STATISTICAL NEWS

PA Department of Health ◆ Bureau of Health Statistics and Research ◆ Vol. 28 No. 4 ◆ July 2005

Trends in PA Lung Cancer Statistics Reviewed

Incidence and Mortality Rates Decline for Males; Increasing for Females

According to the American Cancer Society's *Global Statistics 2002*, cancer of the lung and bronchus is the most common form of cancer in the world. Pennsylvania is no different, with lung and bronchus cancer having the highest annual age-adjusted incidence rate for cancers affecting both sexes in 2002. Since 1990, age-adjusted incidence rates for lung/bronchus cancer among all residents have increased 11.3%, from 62.9 per 100,000 in 1990 to 70.0 in 2002. Also, while rates among females have increased, male rates have been on the decline since 1996.

Lung and bronchus cancer incidence is very much influenced by past exposure to tobacco smoke. According to the American Cancer Society's report, *Cancer Prevention and Early Detection Facts and Figures 2005*, approximately 87 percent of lung cancer deaths can be attributed to tobacco.

In 2002, a total of 10,280 invasive lung and bronchus cancers were diagnosed among residents and reported to the Pennsylvania Cancer Registry. This figure represents 14.3% of all invasive cancers reported in 2002. However, the resident lung/bronchus cancer mortalities in 2002 represented over 27% of all cancer deaths in Pennsylvania. Because lung cancer is very difficult to detect early, survival is poor, and mortality rates in the population approach the incidence rates.

Since 1990, (Pennsylvania) age-adjusted incidence rates for lung and bronchus cancer have increased 11.3%...

- **Incidence**

After reaching a record high of 98.4 per 100,000 in 1996, male age-adjusted incidence rates have fallen 6.4% since then to 92.1 in 2002. Rates for white males decreased 3.2% from 92.6 in 1990 to 89.6 in 2002, but reached their highest level in 1995 and 1996 with a rate of 94.5, falling by 5.2% since then. Black males also reached their peak rate in 1996 at 147.1 and have fallen 13% to 128.0 in 2002, an 8.0% decrease since 1990.

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Pennsylvania Pregnancies Increase in 2003

2003 Number is the Highest Recorded Since 1996

There were 182,092 pregnancies reported among female residents of Pennsylvania in 2003, an increase of 4,802 or 2.7 percent, from the 177,290 reported for 2002.

The 2003 reported pregnancy rate of 72.3 per 1,000 females ages 15-44 was 3.1 percent higher than the 2002 rate of 70.1. Figure 1 on page 6 depicts the annual rate of reported pregnancies for all Pennsylvania residents from 1990 through 2003. This Figure also shows the teenage (15-19) reported pregnancy rate for the same years. The teen rate has declined considerably, from 73.6 in 1990 to 42.7 in 2003 (a 42.0 percent drop). Only the 2002 teen pregnancy rate (42.5) was slightly lower than the 2003 teen rate (42.7) during this fourteen year time period.

Table 1 on page 6 compares the reported pregnancy rates by women's age for 2003 and 2002. The largest rate increase (3.6 percent) was observed for women age 30 years and older. Pregnancy rates for women in the age group 20-29 increased 1.8 percent between 2002 and 2003, while those under age 20 did not show much change.

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The teen rate has declined considerably, from 73.6 in 1990 to 42.7 in 2003 (a 42.0 percent drop).

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DEPARTMENT OF HEALTH

Edward G. Rendell, Governor
Calvin B. Johnson, M.D., M.P.H.
Secretary of Health

American Community Survey Initiated by U.S. Census

Annual Survey Has Replaced the Decennial U.S. Census "Long Form"

The American Community Survey (ACS) has replaced the census "long form" which was used when conducting the U.S. census every 10 years. The ACS is being distributed to a sample of the U.S. population on an annual basis. This will provide many communities with a yearly source of data instead of data only once every 10 years. The implementation of this survey instrument is part of the U.S. Census Bureau's effort to streamline and improve the census and provide timely information to community planners and decision makers.

The last census occurred in 2000 and every household in the country received a questionnaire. The census is required by the U.S. Constitution to be conducted and one of its many important applications consists of being used to re-apportion seats in the U.S. House of Representatives and redistrict state legislatures.

Most households during the 2000 census received a "short form" which contained seven basic questions. A sample of households received the previously mentioned long form which contained additional questions for a more detailed community demographic profile. Some of the information obtained via the long form included the number of residents who have high school diplomas or college degrees, the regions where there was the greatest need for job training programs, the number of persons who spoke a language other than English, the length of time it took to find employment, and the areas in the community where veterans and elderly residents were located. The ACS will now address these and many more issues annually, instead of once via the long form every decade.

(The survey) will provide many communities with a yearly source of data...

In support of the ACS's implementation, Beverly Stein, a chairperson of the Multnomah County Board of County Commissioners in Portland, Oregon, was quoted as saying, "We are in very fast moving times now and 10 years is like an eternity. If we wait for data for 10 years, we are spending five years putting in resources where we may not need them and missing places where we really should be putting our resources. The American Community Survey benefits us by providing updated information every year – we don't have to wait ten years."

Communities can use this information to help determine where they should distribute costly but necessary community assets such as new roads, schools and senior centers. ACS data can also be used to determine the prime locations in the community to establish certain businesses. The data from the ACS can also provide an indication of which areas need specific community services, such as bus stop access and availability of bilingual police officers and paramedics.

The ACS was mailed to a sample of households in all 3,233 U.S. counties and in Puerto Rico, beginning in late December 2004 and continuing monthly. No address will receive the survey more often than once every five years. Data from the 2005 American Community Survey, the first year of full implementation, will be released in the summer of 2006 for communities with populations of 65,000 or more. For communities with populations of 20,000 or more, three-year data from the 2005-2007 ACS will be released in the summer of 2008. For communities with populations less than 20,000, five-year data from the 2005-2009 ACS will be released in the summer of 2010.

Responding to the American Community Survey is mandatory, according to Title 13 of the United States Code. The same law that requires participation also protects the responses on the questionnaire. Census Bureau employees are sworn to protect the confidentiality of information collected in the survey.

For additional information about the American Community Survey, visit the U.S. Census Bureau's website at: ***http://www.census.gov/acs/www/*** or contact us at 717-783-2548.

Annual Data User Conference

Pennsylvania State Data Center Provides Training Opportunity

The Pennsylvania State Data Center (PASDC) will host its **Annual Data User Conference** on **September 20, 2005** from 8:00-4:00 at the Holiday Inn Harrisburg/Hershey. The conference provides a comprehensive forum for demographic data users. Experts address many topics ranging from utilization of new technologies to information resources, public policy implications, and economic/community development issues.

The conference provides an opportunity for attendees to become familiar with the American Community Survey (ACS). Please see the article above for more information on the ACS. Attendees can also take advantage of great training sessions on using American Fact Finder and GIS software in data extraction and manipulation. Find out how and where to access the latest Census Bureau and Pennsylvania statistics that you need to start a business, analyze community growth, make informed policy decisions, and much more.

For more information, call 717-948-6336 or visit ***http://www.PaSDC.hbg.psu.edu***, and select the **Annual Data User Conference** icon.

Top Ten Baby Names for 2003 Released

Emily and Michael Still #1 Names; Complete Lists on Web Site

The most popular first name given to female babies born in 2003 was Emily, for the tenth year in a row. Emily has been listed in the top ten since 1991. Emma moved from sixth place into second place. Madison moved from second to third place, and Olivia moved up from seventh place into fourth. Hannah dropped from third to fifth place. Abigail moved down from fourth place in 2002 to sixth. Sarah dropped from fifth place to seventh. Grace moved up into eighth place as Alexis dropped from eighth to ninth. Finishing in tenth place was Isabella, which moved up from eighteenth place in 2002.

There were 13,288 different first names given to baby girls in 2003. The following were a few of the more unique and interesting ones – Trinity, Jerusalem, Cadence, Season, Ireland, Echo, Indigo, Willoughby, Tayleigh, Avonlea, Grayson, Paisley, and Divinity.

For the twenty-seventh year in a row, Michael was the most popular first name given to baby boys in 2003. Ryan moved up from fifth place into second place. Jacob, Matthew, and Nicholas were in third, fourth, and fifth place, respectively. Joseph moved up from eighth place to sixth. Joshua dropped from sixth to seventh place, and Tyler was bumped down from seventh place to eighth. Andrew moved up from tenth place in 2002 to ninth in 2003, replacing John, which dropped down to eleventh place. Zachary finished in tenth place, moving up from twelfth place in 2002.

Top Ten Baby Names by Sex
Pennsylvania Live Births, 2003

MALES	FEMALES
Michael	Emily
Ryan	Emma
Jacob	Madison
Matthew	Olivia
Nicholas	Hannah
Joseph	Abigail
Joshua	Sarah
Tyler	Grace
Andrew	Alexis
Zachary	Isabella

A total of 9,296 different first names were given to baby boys in 2003. The following were some of the more unusual – Nicodemus, Sage, Moses, Sterling, Basil, Pendragon, Tabrien, MacGuire, Lyric, Jericho, Lucifer, and Quest.

Complete lists of 2003 baby names (in order by frequency) by sex can be accessed as PDF files on the Health Statistics web pages at ***www.health.state.pa.us/stats*** and then select 'Vital Statistics'.

Web Site Updates

2003 Birth Statistics Now Available

***2003 Birth Statistics*:**
A large volume and variety of data tables with 2003 birth statistics, including information for all counties and municipalities in Pennsylvania, have been added to the Bureau of Health Statistics and Research web pages.

To access the 2003 data, go to ***www.health.state.pa.us/stats*** and click on **Vital Statistics** and then select **Birth and Death Statistics 1990-2003**.

Each year when a new birth, death, or cancer incidence annual data file is finalized and released, staff in the Bureau of Health Statistics and Research create and update tens of thousands of pages of numerous crosstabulations that are used to respond to the thousands of data requests we receive every year. These data tables are created in PDF file format (requires the free software Adobe Acrobat Reader) and are added to the Health Statistics web pages to provide all data users with an abundant variety of health statistics.

Health data users can now easily access the latest available single-year (2001 for cancer incidence, 2003 for births and deaths) and five-year (1998-2002 for cancer incidence, 1999-2003 for births and deaths) summary data tables.

Examples of birth data available at this web page include births by age and race of mother, by sex of infant, birth weight, medical conditions, previous live births, previous pregnancies, trimester of entry into prenatal care for the state and all counties.

To access the 2003 (birth) data go to *www.health.state.pa.us/stats* and click on Vital Statistics and then select Birth and Death Statistics 1990-2003.

Birth data tables are also available for all minor civil divisions.

Most data files are available back to 1990. We also have some limited data tables available prior to 1990 in electronic format.

Beginning with the reporting of 2003 live births, Pennsylvania was one of the few states to implement the latest revision of the U.S. Standard Certificate of Live Birth. The Standard Certificate of Live Birth has been the principal means for collecting uniform birth information across the United States since 1900. Because of this implementation, some categories on the birth dataset were added or changed from previous years. For additional information about this new collection instrument, please see the article entitled *2003 Revisions to the Certificate of Live Birth* in the May 2005 issue of Statistical News.

Please contact the Bureau of Health Statistics and Research at 717-783-2548 or via an e-mail link on our web pages (***www.health.state.pa.us/stats***) for more information about the availability of these files.

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Trends in PA Lung Cancer Statistics Reviewed

However, rates for black males have remained much higher then those for white males.

Females continue to show an upward trend in their age-adjusted lung/bronchus cancer incidence rates. The highest age-adjusted incidence rate recorded for females occurred in both 2001 and 2002 at 54.7 per 100,000. This rate is 35.4% higher then the 1990 rate of 40.4. Black females have had the largest increase, with a 2002 rate (74.0) 38.8% higher than in 1990 (53.3). The 2002 rate for white females (53.0) was 34.9% higher than their 1990 rate (39.3). Incidence rates among white females reached a record high of 53.5 in 2001.

- **Mortality**

Annual age-adjusted mortality rates among all persons have dropped 5.3%, from 56.9 per 100,000 in 1990 to 53.9 in 2002. This decrease can be attributed to a 16.7% decrease in the male rate, from 88.2 in 1990 to 73.5 in 2002. Like the incidence rates for females, mortality rates have also increased for women. Their 2002 age-adjusted mortality rate (40.8) was 14.0% higher than their 1990 rate (35.8).

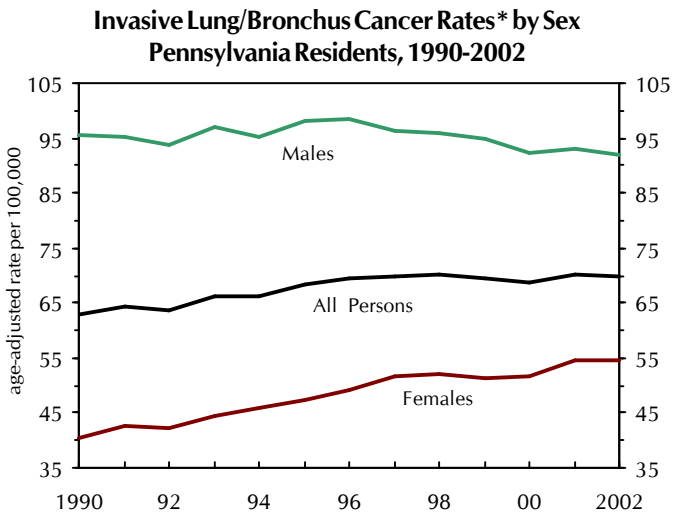
Although black males have shown the most improvement in age-adjusted lung/ bronchus cancer incidence and mortality rates, they still have the highest rates among the four sex/race groups.

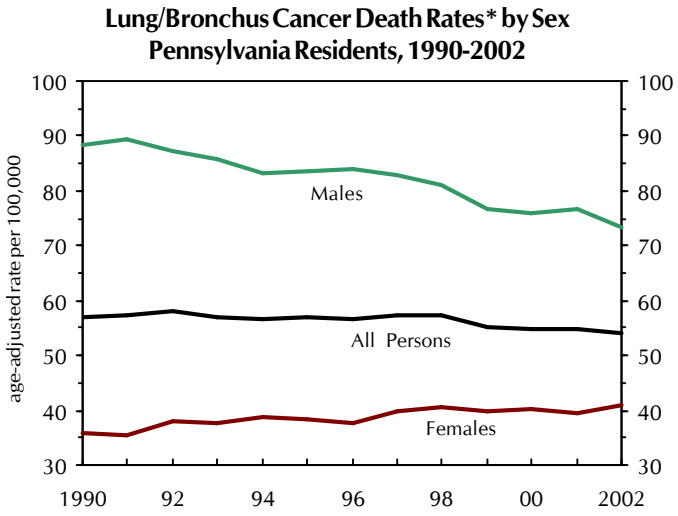
Black males showed the greatest improvement in age-adjusted mortality rates for lung and bronchus cancers. The 2002 rate of 106.9 among black males was 22.3% lower than the 1990 rate of 137.5 per 100,000. White males have also shown continual improvements in mortality, with rates declining 15.8% from 85.2 in 1990 to 71.7 in 2002.

The age-adjusted mortality rates among white females have been steadily increasing between 1990 and 2002. The 2002 rate of 40.0 for white females was 14.6% higher than the 1990 rate (34.9). Black female rates have increased more sporadically, recording highs of 61.5 and 62.6 in 1993 and 1999, respectively. The 2002 rate for black females (52.8 per 100,000) is 12.3% higher than the 1990 rate (47.0).

Although black males have shown the most improvement in age-adjusted lung/bronchus cancer incidence and mortality rates, they still have the highest rates among all four race/sex groups. The 2002 mortality rate for black males was 32.9%, 50.6%, and 62.6% higher than the rate for white males, black females, and white females, respectively. Black female mortality rates have also shown some increases, with the highest rates occurring in 1993 (61.5) and 1999 (62.6). Even though their 2002 rate of 52.8 per 100,000 was somewhat lower, that rate was still 12.3% higher than the rate of 47.0 recorded for black females back in 1990.

The charts and tables to the right and on page 5 display the latest lung and bronchus cancer annual age-adjusted incidence and mortality rates among Pennsylvania residents by sex and race for 1990 through 2002.





To obtain additional cancer statistics online, please visit the Health Statistics web pages of the Department of Health's web site at ***www.health.state.pa.us/stats/*** and click on the "Cancer Incidence & Mortality" link. In addition to published reports, a variety of cancer statistics in the form of data tables, charts, maps, and county assessments and profiles can be produced using our interactive web tool, **EpiQMS**.

If you have any questions regarding the statistics on the Pennsylvania lung and bronchus cancers presented in this article, please contact the Bureau of Health Statistics and Research at 717-783-2548 or via an email link at ***www.health.state.pa.us/stats***.

Invasive Lung/Bronchus Cancer Rates* by Sex/Race
Pennsylvania Residents, 1990-2002

Year	All Cases	Males	Females
1990	62.9	95.5	40.4
1991	64.2	95.3	42.7
1992	63.7	93.8	42.4
1993	66.1	97.0	44.5
1994	66.2	95.1	46.0
1995	68.5	98.1	47.5
1996	69.5	98.4	49.0
1997	69.9	96.2	51.6
1998	70.2	96.0	52.0
1999	69.6	94.9	51.5
2000	68.6	92.4	51.8
2001	70.3	92.9	54.7
2002	70.0	92.1	54.7

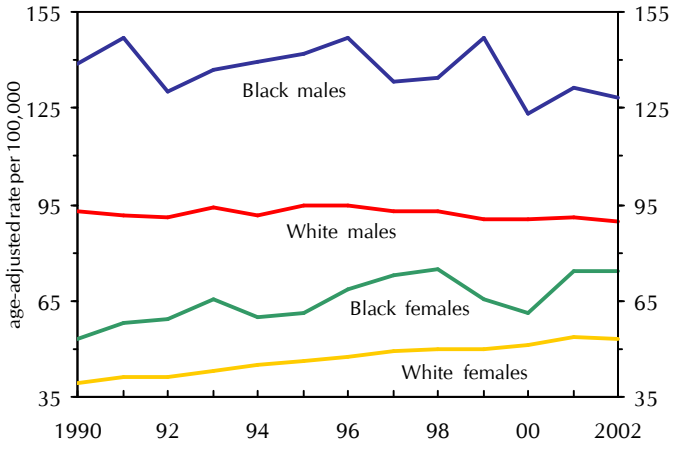
*age-adjusted to 2000 standard million U.S. population

Lung/Bronchus Cancer Death Rates* by Sex/Race
Pennsylvania Residents, 1990-2002

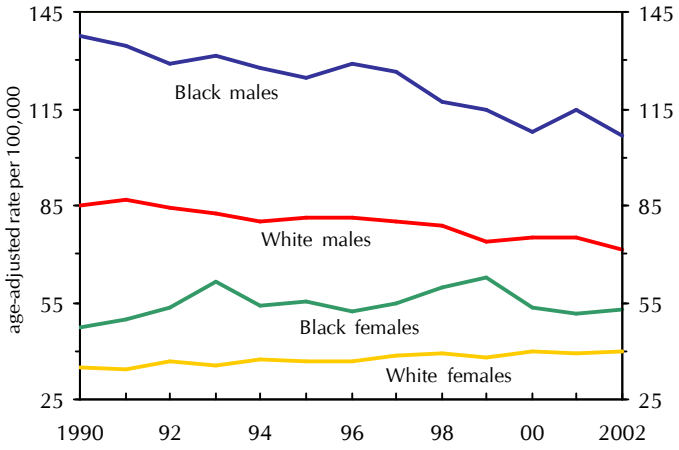
Year	All Deaths	Males	Females
1990	56.9	88.2	35.8
1991	57.2	89.5	35.6
1992	58.1	87.3	38.0
1993	57.1	85.8	37.6
1994	56.7	83.1	38.6
1995	56.9	83.7	38.3
1996	56.7	84.0	37.8
1997	57.4	82.9	39.7
1998	57.2	81.1	40.7
1999	55.0	76.5	39.9
2000	54.9	76.1	40.3
2001	54.7	76.6	39.5
2002	53.9	73.5	40.8

*age-adjusted to 2000 standard million U.S. population

Invasive Lung/Bronchus Cancer Rates* by Sex/Race
Pennsylvania Residents, 1990-2002



Lung/Bronchus Cancer Death Rates* by Sex/Race
Pennsylvania Residents, 1990-2002



Invasive Lung/Bronchus Cancer Rates* by Sex/Race
Pennsylvania Residents, 1990-2002

Year	White Male	Black Male	White Female	Black Female
1990	92.6	139.1	39.3	53.3
1991	91.3	147.1	41.4	58.2
1992	91.0	129.9	41.0	59.0
1993	94.2	137.0	42.8	65.4
1994	91.7	139.7	44.7	59.9
1995	94.5	141.9	46.4	61.4
1996	94.5	147.1	47.3	68.5
1997	92.9	133.1	49.6	73.1
1998	92.6	134.7	49.9	74.6
1999	90.4	147.0	49.9	65.7
2000	90.2	123.4	51.3	61.2
2001	90.9	131.4	53.5	74.1
2002	89.6	128.0	53.0	74.0

*age-adjusted to 2000 standard million U.S. population

Lung/Bronchus Cancer Death Rates* by Sex/Race
Pennsylvania Residents, 1990-2002

Year	White Male	Black Male	White Female	Black Female
1990	85.2	137.5	34.9	47.0
1991	86.6	134.4	34.5	49.6
1992	84.5	128.8	36.8	53.2
1993	82.8	131.2	35.8	61.5
1994	80.2	127.8	37.5	54.3
1995	81.1	124.3	36.8	55.5
1996	81.0	129.0	36.7	52.3
1997	80.0	126.7	38.6	54.8
1998	78.9	116.9	39.4	59.8
1999	74.1	114.5	38.1	62.6
2000	74.9	107.6	39.9	53.3
2001	75.1	114.9	39.2	51.6
2002	71.7	106.9	40.0	52.8

*age-adjusted to 2000 standard million U.S. population

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Pennsylvania Pregnancies Increase in 2003

Table 2 shows 2003 reported pregnancy statistics by woman's age group and outcome for the state. In 2003, 79.9 percent of the reported pregnancies resulted in a live birth, 19.3 percent in an induced abortion, and only 0.8 percent in a fetal death (non-induced termination of 16 weeks or more gestation).

In 2003, 79.9 percent of the reported pregnancies resulted in a live birth, 19.3 percent in an induced abortion, and only 0.8 percent in a fetal death...

Women in the age group 20-29 accounted for almost 50 percent or 90,807 of all reported pregnancies in 2003; those under 20 years of age, for 10.8 percent or 19,559; and, women 30 years of age and older accounted for 39.3 percent or 71,466.

In 2003, 67.2 percent of all reported pregnancies to teenage residents under 20 years of age resulted in a live birth, compared to 77.9 percent for women 20-29 years of age and 85.9 percent for those women 30 years of age and older.

Figure 2 on page 8 shows the percentage of 2003 reported pregnancies by outcome, age, race and Hispanic origin for Pennsylvania residents. Pregnancies to white women in 2003 accounted for 72.9 percent or 132,734 of all reported pregnancies; black women accounted for 18.9 percent of all reported pregnancies or 34,405; and Asian/Pacific Islander women accounted for only

Go to Page 8 or click here...

TABLE 1
Reported Pregnancies and Rates* by Women's Age and Year
Pennsylvania Residents, 2003 and 2002

Age of Woman	2003 Number	2003 Rate	2002 Number	2002 Rate	Rate % Difference
All Ages	182,092	72.3	177,290	70.1	+3.1
Under 15	505	1.2	499	1.2	0
15-19	19,054	42.7	18,718	42.5	+0.5
20-29	90,807	120.7	88,187	118.6	+1.8
30 & Older	71,466	39.8	69,847	38.4	+3.6

* Rate per 1,000 female population for each year by age group.

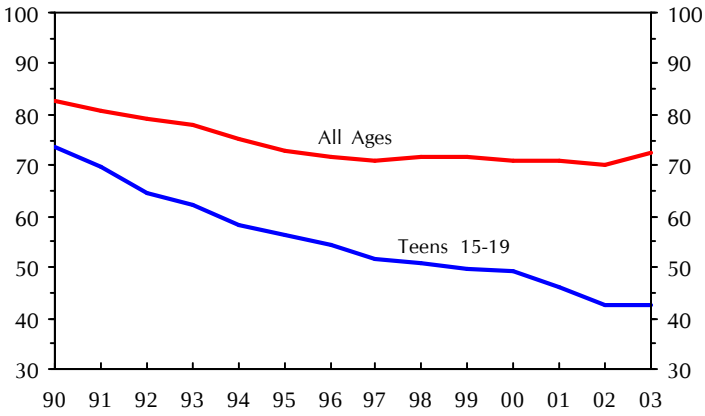
NOTES: Unknown ages included in total. Unknowns excluded in calculations.

TABLE 2
Reported Pregnancies by Women's Age Group and Outcome
Pennsylvania Residents, 2003

Age of Woman	Reported Pregnancies	Live Births	Fetal Deaths	Induced Abortions
All Ages	182,092	145,485	1,392	35,215
Under 15	505	234	7	264
15-19	19,054	12,912	166	5,976
20-29	90,807	70,736	596	19,475
30 & Older	71,466	61,362	604	9,500

NOTE: Unknown ages included in total.

FIGURE 1
Reported Pregnancy Rate*, All Ages and Teens 15-19
Pennsylvania Residents, 1990-2003



Year	All Ages	Teens 15-19
2003	72.3	42.7
2002	70.1	42.5
2001	70.9	46.0
2000	70.8	49.1
1999	71.5	49.7
1998	71.7	51.0
1997	70.9	51.8
1996	71.8	54.4
1995	72.8	56.3
1994	75.1	58.3
1993	77.9	62.3
1992	79.0	64.7
1991	80.9	69.8
1990	82.6	73.6

* Rate per 1,000 female population for each year by age group.

Update: Healthy People 2010 Objectives

Focus Area 26: Substance Abuse

26-02 - Reduce cirrhosis deaths.....HP2010 Target: 3.0

26-03 - Reduce drug-induced deaths.....HP2010 Target: 1.0

Cirrhosis Deaths:
The annual age-adjusted death rate for cirrhosis deaths among all Pennsylvania residents has been on the increase between 1999 and 2003. The same can be said for males and whites. The rates for Hispanics have fluctuated during the five-year period but that is probably due to the smaller annual numbers of events recorded for this group.

Age-adjusted death rates for cirrhosis are higher among Hispanic, male and black residents compared to whites and, especially, females. However, the rates for black residents have declined recently with the 2003 rate being lower that for whites.

The Healthy People 2010 national goal is an age-adjusted death rate of 3.0. The 2002 rate for females is the lowest among the five sex/race/ethnic groups shown here but even that rate (5.2) is still over 70 percent higher than the 2010 national goal.

Drug-Induced Deaths:
Between 1999 and 2003, the annual age-adjusted death rates for drug-induced deaths among all residents have been higher in recent years. The same can be said for males, whites, and females. The annual age-adjusted death rates for black and Hispanic residents have been lower in recent years. However, the rates for these groups (along with the males) are the highest among the five sex/race/ethnic groups shown here.

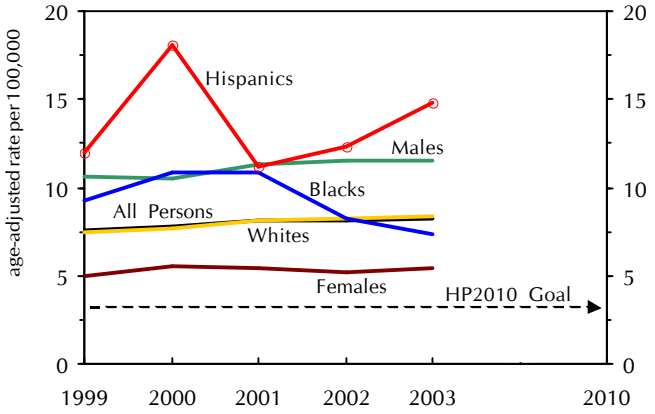
The national Healthy People 2010 goal for an age-adjusted death rate for drug-induced deaths is set at 1.0. No age-adjusted death rate for any of the five sex/race/ethnic groups in Pennsylvania (as shown here) is even close to that goal. The lowest rate among the five sex/race/ethnic groups was observed for females (4.4) in 2001 and is still over four times higher than the national 2010 goal.

Cirrhosis & Drug-Induced Deaths, Age-Adjusted Rate*
By Sex & Race/Ethnicity, Pennsylvania Residents 1999-03

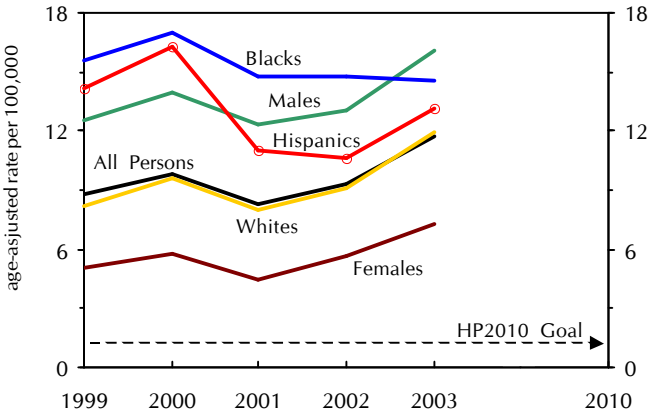
Cirrhosis	2003	2002	2001	2000	1999
All Persons	8.2	8.1	8.1	7.8	7.6
Males	11.5	11.5	11.3	10.5	10.6
Females	5.4	5.2	5.4	5.5	5.0
Whites	8.4	8.2	8.1	7.7	7.5
Blacks	7.4	8.3	10.8	10.8	9.3
Hispanics**	14.8	12.3	11.2	18.1	12.0
Drug-Induced					
All Persons	11.7	9.3	8.3	9.8	8.8
Males	16.1	13.0	12.3	14.0	12.5
Females	7.3	5.7	4.4	5.8	5.1
Whites	11.9	9.1	8.0	9.6	8.2
Blacks	14.6	14.8	14.8	17.0	15.6
Hispanics**	13.1	10.6	11.0	16.3	14.2

*age-adjusted to 2000 standard million U.S. population (per 100,000)
**Hispanics can be of any race.

Age-Adjusted Death Rates* for Cirrhosis Deaths
Pennsylvania Residents, 1999-2003



Age-Adjusted Death Rates* for Drug Induced Deaths
Pennsylvania Residents, 1999-2003



*age-adjusted to 2000 standard million U.S. population

HP2010 State and County Data on the Web

To access the Department of Health's web page of Healthy People 2010 statistics for the state and counties, go to *www.health.state.pa.us/stats*. The latest available statistics as well as trend data are shown. You can view data for the state, all counties, a specific demographic element (age, sex, race, etc.) or just for a specific county. Complete data sets for the state and counties can be downloaded. There is also a link to the national HP2010 web site.

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Pennsylvania Pregnancies Increase in 2003

3.3 percent or 6,077 of all reported pregnancies. Reported pregnancies to women of Hispanic origin accounted for 7.2 percent. Please note that persons of Hispanic origin can be of any race.

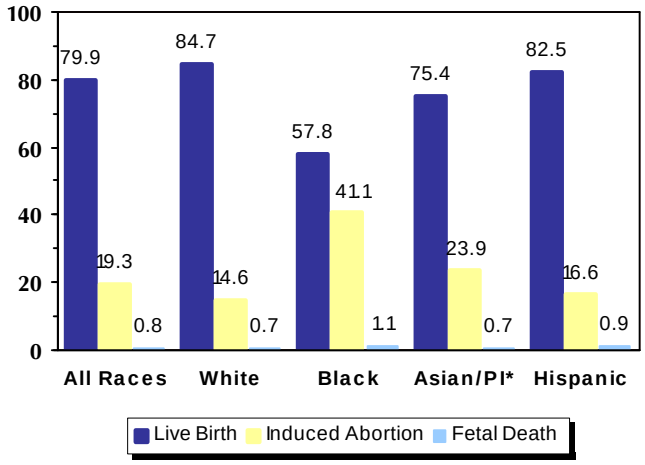
During 2003, among Hispanic and black women, 19.0 and 19.5 percent (respectively) of the reported pregnancies were to teenagers (under 20 years of age). Among white and Asian/Pacific Islander females, only 8.3 and 4.5 percent (respectively) were to teenagers of those ages.

In 2003, 84.7 percent of the reported pregnancies to white women resulted in a live birth and 14.6 percent in an induced abortion. Among Asian/Pacific Islander women, 75.4 percent of the reported pregnancies resulted in a live birth and 23.9 percent in an induced abortion. Only 57.8 percent of the reported pregnancies among black women resulted in a live birth and 41.1 percent resulted in an induced abortion. The percentages of live births and induced abortions for Hispanic women were similar to those for white women at 82.5 and 16.6, respectively. (See Figure 2).

Three components were used to calculate the reported pregnancies (live births, non-induced fetal deaths, and induced abortions). Please note the following qualifications of the reported pregnancy statistics as released by the Bureau of Health Statistics and Research: fetal deaths exclude those less than 16 weeks of gestation and induced abortions exclude those performed outside the state to residents.

If you have any questions about this article, please contact the Bureau at 717-783-2548.

FIGURE 2
Reported Pregnancies, Percent Outcome by Race/Ethnicidy
Pennsylvania Residents, 2003



Notes: Hispanic origin can be of any race.
Percents may not total 100.0 due to rounding.

*Pacific Islander

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