

CANCER AWARENESS IN ILLINOIS

ESOPHAGEAL CANCER

APRIL 2025



April is Esophageal Cancer Awareness Month. In Illinois in 2021, there were 839 people diagnosed with esophageal cancer. The incidence rate was 1.9 per 100,000 females and 9.1 per 100,000 males. In 2021, 684 people (537 males and 147 females) died from esophageal cancer.

The risk factors for esophageal cancer are:

- Acid reflux
- Smoking tobacco
- Obesity
- Barrett’s esophagus
- Drinking alcohol

Symptoms of esophageal cancer may include:

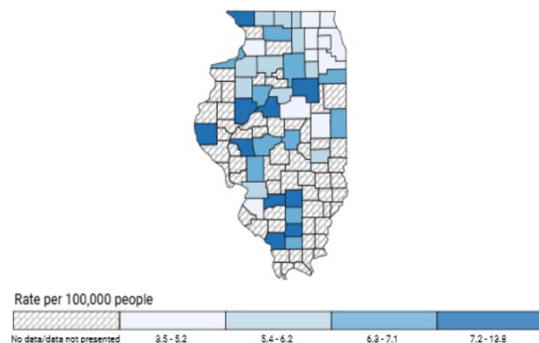
- Difficulty or pain when swallowing
- Weight loss, often because of swallowing problems and lost appetite
- Pain in the chest, behind the breastbone, often after swallowing
- Chronic coughing
- Indigestion or heartburn

SCREENING GUIDELINES

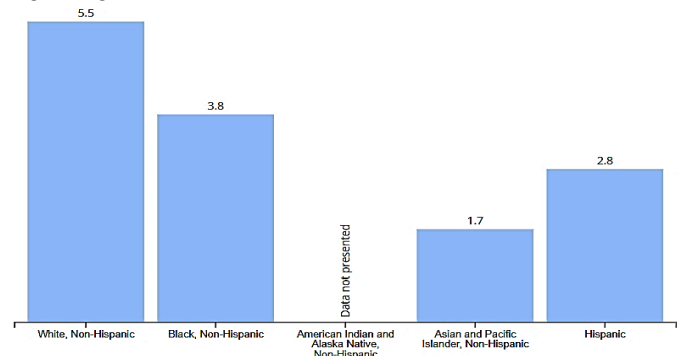
No screening guidelines exist for esophageal cancer. Esophageal cancer can be detected through several different tests, including an endoscopy with biopsy, endoscopic ultrasonography (endoscopy and ultrasound), and a PET scan.

INCIDENCE RATES

Rate of esophageal incidence by Illinois county, all ages, all races and ethnicities, 2017-2021.



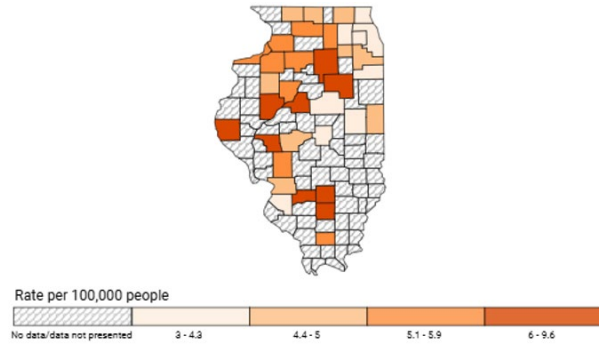
Rate of new cancers in Illinois by race and ethnicity, 2017-2021.



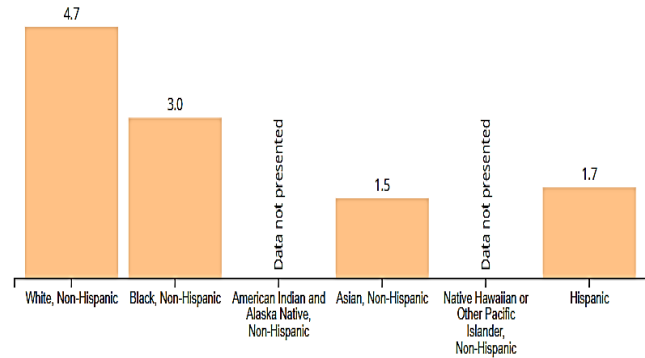
Source - U.S. Cancer Statistics Working Group. U.S. Cancer Statistics Data Visualizations Tool, based on 2022 submission data (1999-2021): U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, and National Cancer Institute; <https://www.cdc.gov/cancer/dataviz>, released in June 2024.

MORTALITY RATES

Rate of esophageal cancer mortality by Illinois county for all ages, races and ethnicities, 2018-2022.



Rate of new cancer deaths in Illinois by race and ethnicity, 2018-2022.

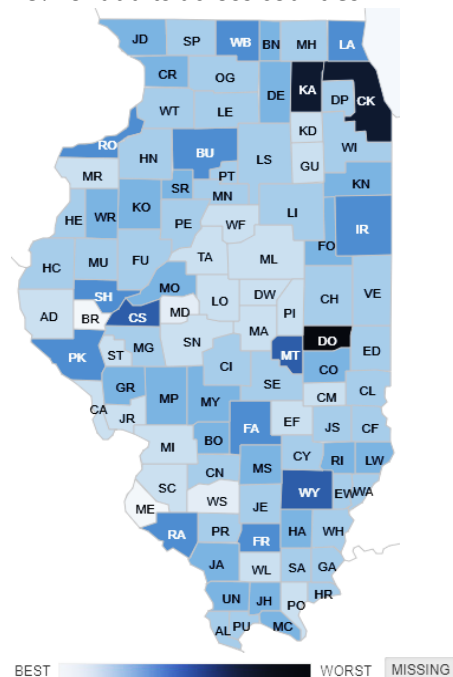


Source - U.S. Cancer Statistics Working Group. U.S. Cancer Statistics Data Visualizations Tool, based on 2022 submission data (1999-2021): U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, and National Cancer Institute; <https://www.cdc.gov/cancer/dataviz>, released in June 2024.

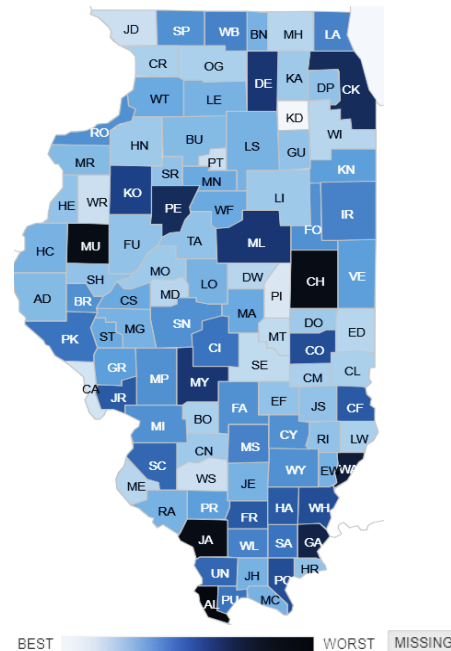
GROUPS AT HIGHEST RISK

Even though anyone can develop esophageal cancer, White non-Hispanic individuals have the highest incidence and mortality rates compared to other groups. Esophageal cancer incidence rates are associated with insurance status and socioeconomic status, such as education level, median household income, and income inequality.

In Illinois, 9% of adults under age 65 did not have health insurance. This ranged from 4% to 13% of adults across counties.



In Illinois, households with higher incomes had incomes 4.9 times that of households with lower incomes. This inequality ranged from 2.9 to 6.0 times across counties.

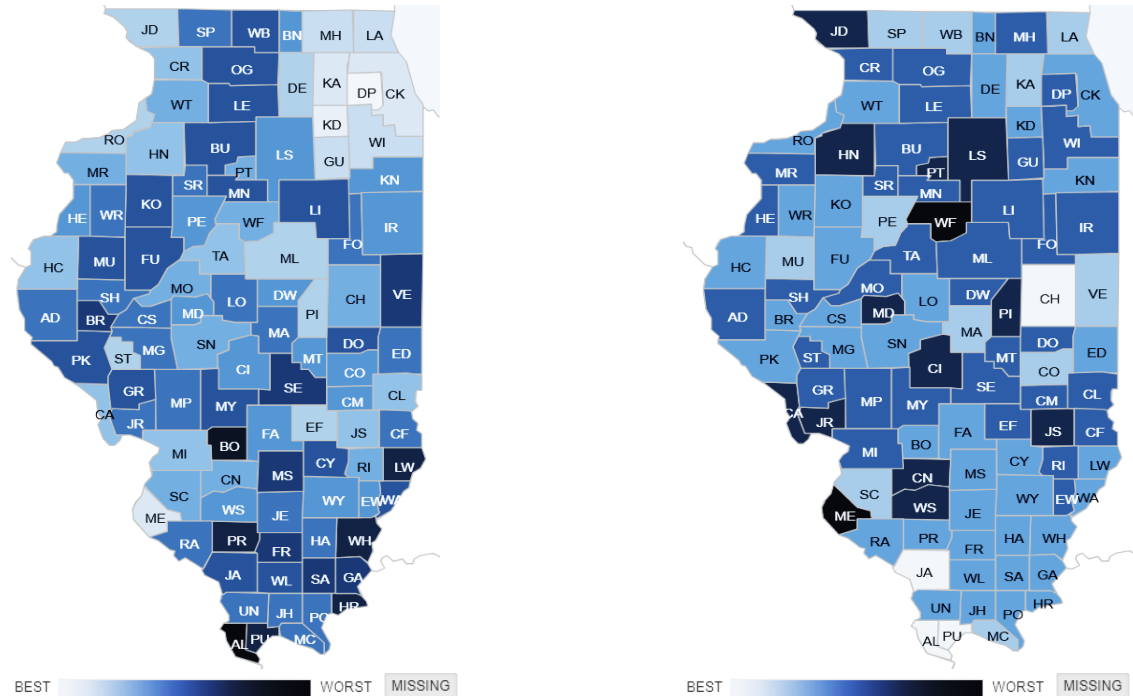


Smoking is a major risk factor for esophageal cancer. Smoking can damage your DNA, suppress your immune system, and contribute to conditions that may lead to esophageal cancer, like gastroesophageal reflux disease (GERD).

Drinking alcohol also increases the risk of esophageal cancer. The more alcohol someone drinks, the higher their chance of getting esophageal cancer. Smoking combined with drinking alcohol raises the risk of the squamous cell type of esophageal cancer much more than using either alone.

In Illinois, 13% of adults are current cigarette smokers. This ranged from 10% to 23% of adults across counties.

In Illinois, 19% of adults reported binge or heavy drinking. This ranged from 18% to 24% of adults across counties.



Source: <https://www.countyhealthrankings.org/health-data/illinois?year=2025>

SUGGESTED POLICY, SYSTEM, AND ENVIRONMENTAL CHANGE STRATEGIES

- Provide all individuals with regular cash transfers, without conditions, over their lifetimes.
- Increase support for non-profit health care organizations and deliver comprehensive care to uninsured, underinsured, and vulnerable patients regardless of their ability to pay; often referred to as community health centers (CHCs).
- Provide basic skills (e.g., reading, math, writing, English language, or soft skills) and industry-specific training, along with other supports, known as occupationally contextualized basic education programs.
- Provide occupation-specific training for low-skilled individuals in high-growth industries, with education and support, usually with stackable credentials and work experience opportunities.
- Deliver tobacco cessation advice and motivational messages via text or video message.
- Implement systems that support health professionals in helping patients quit tobacco use, often through referrals, self-help materials, and pharmacotherapy.
- Provide information and increase motivation to change or prevent problematic alcohol consumption in a short session.

CLINICAL TRIALS

Clinical trials are research studies that doctors use to find new ways to improve treatments and the quality of life for people with certain diseases. Researchers design cancer clinical trials to test new ways to treat cancer, find and diagnose cancer, prevent cancer, and manage symptoms of cancer and side effects from its treatment.

- National Cancer Institute: <https://ccr.cancer.gov/clinical-trials/all?query=esophageal+cancer>
- National Library of Medicine: <https://www.clinicaltrials.gov/search?cond=esophageal%20cancer>

RESOURCES

- American Cancer Society: <https://www.cancer.org/cancer/types/esophagus-cancer.html>
- Illinois Tobacco Quitline: <https://quityes.org/> or by phone (Se habla español):
 - 1-866-QUIT-YES (1-866-784-8937)
 - TTY (1-800-501-1068)
 - Monday through Friday: 7 a.m. – 9 p.m. CST
 - Saturday and Sunday: 9 a.m. – 5 p.m. CST
- Mayo Clinic: <https://www.mayoclinic.org/diseases-conditions/esophageal-cancer/symptoms-causes/syc-20356084>
- National Cancer Institute: <https://www.cancer.gov/types/esophageal>

CONTINUING EDUCATION

- CDC: <https://www.train.org/cdctrain/search?query=esophageal%20cancer>
- Medscape CME and Education: <https://search.medscape.com/search/?q=%22esophageal%20cancer%22&plr=edu&page=1>

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