

Blacks with liver cancer more likely to die, study finds

December 20 2010

Black people with early stage liver cancer were more likely than white patients to die from their disease, according to a new study from the University of Michigan Comprehensive Cancer Center.

Five years after diagnosis, 18 percent of white [liver cancer](#) patients were alive but only 15 percent of Hispanic patients and 12 percent of black patients were. Median survival times ranged from 10 months for whites and Hispanics to 8 months for blacks.

The researchers also found racial and [ethnic disparities](#) in how often patients received treatment, with black and Hispanic patients less likely than whites to have any kind of treatment.

When researchers looked at survival only among patients who had been treated, the disparity in survival persisted, but the gap narrowed, especially for Hispanics. Blacks who had surgery lived a median 29 months, Hispanics 40 months and whites 43 months. Median survival for all races was only four to six months without treatment.

"Just under a third of the patients we looked at received treatment, which is a significant underuse of appropriate interventions for the most treatable stages of liver cancer," says study author Christopher J. Sonnenday, M.D., M.H.S., assistant professor of surgery at the U-M Medical School and assistant professor of health management and policy at the U-M School of Public Health.

Researchers looked at data from 13,244 patients with early stage hepatocellular carcinoma, or liver cancer. Patients were identified through the Surveillance and Epidemiology End Results registry, a database from the National Cancer Institute that collects information on cancer incidence, prevalence and survival.

Results of the study appear in the December issue of [Archives of Surgery](#).

Liver cancer incidence is increasing, and the disease is difficult to treat in its later stages. Patients diagnosed with advanced disease have only a 5 percent chance of living five years after diagnosis. Early stage disease is more treatable, with options including tumor ablation, surgery to remove a portion of the liver or liver transplant surgery.

"Liver cancer requires highly complex care that is available only in larger referral hospitals. Our study suggests that not only do members of different racial and ethnic groups face barriers to accessing this care, but the survival of blacks and Hispanics even after receiving these treatments appears to be inferior to whites," Sonnenday says.

More information: *Archives of Surgery*, Vol. 145, No. 12, pp. 1158-1163, Dec. 20, 2010

Provided by University of Michigan Health System

Citation: Blacks with liver cancer more likely to die, study finds (2010, December 20) retrieved 26 April 2024 from <https://medicalxpress.com/news/2010-12-blacks-liver-cancer-die.html>

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