

# Cancer in Southern Louisiana: Progress Report of a Case-Control Study of Lung, Stomach, and Pancreas Cancer

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Maps of U.S. cancer mortality by county for the period 1950-69 pointed to southern Louisiana as a high risk area for cancers of the lung, pancreas, and stomach. This interview study of newly diagnosed cases of cancer at these sites and their appropriate controls was designed to investigate the causes of the high rates and to follow up leads generated by a recent study of 10,000 death certificates in the area. Information is being gathered by face-to-face interviews on diet, ethnic background and alcohol consumption, occupational, medical, and residential histories, as well as other factors related to the unique Acadian culture of the study area.

Interviewing began in several large hospitals in June, 1979, and has been expanded to include 22 hospitals covering the entire southern half of the state. Since the great majority of lung, pancreas, and stomach cancer cases are diagnosed by anatomic pathology and cytology specimens, the primary source of cases has been through pathologists' reports. In addition, though, the abstractor/interviewers work closely with one physician on the regular staff at each hospital to ensure that no cases are missed. Controls are selected from hospital admissions lists or medical records matched to the cases by age, sex, race, and hospital.

Interviewing teams are based in both New Orleans and Baton Rouge to reduce travel time. As of April 1, 1980, 998 interviews have been completed, including 450 cases of lung cancer, 68 stomach cancers, and 48 pancreas cancers which represent an average of 83% of available study subjects. We anticipate continuation of the study in order to complete interviews of 1200 lung cancer cases, 150 pancreatic cancer cases, 200 stomach cancer cases, and an equal number of controls.

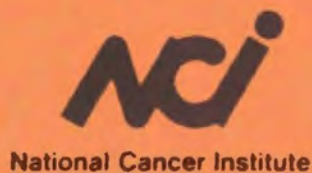
In addition to the information obtained through interviews, manufacturing industries with over 50 employees in the area were located and mapped for future comparison to the residences of cases and controls. It may be possible to utilize EPA maps of various emission levels in the study area to further define the residential exposures of the study subjects.

Interviewing will continue for at least one more year. No results are available at this time.

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NO DISCUSSION FOLLOWING THIS PAPER



PROCEEDINGS OF THE  
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The papers included in these Proceedings were printed as they were submitted to this office.

Appropriate portions of the discussions, working groups and plenary session were sent to the participants for editing. The style of editing varied, as could be expected. To the extent possible, we have attempted to arrive at a consistent format.

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