

Study confirms prostate cancer is treated differently at county vs. private hospitals

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Researchers at Moores Cancer Center at the University of California, San Diego and colleagues have found that prostate cancer treatments varied significantly between county hospitals and private providers. Patients treated in county hospitals are more likely to undergo surgery while patients treated in private facilities tend to receive radiation or hormone therapy. These findings were published online by the journal *Cancer* on January 25.

"The study examined the factors that drive treatment choices for patients with [prostate cancer](#)" said J. Kellogg Parsons, MD, MHS, principal investigator and urologic oncologist at Moores UCSD Cancer Center. "We found that decisions are significantly influenced by the type of health care facility where they receive care."

Surgery, radiation and hormone therapy are the most common treatments for localized prostate cancer. Each is associated with different risks and benefits with no consensus as to the most effective form of treatment, though life expectancy, other illnesses, cancer severity and patient preferences may account in part for treatment choices. Parsons and colleagues at UCLA compared the types of treatments prostate cancer patients received from public and private hospitals as part of a California public assistance program. The researchers analyzed the care provided to 559 men enrolled in a state-funded program for low-income patients known as Improving Access, Counseling and Treatment for Californians with Prostate Cancer (IMPACT).

Between 2001 and 2006, 56 percent of the study participants received treatment from county hospitals and 44 percent received care from private facilities. While tumor characteristics were similar in each group, patients treated in private facilities were more likely than those treated in county hospitals to be white and less likely to undergo surgery. Specifically, patients treated in private facilities were nearly two-and-a-half times more likely than those treated in county hospitals to receive radiation and more than four-and-a-half times more likely to initially receive [hormone therapy](#) instead of surgery.

While the reasons for these differences in treatment decisions are not known, the type of doctor that patients see may play a role, according to Parsons. At county hospitals, patients were initially under the care of urologists, while the initial providers at private facilities represented urologists, radiation oncologists, and medical oncologists.

"The fact that prostate cancer patients are treated differently based on the type of hospital has implications for health policy, quality of care and equality of care—particularly because public hospitals are funded by city and state governments to provide health care for underserved, poor populations," said Parsons.

After skin malignancies, prostate cancer is the most commonly diagnosed cancer, and the second leading cause of cancer death among U.S. men.

Provided by University of California - San Diego

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