

Racial, ethnic differences in picking surgeons, hospitals for breast cancer care

March 19 2015

Black and Hispanic women with breast cancer were less likely to pick their surgeon and the hospital for treatment based on reputation compared with white women, suggesting minority patients may rely more on physician referrals and health plans in those decisions, according to a study published online by *JAMA Oncology*.

Racial and ethnic disparities in the use, quality and delivery of medical care have been well described. However, data are limited with regard to how women select surgeons and hospitals for cancer treatment and whether there are racial and ethnic differences in those decisions. The promotion of thoughtful decision-making when choosing a physician and hospital may be an important part of addressing treatment disparities, according to the study background.

Rachel A. Freedman, M.D., M.P.H., of the Dana-Farber Cancer Institute, Boston, and coauthors surveyed 500 women in northern California (222 non-Hispanic white, 142 non-Hispanic black, 89 English-speaking Hispanic and 47 Spanish-speaking Hispanic) to examine racial and ethnic differences when women selected surgeons and hospitals for breast cancer care.

The authors found referral by another physician to be the most frequently reported reason for surgeon selection (78 percent) and a hospital being part of patient's <u>health plan</u> was the most common reason for hospital selection (58 percent).



Black and Hispanic patients were less likely than white patients to report selecting their surgeon based on reputation (18 percent and 22 percent for black and Hispanic women, respectively, vs. 32 percent of white women). Black and Hispanic women also were less likely than white women to select their hospital based on reputation (7 percent and 15 percent vs. 23 percent, respectively), according to the results. The authors note a high proportion of women were insured by Kaiser Permanente, which could explain why a large number of women reported their health plan influenced their selection.

"Most women relied on referrals from their physicians for selecting surgeons, particularly black women and Spanish-speaking Hispanic women. In addition, minority patients were less likely to report reputation as an important component of their decisions about surgeons and hospitals and were more likely to select a hospital because it was part of their health plan. These findings suggest less-active involvement of minority patients with regard to selecting physicians and hospitals for their care," the study concludes.

More information: *JAMA Oncol*. Published online March 19, 2015. DOI: 10.1001/jamaoncol.2015.20

Provided by The JAMA Network Journals

Citation: Racial, ethnic differences in picking surgeons, hospitals for breast cancer care (2015, March 19) retrieved 20 March 2024 from https://medicalxpress.com/news/2015-03-racial-ethnic-differences-surgeons-hospitals.html

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