

# Racial disparities in the surgical management of non-small cell lung cancer

May 21 2013

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The surgical management of non-small cell lung cancer (NSCLC) in U.S. hospitals varies widely depending on the race of the patient, according to a new study.

"In most patients, the initial treatment for Stage I and Stage II [NSCLC](#) is surgery," said researcher Jayanth Adusumalli, MBBS, of the Creighton University Medical Center in Omaha, Nebraska. "In our study of more than 1,200,000 patients diagnosed with NSCLC in US hospitals between the years 2000 and 2010, we found statistically significant racial disparities in the surgical management of these patients."

The results of the study will be presented at the ATS 2013 International Conference.

The study included 1,200,955 patients from the National Cancer Data Base (NCDB); 975,229 of these patients had received their first course of treatment after initial diagnosis.

African-Americans were less likely to undergo surgery as initial treatment for Stage I and Stage II disease than Caucasians and Hispanics, and Hispanics were more likely to undergo surgery as initial treatment of Stage I and II disease than Caucasians." Overall, 82% of Caucasians, 79% of African Americans, and 76% of Hispanics received some form of treatment.

Among patients with Stage I disease, surgical intervention was

performed in 78% of [Caucasians](#), 73% of African Americans, and 82% of Hispanics. Corresponding figures for Stage II were 64%, 56% and 67%.

"The significant racial differences in the initial treatment of NSCLC that we found in our study may contribute to the recognized [racial disparities](#) in [cancer patient](#) outcomes," said Dr. Adusumalli. "Further research into the underlying causes of these treatment disparities may help improve the treatment and prognosis of all [lung cancer patients](#)."

Provided by American Thoracic Society

Citation: Racial disparities in the surgical management of non-small cell lung cancer (2013, May 21) retrieved 2 May 2024 from <https://medicalxpress.com/news/2013-05-racial-disparities-surgical-non-small-cell.html>

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