(HealthDay)—Use of nonoperative management (NOM) of rectal cancer
is increasing, but primarily in disadvantaged patients, according to a study published online March 28 in the *Journal of Clinical Oncology*.

Clayton Tyler Ellis, M.D., from the University of North Carolina at Chapel Hill, and colleagues used the National Cancer Database to identify all incident cases of invasive, nonmetastatic rectal adenocarcinoma from 1998 to 2010. Patient- and facility-level factors associated with NOM use over time were evaluated.

The researchers found that based on the 146,135 patients, 5,741 had NOM and 140,394 had surgery with or without additional therapy. NOM doubled from 1998 to 2010, from 2.4 to 5 percent of all cases annually. NOM was more likely among patients who were black (adjusted odds ratio [aOR], 1.71), uninsured (aOR, 2.35) or enrolled in Medicaid (aOR, 2.10), or treated at low-volume facilities (aOR, 1.53), versus patients who were white, privately insured, and treated at a high-volume facility, respectively.

"We observed evidence of increasing NOM use, with this increase occurring more frequently in black and uninsured/Medicaid patients, raising concern that increased NOM use may actually represent increasing disparities in rectal cancer care rather than innovation," the authors write. "Further studies are needed to assess survival differences by treatment strategy."

One author disclosed financial ties to the pharmaceutical industry.

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