extent of spread. (For a description of the summary stage categories, see the footnotes in the table on page 17, Five-year Relative Survival Rates (%) by Stage at Diagnosis, 2002-2008.) Clinicians typically use the TNM cancer staging system, which assesses tumors in three ways: extent of the primary tumor (T), absence or presence of regional lymph node involvement (N), and absence or presence of distant metastases (M). Once the T, N, and M categories are determined, a stage of 0, I, II, III, or IV is assigned, with stage 0 being in situ, stage I being early, and stage IV being the most advanced disease. Some cancers have alternative staging systems (e.g., leukemia). As the molecular properties of cancer have become better understood, tumor biological markers and genetic features have been incorporated into prognostic models, treatment plans, and/or stage for some cancer sites.

What Are the Costs of Cancer?
The National Institutes of Health (NIH) estimates that the overall costs of cancer in 2008 were $201.5 billion: $77.4 billion for direct medical costs (total of all health expenditures) and $124.0 billion for indirect mortality costs (cost of lost productivity due to premature death). PLEASE NOTE: These numbers are not comparable to those published in previous years because as of 2011, the NIH is calculating the estimates using a different data source: the Medical Expenditure Panel Survey (MEPS) of the Agency for Healthcare Research and Quality. The MEPS estimates are based on more current, nationally representative data and are used extensively in scientific publications. As a result, direct and indirect costs will no longer be projected to the current year, and estimates of indirect morbidity costs have been discontinued. For more information, please visit nhlbi.nih.gov/about/factpdf.htm.

Lack of health insurance and other barriers prevents many Americans from receiving optimal health care. According to the US Census Bureau, approximately 50 million Americans were uninsured in 2010; almost one-third of Hispanics (31%) and one in 10 children (17 years of age and younger) had no health insurance coverage. Uninsured patients and those from ethnic minorities are substantially more likely to be diagnosed with cancer at a later stage, when treatment can be more extensive and more costly. For more information on the relationship between health insurance and cancer, see Cancer Facts & Figures 2008, Special Section, available online at cancer.org/statistics.