

Preface

There are profound differences between countries, ethnic groups, and races in risks of virtually all common cancers; variations in cancer rates by population may reflect the influence of genetic, environmental, or behavioral risk factors and such variations have long motivated speculation about the causes of cancer. Our knowledge about whether the causes of the observed differences in cancer risk are modifiable is greatly enhanced by consideration of migration studies. When rates of a particular disease change rapidly among migrants, then this is supporting evidence that risk of that disease may be at least partly environmentally or behaviorally driven, rather than solely due to differences in the genetic background and therefore not amenable to intervention. This is especially true when risks in migrants approach those seen in the host country.

The most rapidly developing countries in the world today are in Asia, and Asians constitute the fastest growing immigrant populations in the USA. Asian Americans represent a heterogeneous population that includes Asian Indians, Chinese, Filipino, Japanese, Kampuchean (Cambodian), Korean, Vietnamese, and other Southeast Asians. Cancer is the leading cause of death for Asian American men and women. Studies of cancer in Asian Americans can reveal important clues to disease etiology since increases or decreases in cancer rates in Asian Americans can help to identify environmental and lifestyle causes of cancer. This book describes the current state of knowledge about the epidemiology of cancer risks in Asian Americans with specific references to changes in behavior and exposures due to the process of acculturation in the USA. The usual approaches to analytic investigation of epidemiology of complex diseases in US populations, i.e., case-control and cohort studies, have only sometimes or recently included Asian Americans to any large degree. Part of the rationale for this book is to be as thorough as possible in bringing to light what has been learned from these traditional approaches despite the often lack of data on Asian Americans. In addition, an overall theme of the book is the judicious use of ecologic comparisons as a source of information about the Asian American cancer experience, the risk factors underlying that experience, and the relevancy of the Asian American cancer experience to the rest of the Americas and the world, particularly as a source of information about the effects of continued globalization and acculturation on cancer risks.

The first section includes four chapters. Chapter “Resources and Methods for Studying Cancer among Asian Americans” summarizes the resources in the US and established study methods to conduct such studies in Asian Americans. Chapters “Cancer Incidence and Mortality Patterns among Chinese Americans” and “Cancer Incidence and Mortality among Filipinos in the United States and the Philippines: Patterns and Trends” provide a review of the specific cancer patterns in the two largest Asian American groups in the USA. Chapter “Cancer Screening among Asian Americans” examines the utilization of cancer screening tests among selected Asian American ethnic groups and describes the research on factors that are associated with screening. The second section includes eight chapters. Upon migration to the USA, there are increases in the incidence of cancers that are typically associated with westernization and decreases in the incidence of cancers that are linked to an infectious origin and other lifestyle factors that are prevalent in Asia. Chapters “Lung Cancer Among Asian Americans,” “Colorectal Cancer among Asian Americans,” “Prostate Cancer Among Asian Americans,” “Breast Cancer among Asian Americans,” and “Endometrial Cancer among Asian Americans” cover the cancer sites (lung, colorectum, prostate, breast, and endometrium) that are traditionally associated with Western lifestyles. Reasons that are favored to explain the increases in these cancers in Asian Americans are explored, including increased prevalence of the higher risk profiles in Asian Americans, timing of exposure to particular risk factors, and the magnitude of risk associations in Asian Americans. Chapters “Liver Cancer Among Asian Americans,” “Gastric Cancer Among Asian Americans,” and “Cervical Cancer Among Asian Americans” cover cancer sites that are historically very common in Asia; while the incidence rates of these cancers decline in Asian Americans, their rates remain relatively high. In these chapters, reasons that may explain the decline in the incidence of these cancers upon migration are discussed, paying attention to the prevalence of changing risk factors, the importance of timing of exposures, and other cofactors important in the etiology of these cancers. Whenever possible, genetic determinants and gene–environment relationships associated with specific cancers were included in the discussion. As will be evident, most of the information on Asian Americans is based largely on studies conducted in Japanese Americans. While Chinese and Filipino Americans were included in some analytic epidemiologic studies, few studies focused on their risk factors specifically. Even less has been done in the other Asian American groups. As the population of the other Asian ethnicities increases in the USA, there is a need to include other Asian ethnic groups in etiologic studies despite the challenges of small sample sizes, language, and other barriers.

In summary, this book aims to provide important and up-to-date information on cancer trends and risk factor patterns among the large and growing Asian American population in the USA. The chapters place an emphasis on the most common cancers diagnosed in Asian Americans, examining risk factor patterns, but also pointing to the gaps in knowledge as we often had to rely on results from studies conducted in Asia.

Los Angeles, CA

Anna H. Wu, Ph.D.
Daniel O. Stram, Ph.D.

Cancer Epidemiology Among Asian Americans

Wu, A.H.; Stram, D.O. (Eds.)

2016, XI, 292 p. 32 illus., 28 illus. in color., Hardcover

ISBN: 978-3-319-41116-3