# **Alcohol-Associated Cancers in Texas**

# Alcohol-Associated Cancer Sites

Alcohol use is associated with an increased risk of at least six different types of cancers: 1,2

- Oral cavity and pharynx
- Larynx
- Liver
- Esophagus
- Female breast
- Colon and rectum

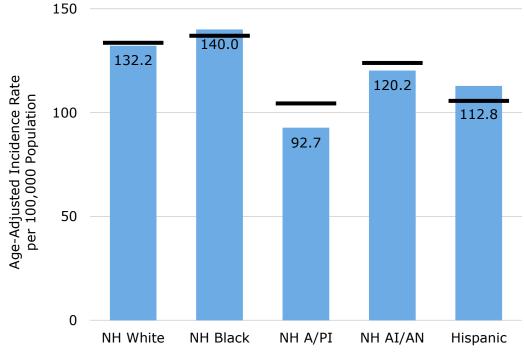
### **Definitions**

Term	Men	Women
Moderate alcohol use	Up to 2 drinks a day	Up to 1 drink a day
Heavy alcohol use	15 or more drinks a week, or 5 or more per day	8 or more drinks a week, or 4 or more per day
Binge drinking	5 or more drinks in one sitting	4 or more drinks in one sitting

In the U.S., one drink is defined as 14 grams of alcohol. This equals 12 ounces of regular beer, 8-10 ounces of malt liquor, 5 ounces of wine, or 1.5 ounces of 80-proof distilled spirits (liquor).

## **How Does Texas Compare to the United States?**

Alcohol-Associated Cancer Sites by Race/Ethnicity, Texas, 2016-2020 Black lines represent U.S. incidence rates



NH = Non-Hispanic; A/PI = Asian/Pacific Islander; AI/AN = American Indian/Alaska Native

### **Incidence Rates (2016-2020)**

Incidence rates for alcoholassociated cancers were lower in Texas compared to the U.S. average for all race/ethnicity groups except Hispanics and Non-Hispanic (NH) Blacks.

### **Comparing Drinking Rates**

According to self-reported data, when compared to the U.S., Texas had a lower rate of adults reporting alcohol consumption in the past month (51.5% Texas vs. 53.2% U.S.). Texans also had lower rates of heavy drinking (5.7% Texas vs. 6.2% U.S.). However, a higher proportion of Texas adults reported binge drinking (16.4% Texas vs. 15.3% U.S.).



The COVID-19 pandemic disrupted health services, leading to delays and reductions in cancer screening, diagnosis, and reporting to some central cancer registries. This may have contributed to a decline in new cases for most cancer sites in 2020. Because 2020 was a temporary, anomalous year caused by the pandemic, it can bias estimates such as cancer incidence trends that are of substantive interest. Trends are not included in this report. See the TCR website for more information as it becomes available.



## **Alcohol-Associated Cancers**

### **Alcohol and Tobacco Use**

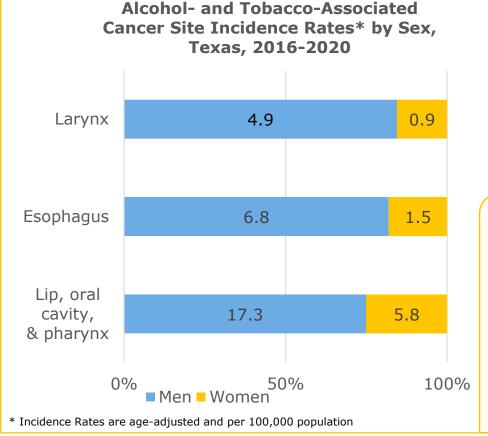
Alcohol may help harmful chemicals, such as those in tobacco smoke, to enter the cells lining the upper digestive tract more easily. This could explain why the combination of smoking and drinking is much more likely to cause cancers in the mouth or throat than smoking or drinking alone.<sup>3</sup>

# **Alcohol Consumption and Alcohol- Associated Cancers**

Those who have no more than one drink per day and those who binge drink have a modestly increased risk of some cancers.<sup>1</sup>

Overall, the more alcohol a person drinks, particularly the more alcohol a person drinks regularly over time, the higher their risk of developing an alcohol-associated cancer.<sup>1</sup>

## **Tobacco-Use Relationship to Alcohol-Associated Cancers in Texas**



People who use both alcohol and tobacco have a greater risk of developing cancers of the oral cavity, pharynx, larynx, and esophagus than people who use either alcohol or tobacco alone. <sup>1</sup>

 For oral and pharyngeal cancers, the risks associated with using both alcohol and tobacco are multiplicative. That means risks are greater than they would be from adding the individual risks associated with alcohol and tobacco together.<sup>1</sup>

Men have higher incidence rates than women for cancers associated with both alcohol and tobacco use.

- When compared to women in Texas for 2021, a higher percentage of men self-reported drinking alcohol in the last month, binge drinking, and heavy drinking.
- Men also have a higher self-reported percentage of current and former smoker status, while a higher percentage of women self-report having never smoked.<sup>3</sup>



Please visit the National Institute on Alcohol Abuse and Alcoholism (NIAAA) Navigator for more information on Alcohol Treatment: Find Your Way to Alcohol Treatment | Navigator | NIAAA (nih.gov)

The NIAAA Alcohol Treatment Navigator® contents (including text and graphics) are for educational and informational purposes only. The content is not a substitute for medical diagnosis or advice. Always seek the advice of a qualified health professional with questions you have about treating alcohol use disorder (AUD)

- <sup>1</sup> National Cancer Institute. 2021. <a href="https://www.cancer.gov/about-cancer/causes-prevention/risk/alcohol/alcohol-fact-sheet">https://www.cancer.gov/about-cancer/causes-prevention/risk/alcohol/alcohol-fact-sheet</a>
- <sup>2</sup> American Cancer Society. 2020. <a href="https://www.cancer.org/cancer/risk-prevention/diet-physical-activity/alcohol-use-and-cancer.html">https://www.cancer.org/cancer/risk-prevention/diet-physical-activity/alcohol-use-and-cancer.html</a>
- <sup>3</sup> The Texas Behavioral Risk Factor Surveillance System (BRFSS), 2021. https://www.cdc.gov/brfss/brfssprevalence/index.html

#### Data sources

- Texas incidence data: Texas Cancer Registry (www.dshs.texas.gov/tcr) SEER\*Stat Database, 1995-2020 Incidence, Texas statewide, 2022 Submission, cutoff 11/07/2022. Texas Department of State Health Services, Cancer Epidemiology and Surveillance Branch, created February 2023.
- US incidence data: National Program of Cancer Registries and Surveillance, Epidemiology and End Results Program SEER\*Stat Database: NPCR and SEER Incidence U.S. Cancer Statistics Public Use Research Database, 2022 Submission (2001-2020). United States Department of Health and Human Services, Centers for Disease Control and Prevention and National Cancer Institute. Released June 2023. Accessed at <a href="https://www.cdc.gov/cancer/uscs/public-use">www.cdc.gov/cancer/uscs/public-use</a>.

The Cancer Epidemiology and Surveillance Branch (CESB), Texas Department of State Health Services prepared this data brief. If you have questions or would like to request additional statistics, please contact us by emailing CancerData@dshs.texas.gov or calling 1-800-252-8059.