RISING MORTALITY DUE TO NON-HODGKIN LYMPHOMA AMONG ADULTS IN THE UNITED STATES

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Introduction

The incidence of non-Hodgkin lymphoma (NHL) has steadily increased over the past decades due to environmental factors and improved diagnostic strategies.

We explore the trends of mortality rate among adults with NHL in the United States and compare their demographic properties.

Methods

Using the Centers for Disease Control and Prevention Wide-Ranging Online Data for Epidemiologic Research (CDC WONDER), age-adjusted mortality rate (AAMR) per 100,000 adults aged ≥25 years with NHL was explored between 2018 and 2023.

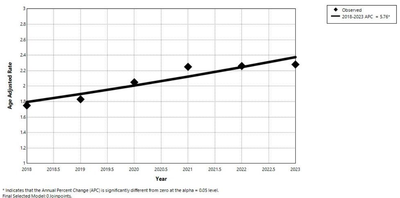
Joinpoint analyses were performed to understand the changes in AAMR and reported as annual percent change (APC).

The sample was further stratified by sex and race with their respective APCs calculated.

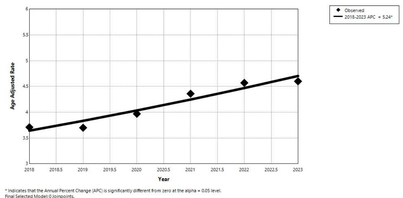
Distribution in different states across the United States was compared.

Results

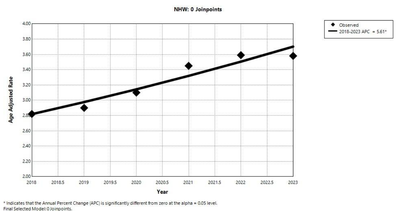
The APC in females was 5.76% (AAMR increased from 1.75 to 2.28 per 100,000; P<0.01).



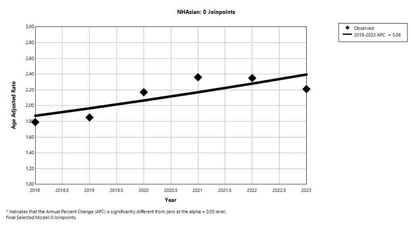
The APC in males was 5.24% (AAMR increased from 3.71 to 4.60 per 100,000; P<0.01).



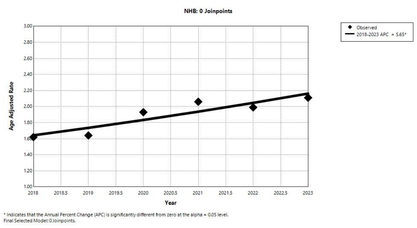
The APC was 5.61% in non-Hispanic White adults (AAMR increased from 2.82 to 3.58 per 100,000; P<0.01)



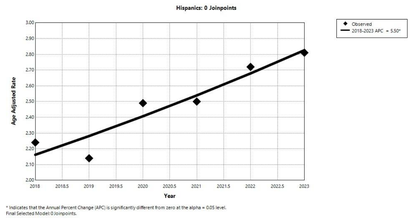
The increased AAMR in non-Hispanic Asian adults from 1.79 to 2.21 per 100,000 was not statistically significant (APC, 5.06%; P=0.058)



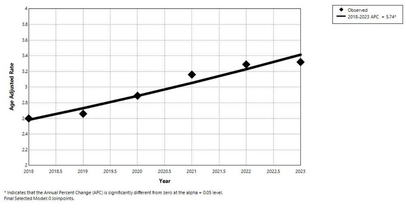
The APC was 5.65% in non-Hispanic Black adults (AAMR increased from 1.62 to 2.11 per 100,000; P=0.012)



The APC was 5.50% in Hispanic adults (AAMR increased from 2.24 to 2.81 per 100,000; P<0.01)



The AAMR of NHL increased from 2.60 to 3.32, with an APC of 5.74% (P<0.01).



Discussions and Conclusions

The overall mortality rate from Non-Hodgkin Lymphoma (NHL) has increased over time. The higher annual percentage change (APC) in females suggests a potential sex disparity in disease management, especially notable given the higher incidence of NHL in males.

Regional differences in age-adjusted mortality rates (AAMR) may be influenced by several factors, including:

- -Unequal access to healthcare services
  -Environmental exposures
  -Differences in case detection and death reporting
  -Variation in NHL subtypes

Future public health efforts should prioritize improving cancer awareness, addressing healthcare access gaps, and developing prevention strategies tailored to regional and population-specific needs.

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Please scan

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