Westport Cancer Forum Planned

by Thad Van Bueren

Last month I requested information about diagnosed cases of cancer in our community. Thanks to all of those who have come forward. Let me explain why I am concerned. It is well known that cancer is the second leading cause of death in the US. Many of us have personal experience with that deadly group of diseases. It was my personal acquaintance with local victims that made me ask: Is the local rate higher than expected and, if so, what is the cause?

I spent some time collecting information and my preliminary findings are conveyed in the table that accompanies this article. As a caveat, the local incidence rates are not comprehensive and the actual rates are undoubtedly higher. Rates for Leukemia, Breast, and Bladder cancers are of particular concern because correlation with environmental contamination is strongly suspected. I discussed this with County Health officials who will endeavor to share more complete local incidence data.

							Expected	Reported
		Study			Mean	County	Westport	Westport
Area	Cancer Type	Period	Sex	Age	Rate*	Cases	Incidence**	Cases+
County	All Types	1995-2015	Both	All	436.6	9614	36.1	20
County	Breast Cancer	1995-2015	Female	All	120.7	1393	4.6	7
County	Bladder Cancer	1995-2015	Both	All	38.6	852	3.2	2
County	Leukemias	1995-2015	Both	All	12.6	266	1.0	3
County	Leukemias	1988-2014	Both	0-19	6.8	43	0.4	1
USA	Breast Cancer	2011-2015	Female	All	145.9			
USA	Leukemias	2011-2015	Both	All	15.2			
USA	Bladder Cancer	2011-2015	Both	All	23.0			

*Age adjusted rate per 100,000. **Based on county rate and local mean population. +Anecdotal reporting (not comprehensive).

In the pristine rural setting we inhabit, the main environmental pollution vector is the herbicides applied in local forests. There is cause for concern because many of us rely on surface water (for example, the village water supply). The accompanying figure shows the pounds of concentrated active ingredients applied per square mile in local watersheds since 1990. The chemicals in descending order of prevalence are imazapyr, an unspecified compound, triclopyr, glyphosphate, and sulfomettureon methyl. Garlon was sprayed aerially in the more distant past and that data is being compiled. Research is planned to establish persistence, bioaccumulation, and toxicology.

A meeting is planned to brainstorm this topic on Saturday January 5th at 10 AM at the Westport Community Center. A brief presentation will be offered. If this interests you, please join that conversation. This study is intended to establish facts that can be used to identify comprehensive incidence rates, causes, and possible remedies. Community participation is essential to verify facts. A confidential questionnaire will be shared at the meeting. You can contact me at 964-7272 to share information or learn more.

