Each year in the United States, about 12,500 children and adolescents under the age of 20 are diagnosed with cancer.¹ In Nevada in 2009, 123 children were diagnosed with childhood cancers. From 2005 to 2009, 582 Nevada children were diagnosed with cancer—325 boys and 257 girls. The overall childhood cancer incidence rate in Nevada was 15.7 per 100,000 during this period.

Of the 12 major types of childhood cancers, the most common during this period were leukemias (cancers of the blood cells), lymphomas (cancers of lymphatic tissue), and nervous system cancers.

Leukemias accounted for 30% of all childhood cancer cases in Nevada, while lymphomas accounted for 15%, and nervous system cancers accounted for just over 14%. Nevada children aged 15 to 19 years old had a relatively high number of other malignant epithelial neoplasms and malignant melanomas, which accounted for over 20% of cancer cases among that age group.
Cancer prevention measures are difficult to develop for children because very little is known about what causes childhood cancers. Childhood cancers, like adult cancers, may be the result of a mix of genetic, environmental, and behavioral causes, not just a single factor.¹ A few conditions, such as Down syndrome, other specific chromosomal and genetic abnormalities, and ionizing radiation exposures explain a small percentage of cases.²

Some signs and symptoms that may suggest cancer in children include: unusual lump or swelling, unexplained paleness or loss of energy, easy bruising, constant pain in one area of the body, limping, unexplained fever or illness that does not go away, frequent headaches accompanied by vomiting, sudden eye or vision changes, and sudden unexplained weight loss. Because it is difficult to identify cancers in children, regular medical check-ups are vital and it is important to watch for unusual signs and symptoms that do not go away.¹


Requests for additional information can be made to:
Kyra Morgan, Biostatistician II, Office of Public Health Informatics and Epidemiology
kmorgan@health.nv.gov | (775) 684-5965

Technical Notes:
• Data are from the Nevada Central Cancer Registry.
• The International Classification of Childhood Cancer (ICCC) codes were used to code these data. ICCC is based on tumor morphology and primary site, with an emphasis on morphology rather than the emphasis on primary site for adults.
• Following the criteria of the North American Association of Central Cancer Registries (NAACCR), only invasive cases are included in this report.