

Does the distance a patient has to travel affect where they choose to get their care?

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Do patients choose where to get their care based on how long it takes to them to get there? Researchers at Fox Chase Cancer Center have recently documented a growing trend in the centralization of cancer surgery—more patients seeking care at high volume centers, which are generally located in metropolitan areas. While trends like this should improve patient outcomes, a study published in the *Journal of Clinical Oncology* shows that there are still a good number of patients who will not travel a long distance to get their care.

"Based on results of previous studies, patient outcomes should be improved with centralization of cancer surgery, however, we are concerned that the long distances patients may need to travel will serve as a barrier to access to high volume centers," says Karyn Stitzenberg, M.D., M.P.H., who led the study while at Fox Chase and is currently adjunct assistant professor for the Department of Health Policy and Management at University of North Carolina. "Centralization at high volume centers comes with a cost, as some patients may need to travel long distances to reach high volume centers. These increased travel distances may pose a significant barrier to quality cancer care for some subsets of the population."

The study used discharge data from 1996-2006 for hospitals in New York, New Jersey and Pennsylvania. Patients ages 18 and over who were treated with surgery for colorectal, esophageal or pancreatic cancer were included. Over 272,000 procedures met criteria for inclusion in the study, specifically 5,273 esophageal, 13,472 pancreatic, 202,879 colon

and 51,262 rectal procedures.

A shift from low volume to high volume centers occurred to varying degrees for esophageal, pancreatic and colon cancer procedures. The change was the greatest for esophageal and [pancreatic cancer](#), which are less common than cancers of the colon and rectum. In contrast to 1996, the vast majority of procedures for these less common cancers are now performed at high volume centers.

Among the study population, travel distance increased for all patients, but more so for patients with less common cancers. For example, travel distance increased 72 percent for patients with esophageal cancer, compared to 17 percent for patients with [colon cancer](#).

"Our study demonstrated that the increase in travel distance was a direct result of the trend toward centralization at high volume centers," adds Elin Sigurdson, M.D. Ph.D., F.A.C.S., head of surgical research at Fox Chase and co-author on the study. "This study also confirms what others have found, that disparities of cancer care exist. Since disadvantaged patients are more likely to remain at low volume centers, we worry that travel may increasingly serve as a barrier for these patients, especially during tough economic times."

Source: Fox Chase Cancer Center ([news](#) : [web](#))

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