



## Nationwide Incidence Rate

1 in 9 men will be diagnosed during his lifetime  
2.9M men currently diagnosed

### This year in the United States...

New cases: 174,650  
Deaths: 31,620

Veterans are 1.5x more likely to get prostate cancer

African-American men are 2.2x more likely to die of prostate cancer

## Incidence Rate in Maryland

125.7 in every 100,000 men diagnosed  
20.2 in every 100,000 men die from the disease

### This year in Maryland...

New cases: 3,810  
Deaths: 550

### National Rankings by State:

#8 for prostate cancer incidents  
#16 for prostate cancer deaths

*Source: Estimates based on 2019 data from the American Cancer Society.*

## ZERO's Impact in Maryland

### Patient Programs

ZERO helped provide co-pay assistance to advanced prostate cancer patients:

\$2,480,455.14 total provided to  
604 men in Maryland.

### Upcoming Invitations to Speak to Constituents

Baltimore – September 22

**ZERO – The End of Prostate Cancer** is the leading national nonprofit with the mission to end prostate cancer. ZERO advances research, improves the lives of men and families, and inspires action. Visit our website: [www.zerocancer.org](http://www.zerocancer.org).

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### CDMRP Grants in Maryland

Year introduced: 1997  
 Total Grants to Date: 188  
 Total Grant Awards to through FY 2017\*: \$92.1M

*\*PCRP data for FY 2018 has not been posted yet*

Grant Recipient	Year	Amount
John Hopkins University	2013	\$6,055,088.00
John Hopkins University	2009	\$2,590,809.32
John Hopkins University	2013	\$2,022,501.00
John Hopkins University	2014	\$1,699,782.00
National Cancer Institute	2017	\$1,461,572.00

### CDC’s National Comprehensive Cancer Control Program (NCCCP) funding in Maryland:

- Goal 1: Reduce the burden of cancer in Maryland.
- Objective 1: By 2020, reduce age-adjusted cancer incidence rates to reach the following targets: Prostate: 87.3 per 100,000 (2012 Baseline: 112.0 per 100,000).
- Objective 2: By 2020, reduce age-adjusted cancer mortality rates to reach the following targets: Prostate: 11.2 per 100,000 (2012 Baseline: 20.4 per 100,000).
- Objective 3: By 2020, increase the proportion of men ages 55 to 69 who have discussed the advantages and disadvantages of the prostate-specific antigen (PSA) test to screen for prostate cancer with their healthcare provider to 38.2% of Maryland men ages 55 to 69 (2012 Baseline: 34.7% of Maryland men ages 55 to 69). Target Setting Method: 10% Increase.
- Objective 4: By 2020, reduce disparities in cancer incidence and mortality to reach the following targets: Prostate Incidence: White: 68.7 per 100,000 (2012 baseline: 97.5 per 100,000), Black: 130.9 per 100,000 (2012 baseline: 159.7 per 100,000). Prostate mortality: White: 10.0 per 100,000 (2012 baseline: 17.4 per 100,000), Black: 13.5 per 100,000 (2012 baseline: 35.5 per 100,000).

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