

Study links age, insurance, but not race, to chemo rates

August 10 2012

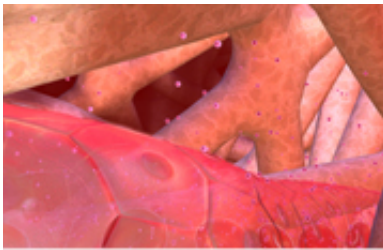


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(HealthDay) -- For women with breast cancer, disease characteristics correlate significantly with chemotherapy receipt, with no indication of racial barriers to treatment, according to a study published online Aug. 6 in the *Journal of Clinical Oncology*.

To examine disparities in receipt of adjuvant chemotherapy, Jennifer J. Griggs, M.D., M.P.H., from the University of Michigan in Ann Arbor, and colleagues recruited women diagnosed with [breast cancer](#) and identified through the Detroit, Michigan, or Los Angeles County Surveillance, Epidemiology, and End Results registry to complete a survey.

The researchers found that, for the 1,403 women included in the analytic sample, disease characteristics correlated significantly with receipt of chemotherapy in multivariable models. Low-aculturated Hispanics and high-aculturated Hispanics were more likely to receive chemotherapy than non-Hispanic whites (odds ratio [OR], 2.00 and 1.43, respectively). Black women were less likely than non-Hispanic whites to receive chemotherapy, but the difference was not significant (OR, 0.83; 95 percent confidence interval, 0.64 to 1.08). Even in women younger than 50 years of age, increasing age correlated with lower rates of chemotherapy receipt, as did Medicaid insurance.

"In conclusion, it seems that race and ethnicity need not pose barriers to receipt of [adjuvant chemotherapy](#)," the authors write. "Such a finding is encouraging as we continue to address racial and [ethnic disparities](#) in the receipt of quality cancer care. Nonetheless, differences and disparities do exist in receipt of chemotherapy according to age, insurance, and employment status."

More information: [Abstract](#)
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