

An area's level of poverty or wealth may affect the distribution of cancer types

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A new analysis has found that certain cancers are more concentrated in areas with high poverty, while other cancers arise more often in wealthy regions. Also, areas with higher poverty had lower cancer incidence and higher mortality than areas with lower poverty. Published early online in *CANCER*, a peer-reviewed journal of the American Cancer Society, the study's findings demonstrate the importance of including measures of socioeconomic status in national cancer surveillance efforts.

Overall, [socioeconomic status](#) is not related to cancer risk—cancer strikes the rich and poor alike. However, socioeconomic status does seem to influence the type of cancer a person may develop. To look closely at the issue, Francis Boscoe, PhD, of the New York State Cancer Registry and his colleagues compared people living in areas with the highest poverty with those living in areas with the lowest poverty. The investigators assigned nearly three million tumors diagnosed between 2005 and 2009 from 16 states plus Los Angeles (an area covering 42 percent of the US population) into one of four groupings based on the [poverty rate](#) of the residential census tract at time of diagnosis.

For all cancer types combined, there was a negligible association between [cancer incidence](#) and poverty; however, 32 of 39 cancer types showed a significant association with poverty (14 positively associated and 18 negatively associated). Certain cancers—Kaposi sarcoma and cancers of the larynx, cervix, penis, and liver—were more likely in the poorest neighborhoods, while other cancers—melanoma, thyroid, other non-epithelial skin, and testis—were more likely in the wealthiest

neighborhoods. "At first glance, the effects seem to cancel one another out. But the cancers more associated with [poverty](#) have lower incidence and higher mortality, and those associated with wealth have higher incidence and lower mortality," explained Dr. Boscoe. "When it comes to cancer, the poor are more likely to die of the disease while the affluent are more likely to die with the disease."

Dr. Boscoe noted that recent gains in technology have made it much easier to link patient addresses with neighborhood characteristics, therefore making it possible to incorporate socioeconomic status into [cancer](#) surveillance. "Our hope is that our paper will illustrate the value and necessity of doing this routinely in the future," he said.

More information: "The relationship between area poverty rate and site-specific cancer incidence in the United States." Francis P. Boscoe, Christopher J. Johnson, Recinda L. Sherman, David G. Stinchcomb, Ge Lin, and Kevin A. Henry. *Cancer*; Published Online: May 27, 2014. [DOI: 10.1002/cncr.28632](https://doi.org/10.1002/cncr.28632)

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