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The Essential Role of Population-Based Cancer Survival in Cancer Control in the United States

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Cancer may soon become the leading cause of death in the United States. The Centers for Disease Control and Prevention's Division of Cancer Prevention and Control is a national leader in cancer surveillance and cancer control, and is well positioned to monitor the growing cancer burden and to respond from both a population and public health perspective. The National Program of Cancer Registries helps support a nationwide network of cancer registries and the National Comprehensive Cancer Control Program helps to support state-based programs that focus on prevention, detection, treatment, survivorship, and health disparities.

CONCORD is a program for the global surveillance of cancer survival. In 2015, the second cycle of the program (CONCORD-2) established the long-term surveillance of cancer survival worldwide. In this supplement to *Cancer*, net survival by race, stage at diagnosis, and state of residence at the time of diagnosis are presented for 10 commonly diagnosed cancers. This is the largest analysis of population-based survival in the United States to date, covering approximately 80% of the US population. The quality of the CONCORD-2 data, the rigorous statistical methods used, and the large population coverage ensure that the results presented in this supplement provide a broad and comprehensive overview of trends in geographic and racial disparities in survival among patients diagnosed with cancer from 2001 through 2009. These articles also demonstrate the ability of cancer registry data to tell a compelling story regarding the disproportionate burden of lower cancer survival experienced by vulnerable populations. Data are graphically represented to illustrate the large and consistent inequities in cancer survival observed between black and white Americans for many cancers. These inequities represent a large and growing number of potentially avoidable premature deaths.

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The information contained in this supplement provides a unique perspective concerning cancer survival at the state, regional, and national levels, which can be used by cancer control planners and policy makers to help target and evaluate state-based cancer control strategies. These data also benchmark the status of cancer survival in the United States at the beginning of the new millennium, just prior to the passage of the Patient Protection and Affordable Care Act in 2010.

As shown in the CONCORD-2 study, overall survival in the United States is among the highest in the world.³ However, large racial disparities persist and health equity has eluded us. Further improvements in survival may be observed in the era of personalized cancer care and targeted therapies, and as federal and state initiatives seek to improve patient access to timely, effective care. If the goal of these strategies and initiatives is to ensure that all patients with cancer, regardless of race, ethnicity, and socioeconomic position, benefit equally from gains made in improving access to high-quality screening, diagnostic, and treatment services for everyone, the data contained herein can help to measure progress in their achievement.

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