Nationwide Incidence Rate
1 in 8 men will be diagnosed during his lifetime
3.1M men currently diagnosed

Incidence Rate in Virginia
98.0 in every 100,000 men diagnosed
19.7 in every 100,000 men die from the disease

This year in the United States…
New cases: 268,490
Deaths: 34,500
Veterans are 1.5x more likely to get prostate cancer.
African-American men are 2.2x more likely to die of prostate cancer.

This year in Virginia…
New cases: 7,150
Deaths: 940

National Rankings by State:
#35 for prostate cancer incidence
#19 for prostate cancer deaths

Source: Estimates based on 2022 data from the American Cancer Society

ZERO’s Impact in Virginia

Patient Programs
- ZERO360 is ZERO’s comprehensive patient navigation service that provides individualized case management to help patients and their families connect with financial assistance, navigate insurance, and find other kinds of support including emotional support and even transportation assistance.
- ZERO also offers peer-to-peer support through our Us TOO, MENtor, and Caregiver Connector programs. We match patients and caregivers with someone who has been on a similar journey to provide ongoing, one-on-one support. We also run a nationwide network of support groups for those affected by prostate cancer.
- ZERO Connect is our online private Facebook support group where you can connect with others affected by prostate cancer, learn from their experiences, and ask questions to patients and loved ones across the country.

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.

ZERO Contact:
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CDMRP Grants in Virginia

Year Introduced: 1997
Total Grants to Date: 54
Total Grand Awards Through FY 2020*: $20.1M

*PCRP data for FY 2021 has not yet been posted

<table>
<thead>
<tr>
<th>Grant Recipient</th>
<th>Year</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Eastern Virginia Medical School</td>
<td>2017</td>
<td>$900,000.00</td>
</tr>
<tr>
<td>Virginia Commonwealth University</td>
<td>2017</td>
<td>$775,000.00</td>
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<tr>
<td>Virginia Commonwealth University</td>
<td>2004</td>
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<tr>
<td>Virginia Commonwealth University</td>
<td>2013</td>
<td>$590,733.00</td>
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</tbody>
</table>

CDC’s National Comprehensive Cancer Control Program (NCCCP) Funding in Virginia:

- **Goal:** Virginians are diagnosed with cancer at its earliest (local), most curable stage.
- **Objective:** Increase the dissemination of public information of age-appropriate, evidence-based, comprehensive cancer screening guidelines and resources and encourage an increase in educational activities in the Virginia health districts with the highest mortality rates.
- **Strategy:** Collaborate with and engage businesses and other community partners such as professional groups, hospitals, and community-based organizations in identifying evidence-based strategies to enhance knowledge about screening guidelines (educational sessions, incentives, time off for screening exams, etc.).
- **Strategy:** Increase awareness for the use of genetic screening based on the individual’s level of risk.
- **Strategy:** Educate patients about how to talk effectively with providers through use of resources promoting early detection methods that are right for the individual.
- **Strategy:** Partner with other Cancer Action Coalition of Virginia (CACV) team members to promote early detection awareness.
- **Objective:** Increase cancer screening rates among Virginians by 10%.
- **Strategy:** Work with the health districts, businesses, and other community partners in identifying evidence-based strategies to increase screening rates.
- **Strategy:** Advocate at the state level for improved access to evidence-based programs for early detection.
- **Strategy:** Increase the awareness of evidence-based programs across the state that provide screenings.
- **Strategy:** Encourage additional educational activities in the cities and counties of Virginia with the highest cancer incidence and mortality rates.

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• **Strategy:** Increase educational efforts and identify barriers of access to screening services in health districts with the lowest screening rates.

• **Objective:** Support Virginia healthcare providers in promoting age-appropriate, evidence-based screening and early detection guidelines.

• **Strategy:** Identify effective training programs aimed at enhancing healthcare professionals' knowledge and enhance available resources, including culturally appropriate communication tools.

• **Strategy:** Identify and promote promising health system practices that improve early detection screening rates.

• **Strategy:** Disseminate information on evidence-based cancer screening guidelines to healthcare professionals (e.g. family physicians, OB-GYNs, other physicians, internists, nurse practitioners) performing or recommending cancer screening to their patients. Men who have had prostate specific antigen (PSA) tests in the last two years: baseline: 54.6%, target: 60%.