

# African Americans experience longer delay between prostate cancer diagnosis and treatment

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The study was published online March 28 in *Cancer*, the journal of the American Cancer Society, by a team led by Ronald Chen, MD, MPH, assistant professor with the UNC Lineberger Comprehensive Cancer Center. Credit: UNC Lineberger Comprehensive Cancer Center

African American men on average wait a week longer than their Caucasian counterparts between the initial diagnosis of prostate cancer and treatment, according to University of North Carolina researchers.

The study was published online March 28 in *Cancer*, the journal of the [American Cancer Society](#), by a team led by Ronald Chen, MD, MPH, assistant professor with the UNC Lineberger Comprehensive Cancer Center. The study is the first published population-based examination of [racial disparities](#) in [prostate cancer treatment](#) delay.

Using data from [Medicare patients](#), Dr. Chen compared the treatment of 2,506 African American and 21,454 [Caucasian patients](#) diagnosed with early prostate cancer from 2004 to 2007. The data showed that, on average, African Americans experienced a seven-day longer delay in treatment.

"These are all patients with some form of insurance, i.e. Medicare, so it is not a lack of insurance that delays the care," said Dr. Chen.

Multiple prior studies have found that the disparity in survival rates between African American and Caucasians diagnosed with prostate cancer is the highest of any malignancy – with African American men being 2.4 times more likely to die from the disease. Prostate cancer is the most common cancer among all American men, with more than 240,000 diagnoses per year. It ranks as the second leading cause of [cancer death](#) among men, killing more than 28,000 annually.

The treatment delay was more pronounced among patients who were diagnosed with aggressive, "high-risk," prostate cancer, where [African American patients](#) experienced a 9-day longer delay compared to Caucasians.

"Other studies have shown that [African American men](#) are less likely to

get screened, they get diagnosed with more advanced cancers, and they are less likely to get aggressive treatment when they are diagnosed. Now we have shown that African American patients also wait longer for treatment. I think all of these disparities together add up to contribute to a worse long-term survival outcomes for African American patients," said Dr. Chen.

While the data did not reveal the impact of the delay on patient's survival, Dr. Chen noted that the Institute of Medicine has identified timely delivery of care as an important indicator of the quality of that care. To determine the reasons behind the delay, further studies will need to focus on the personal and institutional factors that lead to the disparities in treatment.

"What our study does is that it identifies an area of need, an area of disparity. More studies are needed to figure out why and to find ways to address disparities in care," said Dr. Chen.

Provided by University of North Carolina Health Care

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