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CANCER EPIDEMIOLOGY, BIOMARKERS & PREVENTION

HIGHLIGHTS

Selected Articles from This Issue

Risk and Protective Factors for Cancer Mortality Among United States Service Members and Veterans

Photo by Brian Penny via Pixabay

Sharifian *et al.* | Page 606

This longitudinal study analyzed data from the Millennium Cohort Study (2001–2018) to examine risk and protective factors for cancer mortality among service members and veterans. Findings revealed that non-deployers were more likely to die from cancer compared with deployers who did not experience combat, consistent with the healthy deployer effect. The study by Sharifian and colleagues also found that enlisted personnel were more likely to die from lung cancer than officers. This research is timely given current mandates to examine whether military-related exposures affect cancer risk among service members and veterans, including President Biden's Cancer Moonshot Program and the newly enacted VA PACT Act.

Risk Factors for HPV-associated Subsequent Malignant Neoplasms among Adolescent and Young Adult Survivors

Ou *et al.* | Page 625

Using Surveillance, Epidemiology, and End Results (SEER) program data from 1976 to 2015, Ou and colleagues used multiple methods to address unexamined questions about risk factors for Human-papillomavirus (HPV) associated second malignant neoplasms (SMN) among adolescent and young adult (AYA). The authors found that the burden of HPV associated SMNs among AYA cancer survivors was substantially greater than the general public. The increased risk was driven by subsequent oropharyngeal tumors. AYA survivors first diagnosed with leukemia, lymphoma, Kaposi sarcoma, and tumors associated with HPV infection had the highest risk for HPV-SMNs. To prevent HPV-SMNs, AYA survivors should be encouraged to receive the HPV vaccine and provided with education about the importance of conducting oral exams.

Rural, Large Town, and Urban Differences in Optimal Subspecialty Follow-up and Survivorship Care Plan Documentation among Childhood Cancer Survivors

Noyd *et al.* | Page 634

Children with cancer from rural and non-urban areas face unique challenges while on therapy, yet survivorship care for this vulnerable population merits consideration to promote health equity. Noyd and colleagues integrated cancer registry, electronic health record, and geospatial data to investigate non-urban disparities in follow-up care among survivors in Oklahoma. Survivors from large towns were more likely to receive suboptimal follow-up compared with survivors from urban areas (Adjusted Risk Ratio = 2.2; 95% Confidence Interval = 1.5–3.2). Health systems-based interventions, informed by longitudinal surveillance of survivor cohorts, are critical to deliver equitable survivorship-focused care for this at-risk community

Changes in Breast Cancer Risk and Risk Factor Profiles among U.S.-born and Immigrant Asian American Women Residing in the San Francisco Bay Area

John *et al.* | Page 666

Breast cancer incidence rates have been rising in Asian American women. While prior literature demonstrated lower risk among foreign-born compared to U.S.-born Asian Americans, John and colleagues found that this trend has changed. When evaluating different birth cohorts, they found that risk was higher for foreign-born Asian American women aged ≤55 years in the younger birth cohort (1951–1984). Temporal changes were observed in established breast cancer risk factors by birthplace and birth cohort. Foreign-born and U.S.-born women in the younger birth cohort had similar risk factor profiles, suggesting that unidentified factors contribute to the higher risk in foreign-born Asian American women.

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