

Even with insurance, racial disparities in breast cancer treatment persist

July 27 2012, By Glenda Fauntleroy



More White women are diagnosed with breast cancer than Black women, yet Black women with breast cancer have a higher mortality rate. One potential explanation for this disparity is delayed treatment, perhaps due to differences in socioeconomic status and access to care. However, a new study in *Ethnicity & Disease* finds that some disparities persist even when Black and White patients have the same Medicaid health insurance and similar economic status.

Using linked data from the New Jersey State Cancer Registry and New Jersey Medicaid Research files, the research study included 237 [black women](#) and 485 [white women](#) between the ages of 20 and 64 who were diagnosed with early [breast cancer](#) between 1997 and 2001. Three types of treatment delays were examined: surgery, radiation following surgery,

and hormonal therapy and/or chemotherapy following surgery.

The researchers found that Black women had a two-fold chance (16 percent vs. 9 percent) of experiencing a 3-month or more delay in starting chemotherapy following surgery than whites. Blacks were also 70 percent more likely to have delays of 2 months or more in starting radiation. No racial differences were found for surgical or hormonal treatment delays.

“We expected that because these women were all insured through Medicaid, we would not observe any differences in treatment delays between Blacks and Whites,” said lead author Bijal Balasubramanian, MBBS, Ph.D., of the University of Texas School of Public [Health](#) in Dallas. “What we found was that Blacks experienced delays in receiving treatments such as chemotherapy and radiation that required a patient to travel to a health care center frequently over an extended period of time.”

This indicated to us that there might be social reasons for the delay among Blacks, such as difficulties obtaining transportation or support from family members, she added.

“This study shows that overall when women have similar insurance, and other factors are adjusted for, that race makes only a minor difference in delays in breast health care,” said Peter M. Ravdin, M.D., director of the Breast Health Clinic at the University of Texas Health Science Center San Antonio. “Further studies to understand why some women had such long delays and ways to shorten time to treatment would be worthwhile.”

Balasubramanian suggested that increasing awareness of these treatment delays among women through culturally appropriate educational campaigns might also help reduce these racial differences.

More information: Balasubramanian BA, Demissie K, Crabtree BF, et al. Black Medicaid beneficiaries experience breast cancer treatment delays more frequently than Whites. *Ethnicity & Disease*, Volume 22, Summer 2012.

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