

Underinsured African-American women have worse breast cancer outcomes

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Underinsured African-Americans had worse breast cancer survival outcomes than underinsured non-Hispanic whites, according to a study published online June 23rd in the *Journal of the National Cancer Institute*.

The study was the first to look at underinsured populations of African-American and non-Hispanic white women with comparable socio-demographic profiles at a single institution. Most previous studies have compared racial and ethnic differences among patients in diverse geographic locations. Prior epidemiological studies have identified factors that may account for the higher levels of [breast cancer](#) mortality between African American women and non-Hispanic whites. These include socio-demographic variables such as income, education level, and access to health care. African-American women have also been shown to be more susceptible to aggressive tumor types than white women.

To compare breast cancer outcomes between underinsured African-Americans and non-Hispanic whites, Ian K. Komenaka, M.D., from Wishard Memorial Hospital in Indianapolis, and colleagues, conducted a retrospective review of medical records for breast cancer patients treated at Wishard Hospital between January 1, 1997, and February 28, 2006.

The researchers looked at the records of 574 patients, 84% of whom were underinsured. Both groups had a similar median time from diagnosis to operation, adequate surgery, and similar usage of adjuvant

therapy and follow-up time.

The researchers found that African-American women had more advanced breast cancer at diagnosis, and overall, poorer breast cancer-specific survival outcomes than non-Hispanic whites. However, race was no longer significantly associated with breast cancer mortality after researchers made adjustments for age, stage and estrogen receptor status and progesterone receptor status.

The study also found that African-American women are just as likely as non-Hispanic white women to undergo breast-conserving procedures and adjuvant therapy, a finding that differed from previous studies showing African-American women used these less.

According to the authors, "Despite the similar surgical care and adjuvant therapy, [African-American women](#) in this study had lower overall and breast cancer-specific survival compared with non-Hispanic white women. After adjustment for competing causes of death, the survival disparity between African-American and non-Hispanic white women appears to be attributable in part to differences in clinical and socio-demographic factors between the groups."

"The point of the study," Komenaka said, "is that many factors are important: surgery, adjuvant therapy, biologic and clinical factors, and socio-demographic variables."

The authors, however, said the study was limited by its relatively small sample size. They aim to develop future studies with information on clinical and socio-demographic factors as well as the specific cause of death to clarify the causes of racial and ethnic differences in overall survival among breast cancer patients.

More information: jnci.oxfordjournals.org

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