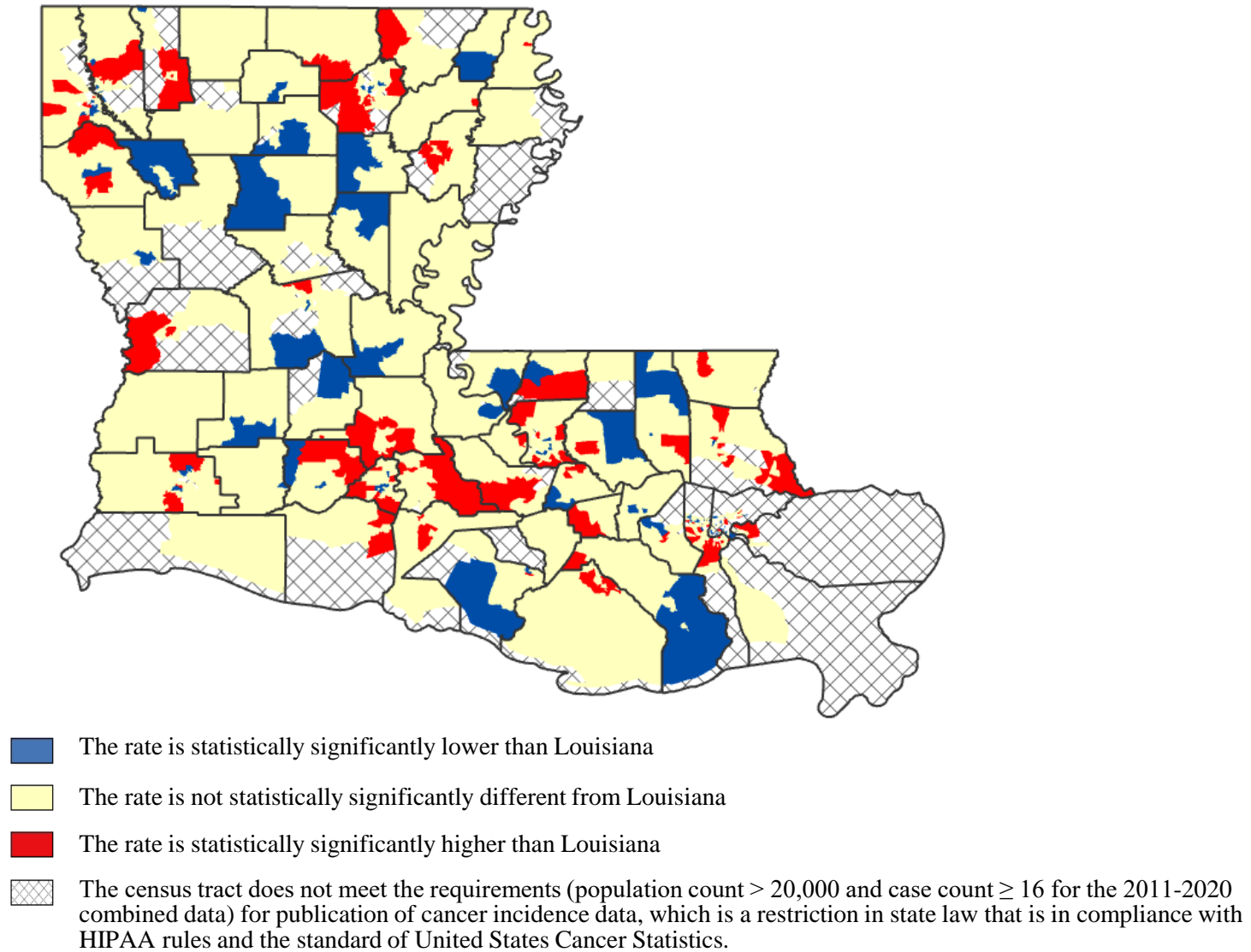
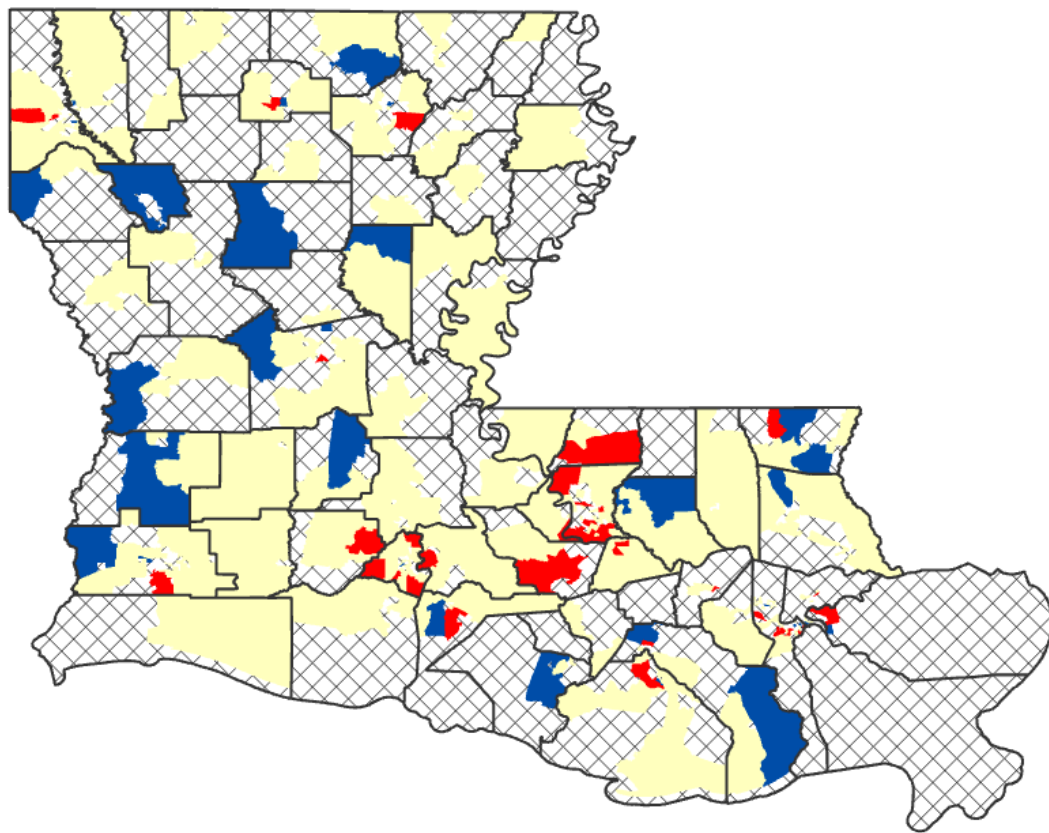


Figure 1. Comparison of Cancer Incidence Rates¹ of Individual Census Tracts with Louisiana, All Cancers Combined, 2011-2020



¹Average annual age-adjusted (2000 US) incidence rates

Figure 2. Comparison of Cancer Incidence Rates¹ of Individual Census Tracts with Louisiana, Prostate, 2011-2020



- The rate is statistically significantly lower than Louisiana.
- The rate is not statistically significantly different from Louisiana.
- The rate is statistically significantly higher than Louisiana.
- The census tract does not meet the requirements (population count > 20,000 and case count ≥ 16 for the 2011-2020 combined data) for publication of cancer incidence data, which is a restriction in state law that is in compliance with HIPAA rules and the standard of United States Cancer Statistics.

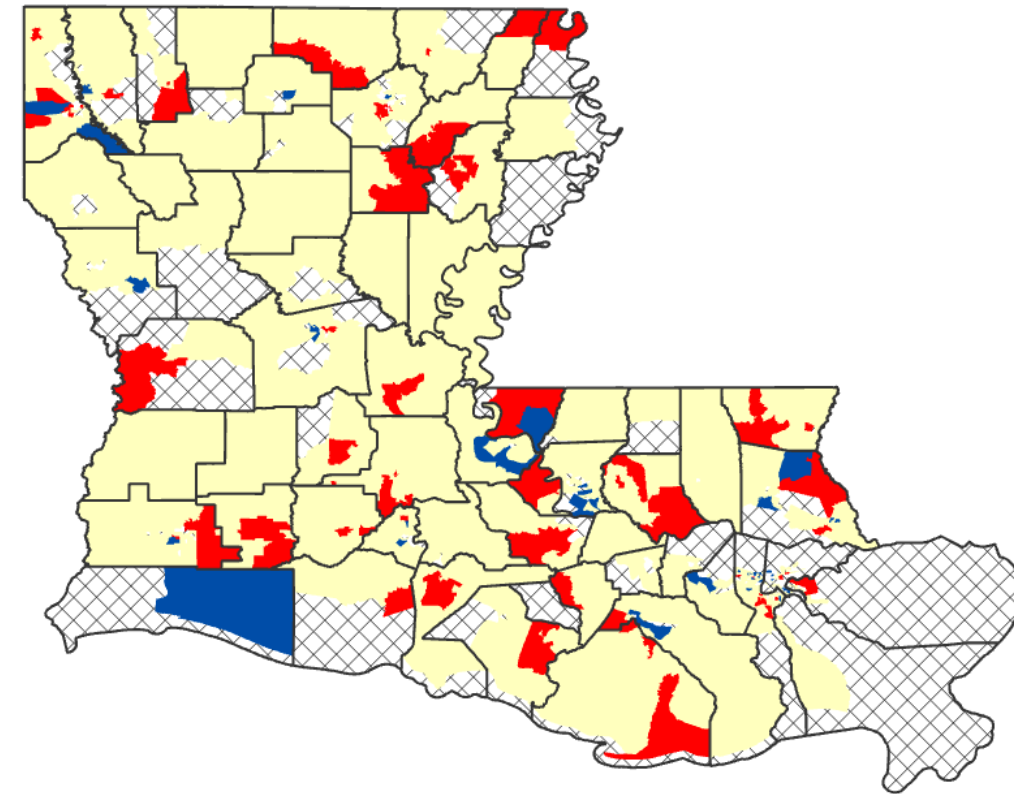
Risk Factors²

- Increased age
- African ancestry
- Smoking
- Excess body weight
- Family history of prostate cancer in first-degree relative
- Certain inherited genetic conditions, including Lynch syndrome and *BRCA1* and *BRCA2* mutations
- Diets high in dairy and calcium
- Taking vitamin E alone or folic acid
- Prostate changes
- Chemical exposures
- U.S. and Caribbean geographical locations

¹Average annual age-adjusted (2000 US) incidence rates

²American Cancer Society, *Cancer Facts & Figures 2024*; National Cancer Institute, www.cancer.gov.

Figure 3. Comparison of Cancer Incidence Rates¹ of Individual Census Tracts with Louisiana, Lung & Bronchus, 2011-2020



- The rate is statistically significantly lower than Louisiana.
- The rate is not statistically significantly different from Louisiana.
- The rate is statistically significantly higher than Louisiana.
- The census tract does not meet the requirements (population count > 20,000 and case count ≥ 16 for the 2011-2020 combined data) for publication of cancer incidence data, which is a restriction in state law that is in compliance with HIPAA rules and the standard of United States Cancer Statistics.

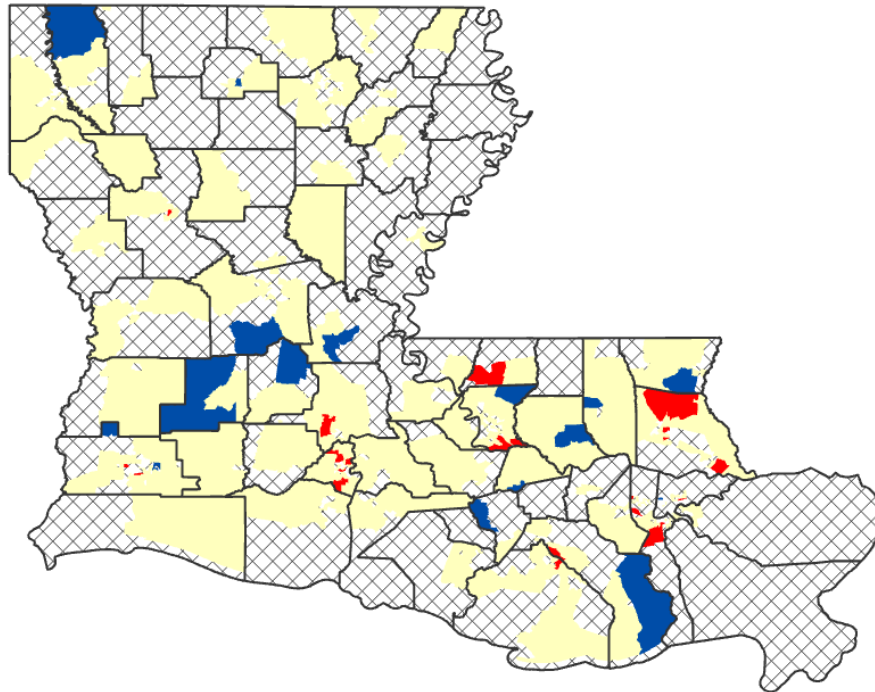
Risk Factors²

- Age
- Cigarette smoking (increases with amount and years of smoking)
- Cigar and pipe smoking
- Exposure to secondhand smoke
- Taking beta carotene supplements
- Exposure to radon gas, asbestos, certain metals (chromium, cadmium, arsenic), silica, beryllium, nickel chromate, some organic chemicals, radiation, vinyl chloride, mustard gas, coal products, diesel exhaust, chloromethyl ethers, or tar and soot
- Air pollution
- Occupational exposures, including: rubber manufacturing, paving, roofing, painting, chimney sweeping
- HIV infection
- Arsenic in drinking water
- Personal or family history of lung cancer

¹Average annual age-adjusted (2000 US) incidence rates

²American Cancer Society, *Cancer Facts & Figures 2024*; National Cancer Institute, www.cancer.gov.

Figure 4. Comparison of Cancer Incidence Rates¹ of Individual Census Tracts with Louisiana, Female Breast, 2011-2020



- The rate is statistically significantly lower than Louisiana.
- The rate is not statistically significantly different from Louisiana.
- The rate is statistically significantly higher than Louisiana.
- The census tract does not meet the requirements (population count > 20,000 and case count ≥ 16 for the 2011-2020 combined data) for publication of cancer incidence data, which is a restriction in state law that is in compliance with HIPAA rules and the standard of United States Cancer Statistics.

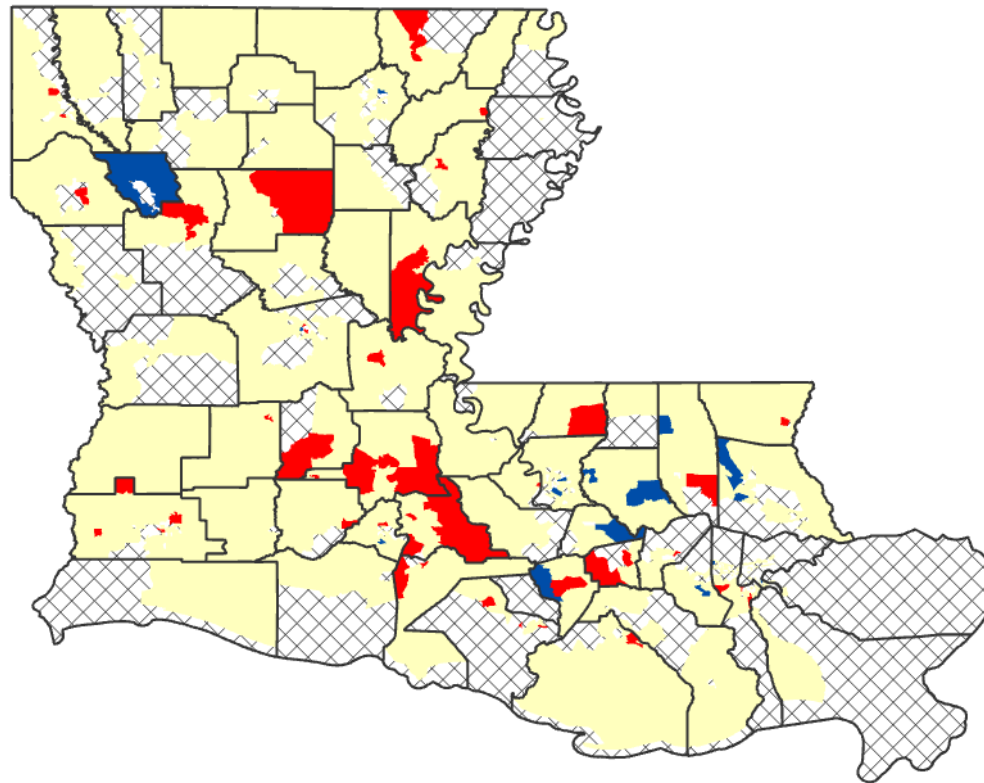
Risk Factors²

- Increased age
- Race/ethnicity
- Height (tall / being taller)
- Weight gain after age 18
- Being overweight or obese
- Physical inactivity
- Alcohol consumption
- Long menstrual history (starting early and ending later in life)
- Never having children
- Having first child after age of 30
- Breastfeeding for < 1 year
- Personal or family history of breast or ovarian cancer
- Inherited mutations in *BRCA1*, *BRCA2*, or other susceptibility genes
- Benign breast conditions (ex. atypical hyperplasia)
- Personal history of ductal or lobular carcinoma in situ, high-dose radiation to chest at young age, or high breast tissue density
- Recent use of oral contraceptives
- Menopausal hormone therapy (combined estrogen and progestin)
- Long-term use of combination hormone replacement therapy
- Being given diethylstilbestrol during pregnancy, or mother having been given diethylstilbestrol during pregnancy
- High natural levels of estrogen or testosterone

¹Average annual age-adjusted (2000 US) incidence rates

²American Cancer Society, *Cancer Facts & Figures 2024*; National Cancer Institute, www.cancer.gov.

Figure 5. Comparison of Cancer Incidence Rates¹ of Individual Census Tracts with Louisiana, Colon & Rectum, 2011-2020



- The rate is statistically significantly lower than Louisiana.
- The rate is not statistically significantly different from Louisiana.
- The rate is statistically significantly higher than Louisiana.
- The census tract does not meet the requirements (population count > 20,000 and case count ≥ 16 for the 2011-2020 combined data) for publication of cancer incidence data, which is a restriction in state law that is in compliance with HIPAA rules and the standard of United States Cancer Statistics.

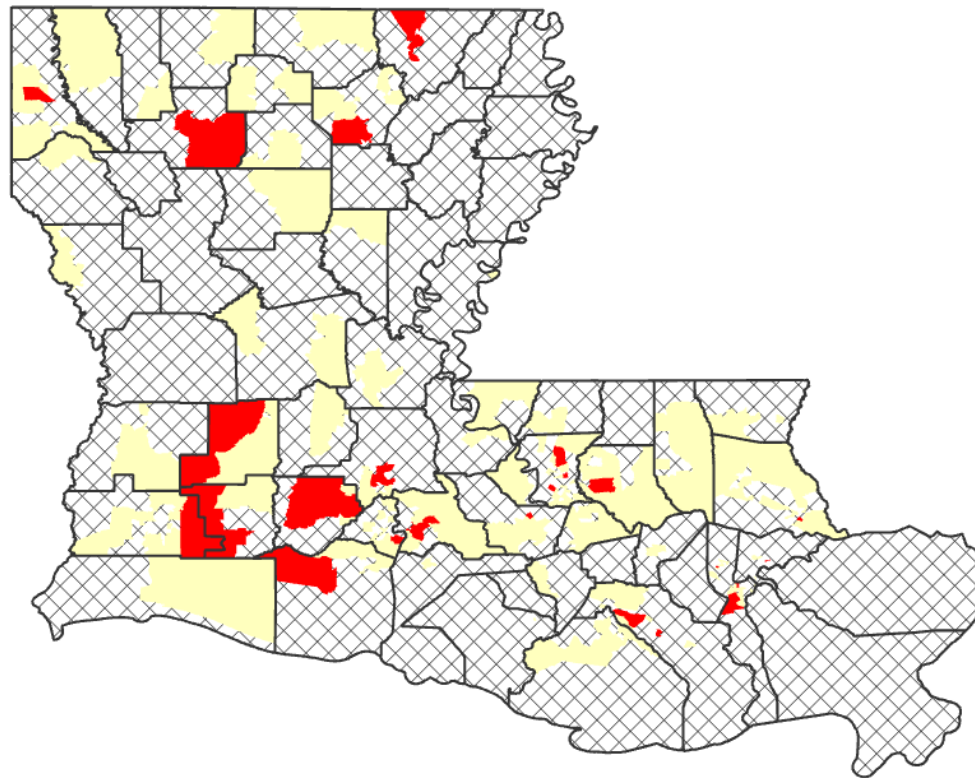
Risk Factors²

- Age
- Race/ethnicity
- Obesity
- Physical inactivity
- Long-term smoking
- High consumption of red or processed meat
- Low intake of calcium, fruits, vegetables, and whole-grain fiber
- Moderate to heavy alcohol consumption
- Personal or family history of colon or rectal cancer
- Type II diabetes and/or polyps
- Personal history of chronic inflammatory bowel disease, ulcerative colitis, or Crohn’s disease
- Inherited genetic conditions (ex. Lynch syndrome or familial adenomatous polyposis)
- Long-term use of nonsteroidal anti-inflammatory drugs can reduce risk

¹Average annual age-adjusted (2000 US) incidence rates


²American Cancer Society, *Cancer Facts & Figures 2024*; National Cancer Institute, www.cancer.gov.

Figure 6. Comparison of Cancer Incidence¹ Rates of Individual Census Tracts with Louisiana, Kidney & Renal Pelvis, 2011-2020



 The rate is not statistically significantly different from Louisiana.

 The rate is statistically significantly higher than Louisiana.

 The census tract does not meet the requirements (population count > 20,000 and case count ≥ 16 for the 2011-2020 combined data) for publication of cancer incidence data, which is a restriction in state law that is in compliance with HIPAA rules and the standard of United States Cancer Statistics.

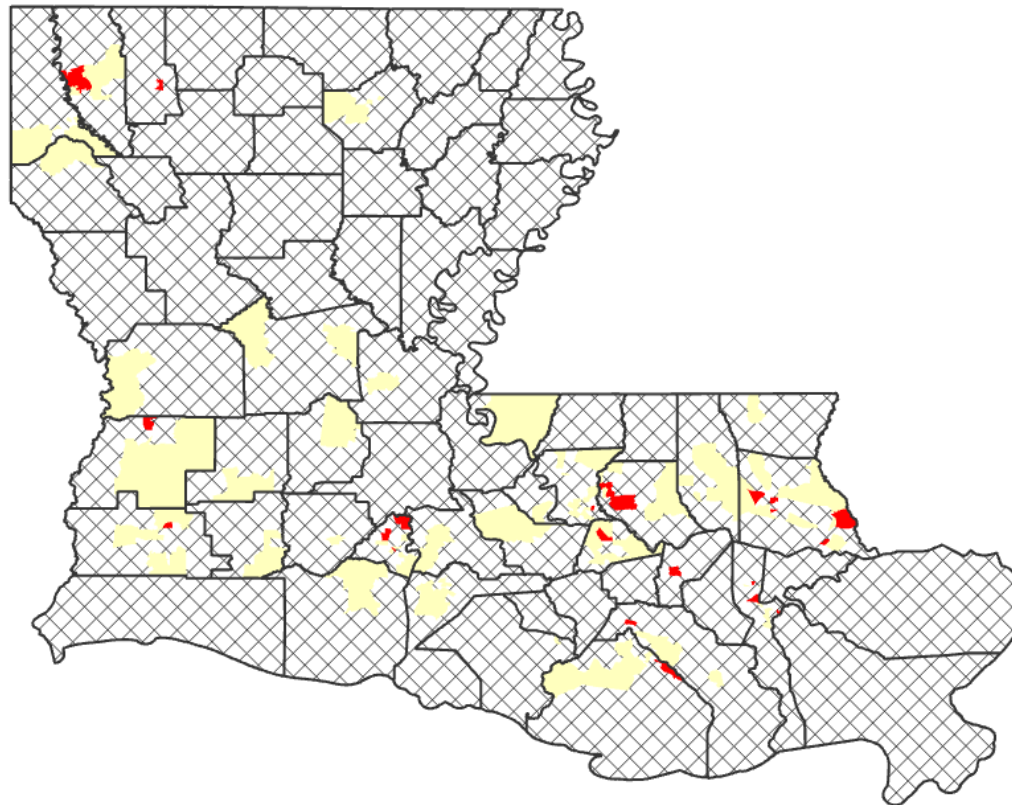
Risk Factors²

- Sex (higher if assigned male at birth)
- Race (African Americans have higher risk)
- Cigarette smoking
- Obesity
- High blood pressure
- Chronic renal failure
- Family history of kidney cancer
- Von-Hippel Lindau syndrome
- Occupational exposure to chemicals like trichloroethylene
- Certain medicines such as acetaminophen

¹Average annual age-adjusted (2000 US) incidence rates


²American Cancer Society, *Cancer Facts & Figures 2024*; National Cancer Institute, www.cancer.gov.

Figure 7. Comparison of Cancer Incidence Rates¹ of Individual Census Tracts with Louisiana, Non-Hodgkin Lymphoma, 2011-2020



 The rate is not statistically significantly different from Louisiana.

 The rate is statistically significantly higher than Louisiana.

 The census tract does not meet the requirements (population count > 20,000 and case count ≥ 16 for the 2011-2020 combined data) for publication of cancer incidence data, which is a restriction in state law that is in compliance with HIPAA rules and the standard of United States Cancer Statistics.

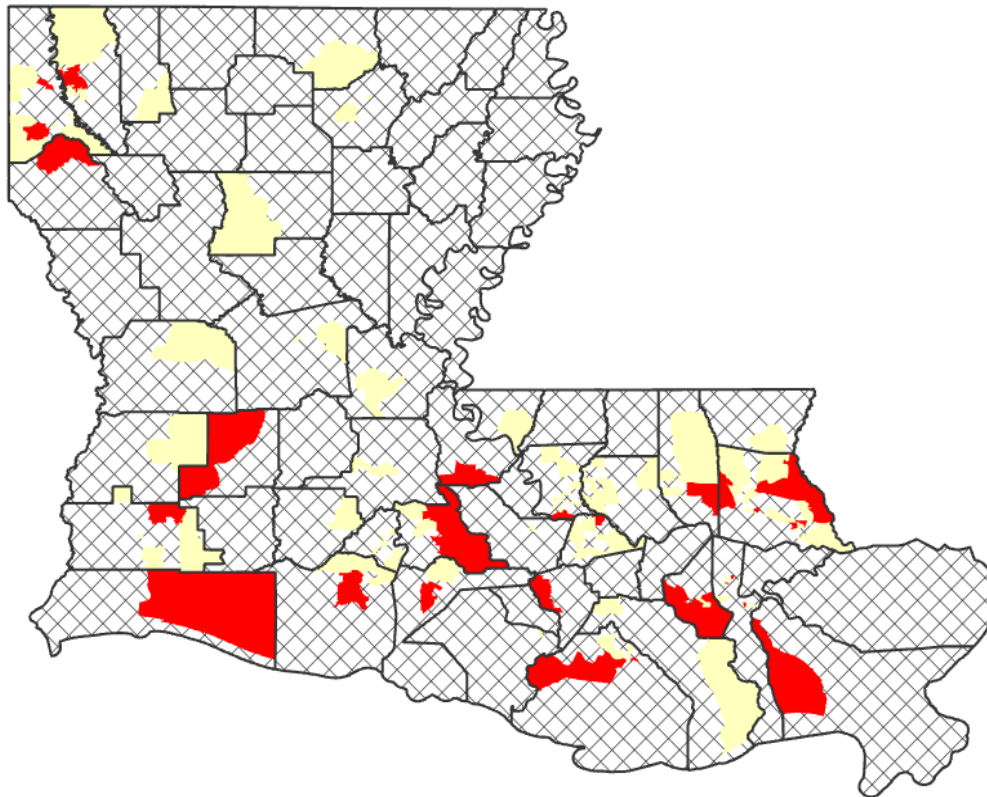
Risk Factors²

- Increased age
- Sex (higher if assigned male at birth)
- Race (higher risk if White)
- Weakened immune system due to HIV infection, inherited immunodeficiency syndromes, or receiving immune suppressants to prevent organ transplant rejection
- Infection with Epstein Barr virus, HIV, HTLV-1, *H. pylori*, or Hepatitis C virus
- Personal history of Sjogren syndrome, lupus, or rheumatoid arthritis
- Family history of lymphoma
- Radiation exposure
- Chemical exposures to benzene and certain herbicides and insecticides

¹Average annual age-adjusted (2000 US) incidence rates


²American Cancer Society, *Cancer Facts & Figures 2024*; National Cancer Institute, www.cancer.gov.

Figure 8. Comparison of Cancer Incidence Rates¹ of Individual Census Tracts with Louisiana, Urinary Bladder, Diagnosed in 2011-2020



 The rate is not statistically significantly different from Louisiana.

 The rate is statistically significantly higher than Louisiana.

 The census tract does not meet the requirements (population count > 20,000 and case count ≥ 16 for the 2011-2020 combined data) for publication of cancer incidence data, which is a restriction in state law that is in compliance with HIPAA rules and the standard of United States Cancer Statistics.

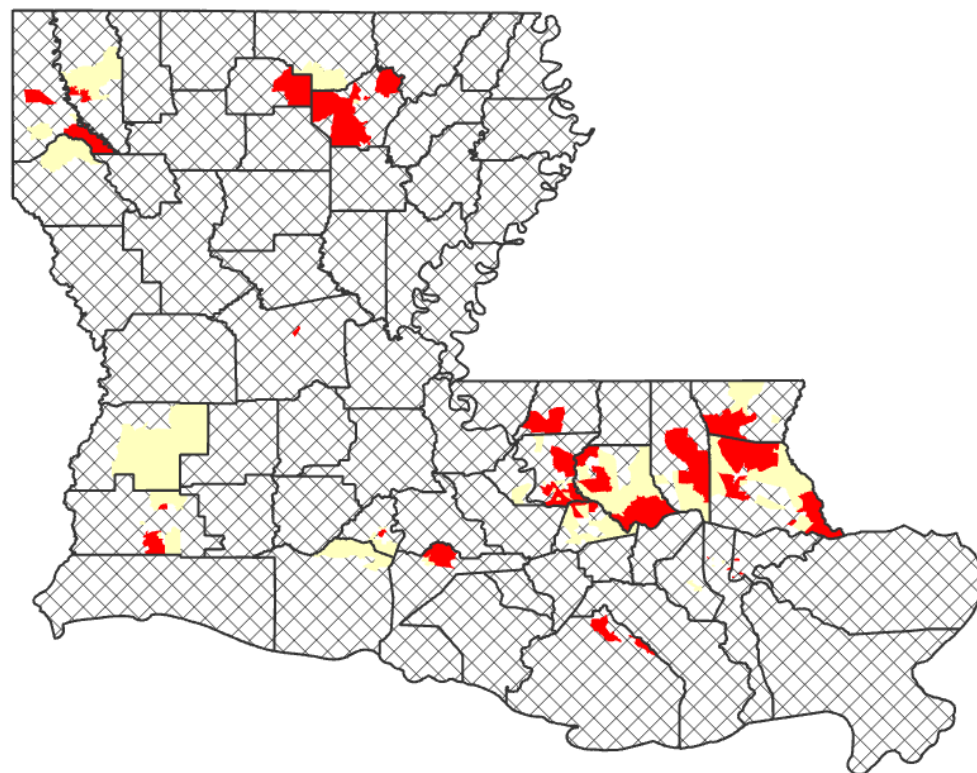
Risk Factors²

- Age
- Sex (higher if assigned male at birth)
- Race/ethnicity (higher risk if White)
- Tobacco use
- Working in the dye, rubber, leather, or aluminum industries
- Working as a hairdresser, mechanist, printer, painter, firefighter, or truck driver
- Living in a community with high levels of arsenic in the drinking water
- Long-term use of urinary catheters
- Bladder birth defects
- Cancer treatment with cyclophosphamide or having radiation therapy to pelvis
- Personal or family history of bladder cancer

¹Average annual age-adjusted (2000 US) incidence rates


²American Cancer Society, *Cancer Facts & Figures 2024*; National Cancer Institute, www.cancer.gov.

Figure 9. Comparison of Cancer Incidence Rates¹ of Individual Census Tracts with Louisiana, Melanoma of the Skin, 2011-2020



 The rate is not statistically significantly different from Louisiana.

 The rate is statistically significantly higher than Louisiana.

 The census tract does not meet the requirements (population count > 20,000 and case count \geq 16 for the 2011-2020 combined data) for publication of cancer incidence data, which is a restriction in state law that is in compliance with HIPAA rules and the standard of United States Cancer Statistics.

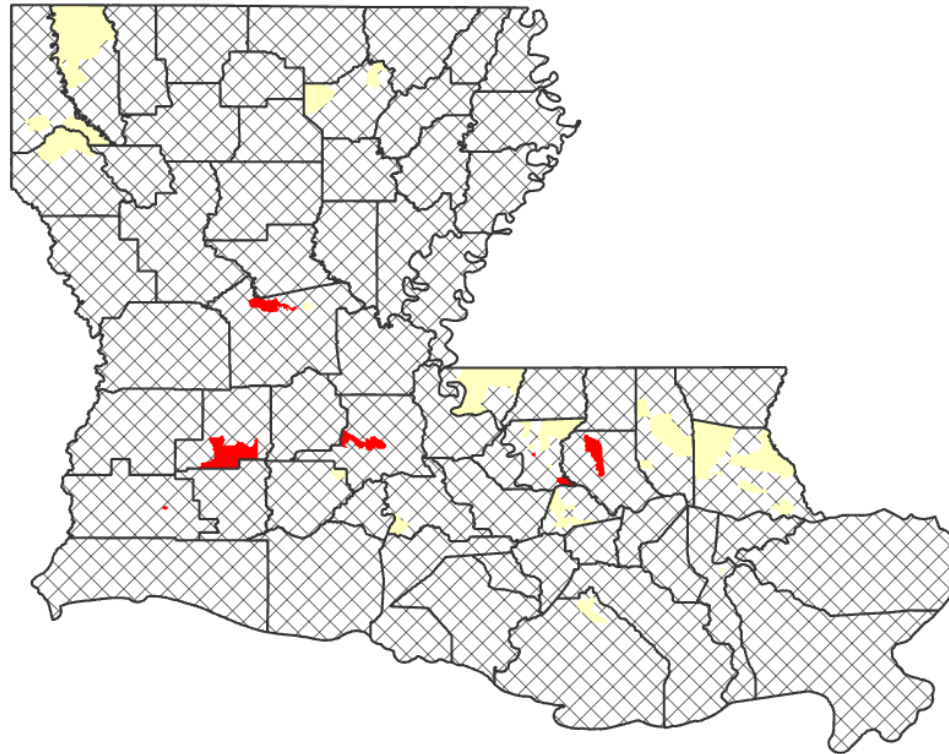
Risk Factors²

- Age
- Sex (higher if assigned male at birth)
- Race
- Presence of atypical, large, or more than 50 moles
- Heavy exposure to ultraviolet radiation from sunlight or indoor tanning beds
- Sun-sensitivity (fair-skinned, burning easily, or having natural blonde or red hair)
- Personal or family history of melanoma or skin cancer
- Personal history of having at least one severe, blistering sunburn in youth

¹Average annual age-adjusted (2000 US) incidence rates


²American Cancer Society, *Cancer Facts & Figures 2024*; National Cancer Institute, www.cancer.gov.

Figure 10. Comparison of Cancer Incidence Rates¹ of Individual Census Tracts with Louisiana, Pancreas, 2011-2020



 The rate is not statistically significantly different from Louisiana.

 The rate is statistically significantly higher than Louisiana.

 The census tract does not meet the requirements (population count > 20,000 and case count ≥ 16 for the 2011-2020 combined data) for publication of cancer incidence data, which is a restriction in state law that is in compliance with HIPAA rules and the standard of United States Cancer Statistics.

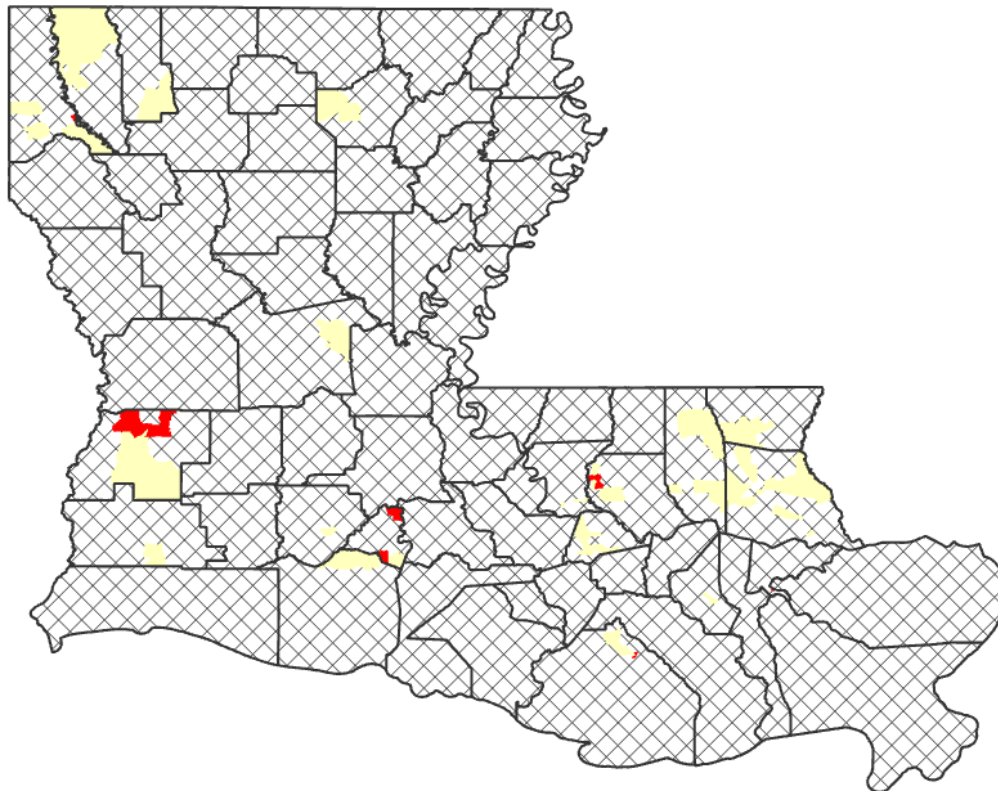
Risk Factors²

- Age
- Sex (higher if assigned male at birth)
- Tobacco use
- Type II diabetes
- Obesity
- Heavy alcohol consumption
- Family history of pancreatic cancer
- Personal history of chronic pancreatitis
- Personal history of Lynch syndrome or certain other genetic syndromes
- *BRCA1* and *BRCA2* mutation carrier

¹Average annual age-adjusted (2000 US) incidence rates

²American Cancer Society, *Cancer Facts & Figures 2024*; National Cancer Institute, www.cancer.gov.

Figure 11. Comparison of Cancer Incidence Rates¹ of Individual Census Tracts with Louisiana, Leukemia, 2011-2020



The rate is not statistically significantly different from Louisiana.

The rate is statistically significantly higher than Louisiana.

The census tract does not meet the requirements (population count > 20,000 and case count \geq 16 for the 2011-2020 combined data) for publication of cancer incidence data, which is a restriction in state law that is in compliance with HIPAA rules and the standard of United States Cancer Statistics.

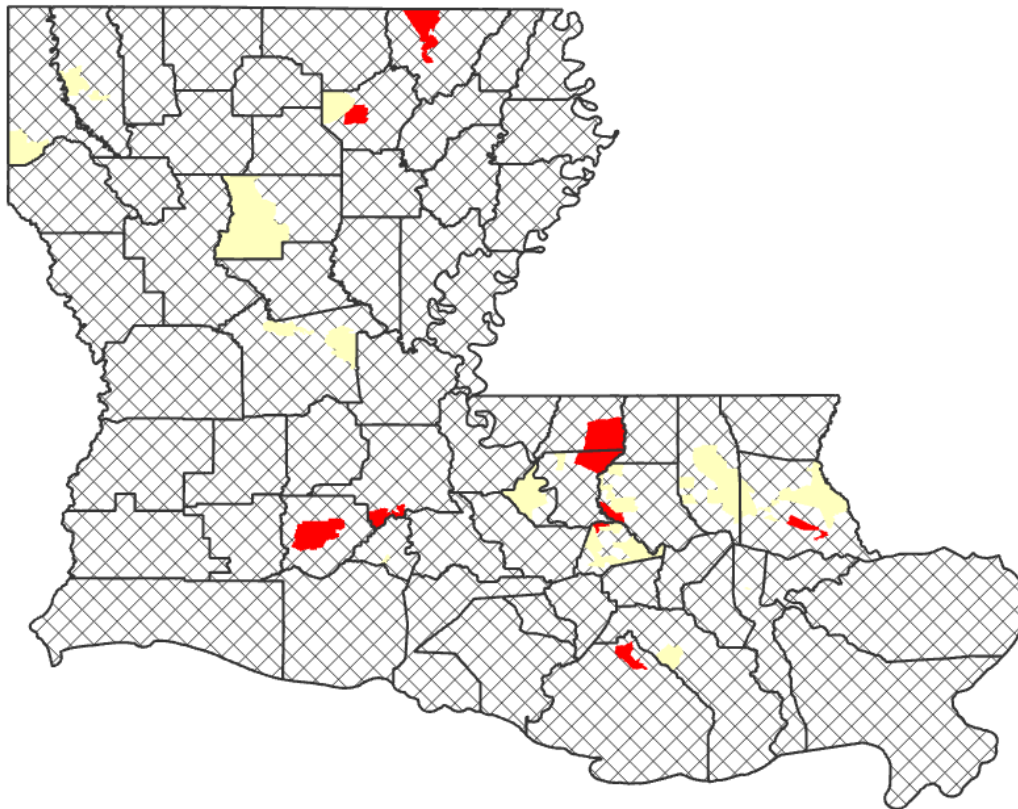
Risk Factors²

- Age
- Sex
- Race
- Obesity
- HTLV-1 infection
- Exposure to high-level ionizing radiation
- Exposure to chemotherapy treatment
- Occupational exposure to benzene or ethylene oxide
- Certain inherited syndromes, such as Down syndrome, Klinefelter syndrome, Fanconi’s anemia, Wiskott-Aldrich syndrome, Bloom’s syndrome, Li-Fraumeni syndrome, and ataxia telangiectasia

¹Average annual age-adjusted (2000 US) incidence rates

²American Cancer Society, *Cancer Facts & Figures 2024*; National Cancer Institute, www.cancer.gov.

Figure 12. Comparison of Cancer Incidence Rates¹ of Individual Census Tracts with Louisiana, Oral Cavity & Pharynx, 2011-2020



Risk Factors²

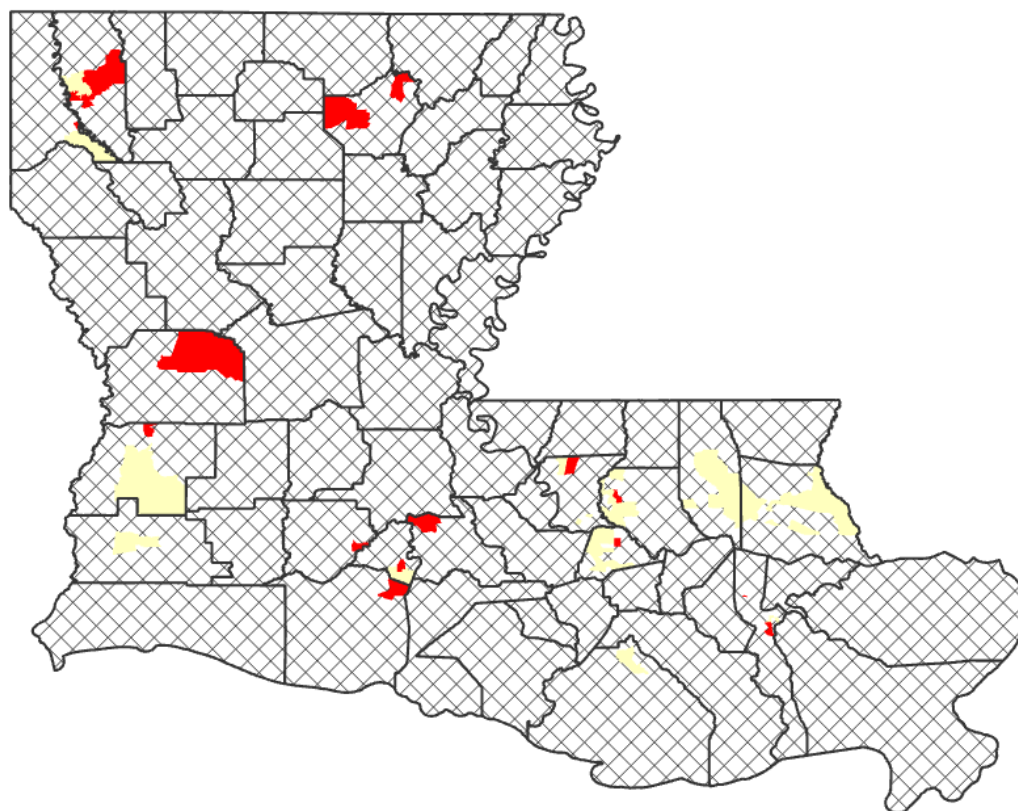
- Age
- Sex (higher risk if assigned male at birth)
- Tobacco use
- Excessive alcohol use
- Sun exposure
- HPV infection of mouth and throat
- Betel quid and/or Gutka chewing
- Personal history of oral cavity and pharynx cancer

- The rate is not statistically significantly different from Louisiana.
- The rate is statistically significantly higher than Louisiana.
- The census tract does not meet the requirements (population count > 20,000 and case count ≥ 16 for the 2011-2020 combined data) for publication of cancer incidence data, which is a restriction in state law that is in compliance with HIPAA rules and the standard of United States Cancer Statistics.

¹Average annual age-adjusted (2000 US) incidence rates

²American Cancer Society, *Cancer Facts & Figures 2024*; National Cancer Institute, www.cancer.gov.

Figure 13. Comparison of Cancer Incidence Rates¹ of Individual Census Tracts with Louisiana, Thyroid, Diagnosed in 2011-2020



- The rate is not statistically significantly different from Louisiana.
- The rate is statistically significantly higher than Louisiana.
- The census tract does not meet the requirements (population count > 20,000 and case count ≥ 16 for the 2011-2020 combined data) for publication of cancer incidence data, which is a restriction in state law that is in compliance with HIPAA rules and the standard of United States Cancer Statistics.

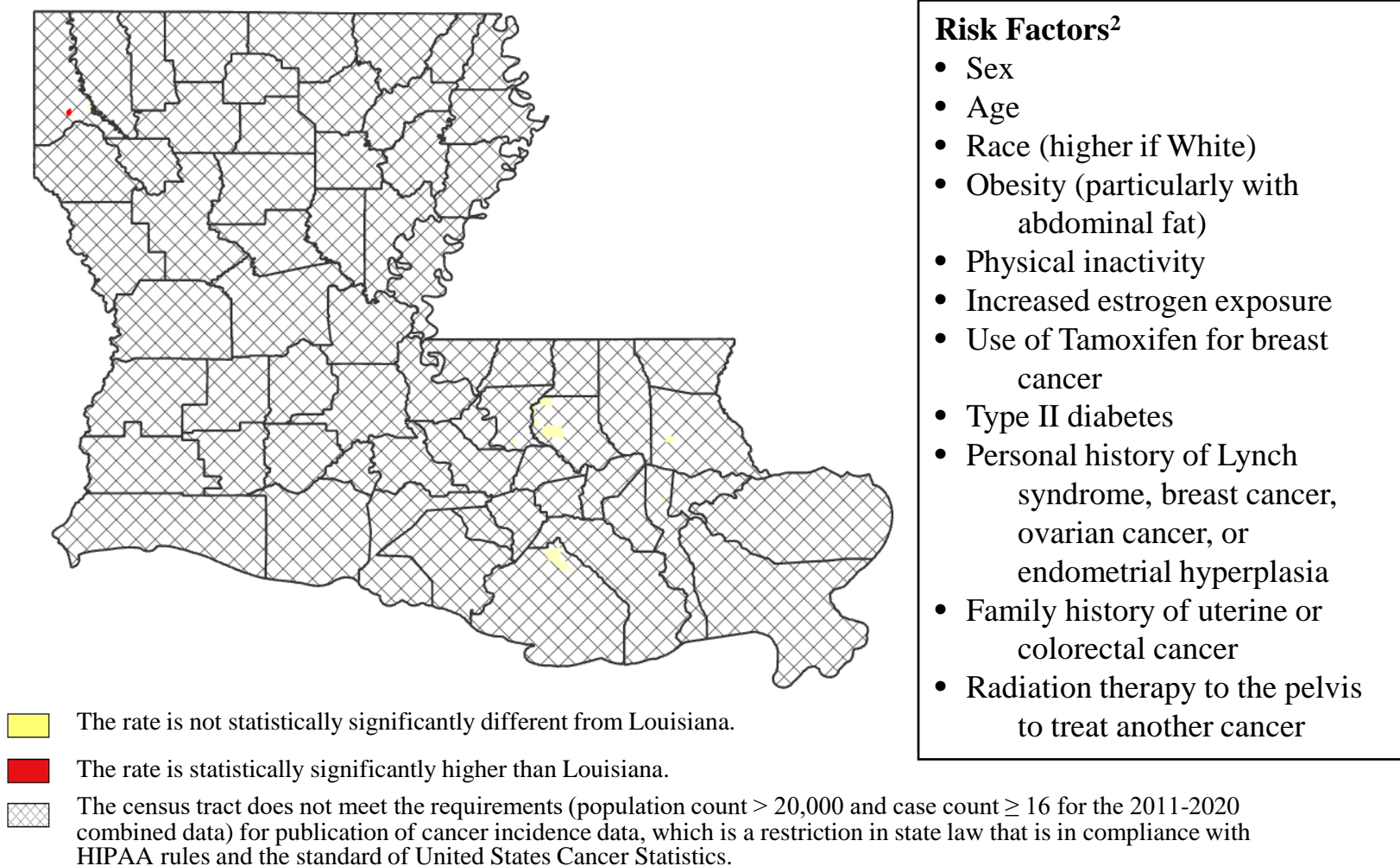
Risk Factors²

- Age
- Sex (higher if assigned female at birth)
- Race (higher risk if Asian)
- Obesity
- Diet low in iodine
- Personal history of goiter or thyroid nodules
- Family history of thyroid cancer
- Exposure to radiation early in life
- Certain genetic conditions, such as *RET* gene mutation or familial adenomatous polyposis

¹Average annual age-adjusted (2000 US) incidence rates

²American Cancer Society, *Cancer Facts & Figures 2024*; National Cancer Institute, www.cancer.gov.

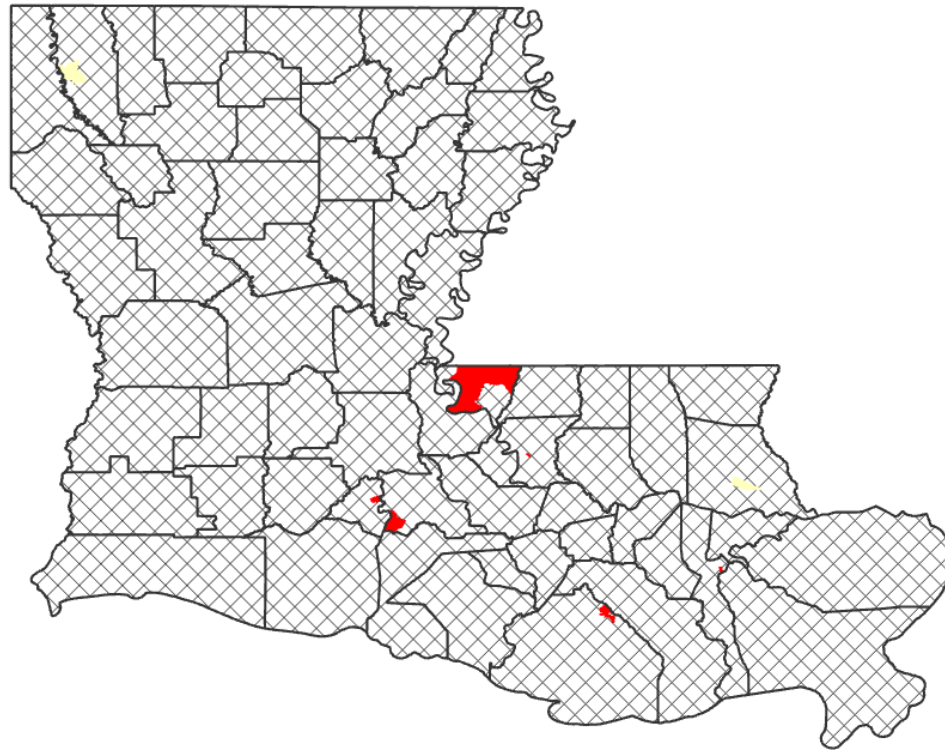
Figure 14. Comparison of Cancer Incidence Rates¹ of Individual Census Tracts with Louisiana, Uterus, Diagnosed in 2011-2020



¹Average annual age-adjusted (2000 US) incidence rates

²American Cancer Society, *Cancer Facts & Figures 2024*; National Cancer Institute, www.cancer.gov.

Figure 15. Comparison of Incidence Rates¹ of Individual Census Tracts with Louisiana, Invasive Liver & Intrahepatic Bile Duct Cancers Diagnosed in 2011-2020



Risk Factors²

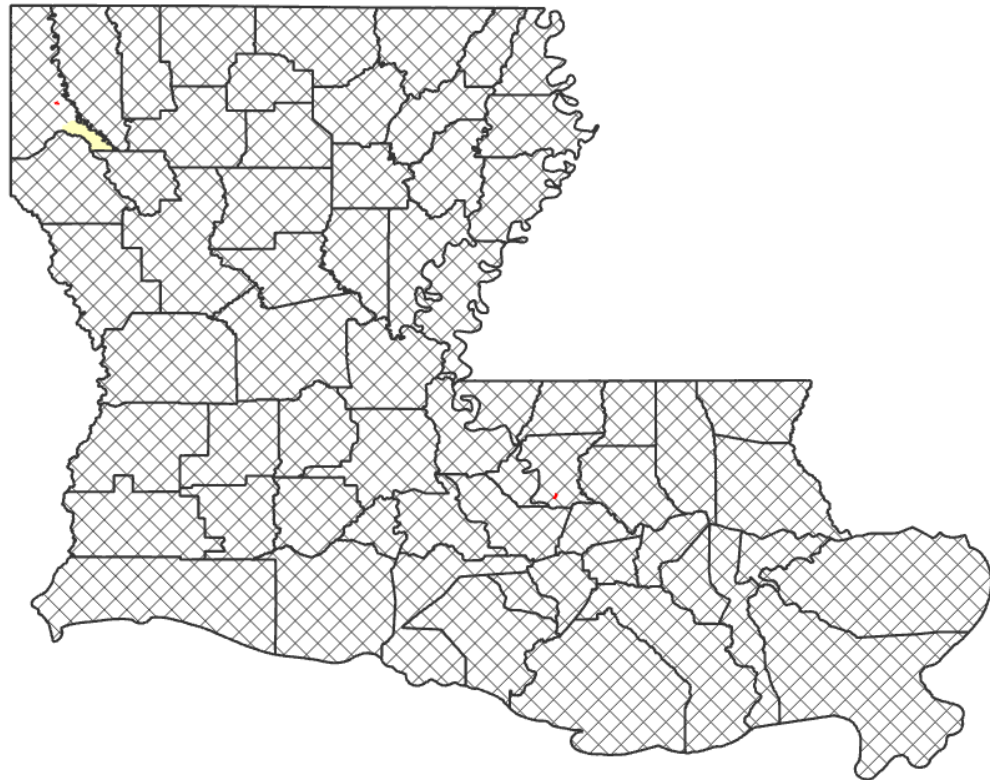
- Sex (higher if assigned male at birth)
- Race (highest rates among Asian Americans and Pacific Islanders)
- Obesity
- Tobacco use
- Heavy alcohol consumption
- Type II diabetes
- Chronic Hepatitis B virus or Hepatitis C virus infections
- Exposure to aflatoxin, vinyl chloride, or thorium dioxide
- Cirrhosis
- Anabolic steroids

- The rate is not statistically significantly different from Louisiana.
- The rate is statistically significantly higher than Louisiana
- The census tract does not meet the requirements (population count > 20,000 and case count ≥ 16 for the 2011-2020 combined data) for publication of cancer incidence data, which is a restriction in state law that is in compliance with HIPAA rules and the standard of United States Cancer Statistics.

¹Average annual age-adjusted (2000 US) incidence rates

²American Cancer Society, *Cancer Facts & Figures 2024*; National Cancer Institute, www.cancer.gov.

Figure 16. Comparison of Cancer Incidence Rates¹ of Individual Census Tracts with Louisiana, Myeloma, Diagnosed in 2011-2020



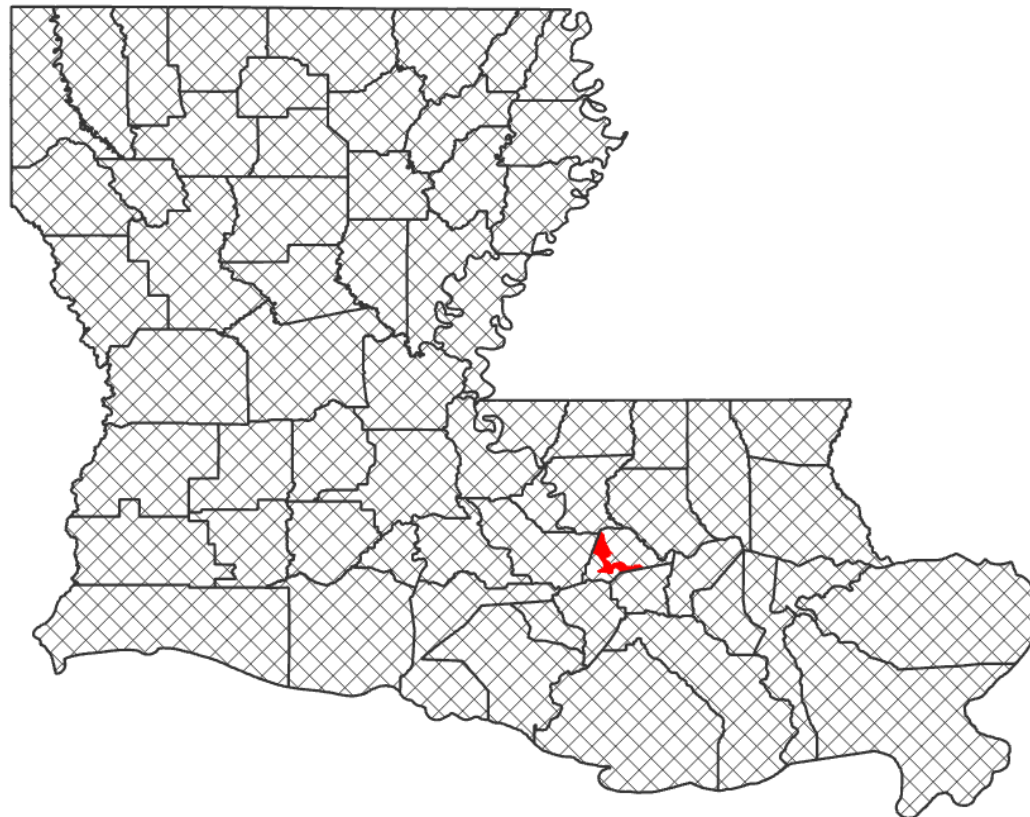
- Risk Factors²**
- Age
 - Sex (higher if assigned male at birth)
 - Race (African American > White)
 - Obesity
 - Family history of myeloma
 - Having another plasma cell disease

- The rate is not statistically significantly different from Louisiana.
- The rate is statistically significantly higher than Louisiana.
- The census tract does not meet the requirements (population count > 20,000 and case count ≥ 16 for the 2011-2020 combined data) for publication of cancer incidence data, which is a restriction in state law that is in compliance with HIPAA rules and the standard of United States Cancer Statistics.

¹Average annual age-adjusted (2000 US) incidence rates


²American Cancer Society, *Cancer Facts & Figures 2024*; National Cancer Institute, www.cancer.gov.

Figure 17. Comparison of Cancer Incidence Rates¹ of Individual Census Tracts with Louisiana, Stomach, Diagnosed in 2011-2020



- Risk Factors²**
- Sex (higher if assigned male at birth)
 - Age
 - Obesity
 - Tobacco use
 - Heavy alcohol consumption
 - Genetic conditions
 - *Helicobacter pylori* infection
 - Diets low in fruits and vegetables, high in salted or smoked foods, high in poorly stored or processed foods, high in pickled vegetables, or frequent consumption of grilled or charcoaled meats

 The rate is statistically significantly higher than Louisiana

 The census tract does not meet the requirements (population count > 20,000 and case count ≥ 16 for the 2011-2020 combined data) for publication of cancer incidence data, which is a restriction in state law that is in compliance with HIPAA rules and the standard of United States Cancer Statistics.

¹Average annual age-adjusted (2000 US) incidence rates

²American Cancer Society, *Cancer Facts & Figures 2024*; National Cancer Institute, www.cancer.gov.