

US counties with more African-American patients may have fewer colorectal cancer specialists

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Each percentage point increase in the African American population in a county appears to be associated with a decrease in the number of specialists within that county who diagnose and treat colorectal cancer, according to a report in the June issue of *Archives of Surgery*, one of the JAMA/Archives journals. In contrast, counties with a higher percentage of Asian Americans appear to have more colorectal cancer specialists.

Despite overall declines in incidence of and death from [colorectal cancer](#) in the general U.S. population, African Americans are more likely than other patients to die of the disease, according to background information in the article. "Minority groups have poor access to quality health care services," the authors write. "This is true of colorectal cancer care and may be related to both geographical proximity and use of surgical, gastroenterology and radiation oncology services. Without suitable access, many minority patients may present with advanced colorectal cancer and be less likely to receive appropriate adjuvant therapies [used after primary treatment to prevent cancer recurrence]."

Awori J. Hayanga, M.D., M.P.H., of the University of Michigan Medical Center, Ann Arbor, and colleagues analyzed data from the 2004 version of the Area Resource File, a nationwide database of health care, economic and demographic information. It is derived from a variety of sources and comprises data from all 3,219 counties in the United States.

"Multivariate analysis revealed a statistically significant decrease in the number of gastroenterologists and radiation oncologists with each 1 percent increase in African American population and a trend toward a decrease in colorectal surgeons in a given county," the authors write. "Each percentage point increase in the Asian American population, however, was associated with a significant increase in the number of gastroenterologists and radiation oncologists that persisted on adjusting for socioeconomic status and demographic differences within the county with a trend toward an increase in the number of colorectal surgeons."

Previous research indicates that African Americans are about 20 percent less likely to undergo colonoscopy compared with other races, and even those who have first-degree relatives with colorectal [cancer](#) have a decreased likelihood of undergoing recommended screenings. Disparities have also been reported in the receipt of adjuvant therapies, including radiotherapy and chemotherapy, the authors note. "Perhaps the non-use of diagnostic and adjuvant therapies is related to the great distances that African Americans must travel to seek these services, plausibly outside their own residential counties. This may serve as an impediment to seeking these services despite the best intentions of referring physicians and surgeons," they write.

"Access to diagnostic and adjuvant therapies is central to timely screening, diagnosis, follow-up therapy and surveillance, without which longer-term survival may never be improved and disparities never equalized," they conclude.

Source: JAMA and Archives Journals ([news](#) : [web](#))

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