

Gaps in colorectal cancer screening persist between whites and non-whites

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Colorectal cancer screening among patients with Medicare coverage is increasing, but a persistent gap remains between whites — who are screened most frequently — and all other racial and ethnic groups, according to a new study by researchers at UC Davis and the University of Washington. The study also showed that the biggest gap is between whites and Hispanics.

Because Medicare covers all available colorectal cancer screening procedures, the research suggests that obstacles other than insurance coverage are responsible for these disparities.

"We need more information about the barriers that different populations encounter when it comes to screening for colon cancer," said Joshua Fenton, lead author of the study, which will appear in the March issue of the *Journal of the American Geriatrics Society*. "The issue clearly is not lack of access to health insurance. Socioeconomic, cultural and language barriers are all possibilities, but understanding which of these barriers is relevant for which group is essential to narrowing the gaps."

Fenton, a UC Davis assistant professor of family and community medicine, and his colleagues focused their analysis on a representative sample of nearly half a million patients aged 70 to 79 from four racial and ethnic groups: whites, blacks, Asians/Pacific Islanders and Hispanics. The data were compiled from a National Cancer Institute database that links Medicare claims with clinical information on cancer patients throughout the United States.

The researchers found that the percentage of patients with up-to-date colorectal cancer screenings rose for all groups from 1995 to 2003: from 39 percent to 47 percent for whites; 33 percent to 42 percent for Asians and Pacific Islanders; 29 percent to 38 percent for blacks; and 24 percent to 33 percent for Hispanics. Medicare initiated coverage for colorectal cancer screening in 1998. Nevertheless, the gaps between whites and other racial and ethnic groups have not narrowed.

Colorectal cancer struck an estimated 148,810 Americans in 2008 and killed 49,960. By detecting and removing precancerous polyps, screening can prevent colorectal cancer. The persistence of racial and ethnic disparities in screening points to the need for new research to elucidate why the disparities continue.

"Are white patients more likely to receive a doctor's recommendation than non-white patients? Are cultural or language barriers a major issue for patients in some communities? Do some patients have a harder time getting to the specialists who perform colonoscopy examinations? We need answers to questions like these in order to narrow racial and ethnic disparities in screening," Fenton said.

Fenton added that the study indicates the need for more outreach to encourage screening overall.

"Even though screening rates are increasing, they are not high enough - even among whites," he said. "Health systems need to make sure that doctors recommend screening and help patients follow through with recommended tests."

Source: University of California - Davis - Health System

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