

U.S. black women get less care to prevent breast cancer return

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(HealthDay)—Black breast cancer survivors in the United States are less



likely than white or Hispanic women to get follow-up genetic screening and surgeries that can help prevent a return of cancer, new research finds.

Among more than 1,600 women diagnosed by age 50, almost twice as many whites were tested for critical BRCA gene mutations as blacks, the researchers found.

BRCA mutations raise the <u>lifetime risk</u> of a second breast cancer as much as 50 percent and risk of <u>ovarian cancer</u> by up to 44 percent, the study authors noted.

Also, black women were less likely to undergo <u>preventive mastectomy</u> or removal of the ovaries, even though those procedures are known to reduce the risk of a second breast cancer or ovarian cancer, the findings showed.

"I hope that our findings will raise awareness of disparities pertaining to inherited cancer predispositions, that exist across the cancer care continuum," said study leader Dr. Tuya Pal. She is a clinical geneticist at the H. Lee Moffitt Cancer Center & Research Institute in Tampa, Fla.

According to the American Cancer Society, racial minorities are more likely to develop cancer and to die from it than people in the general population.

In the new study, Pal and her colleagues evaluated Florida women diagnosed with breast cancer at or before age 50 from 2009 to 2012. The information came from the state cancer registry, which includes women treated in many settings.

The investigators found that 917 patients had BRCA testing after they were diagnosed, but the percentages varied racially. Sixty-five percent of



white women were tested, versus 62 percent of Hispanic women and just 36 percent of black women.

Of the 92 women who tested positive for the BRCA mutation, just 32 percent of black women had preventive ovary removal, compared to 85 percent of Hispanic women and 71 percent of white women.

The researchers discovered similar discrepancies regarding preventive mastectomy within the BRCA-positive group: 94 percent of whites and 85 percent of Hispanics had both breasts removed preventively, while just 68 percent of black women did.

The differences held even after Pal took into account such factors as insurance status and family history of cancer.

Exactly why these disparities exist isn't clear. "We need to better understand the reasons," she said.

The study did have limitations, Pal noted. For instance, four of the black women in the study were still in active treatment, which could help explain the lower rates of ovary removal in that group.

Because the findings are based on diagnoses from 2009 through 2012, the findings might not hold entirely true today, said Dr. Patricia Ganz of the Jonsson Cancer Center at the University of California, Los Angeles.

Ganz, a medical oncologist, said women in general are more aware of testing today, thanks partly to the openness of actress Angelina Jolie, who talked publicly in 2013 about being a BRCA carrier and undergoing preventive surgeries.

Another positive change is that BRCA testing has become more affordable, Pal said. It formerly cost \$4,000, but the U.S. Supreme Court



in 2013 invalidated patents on the BRCA genes, paving the way for more than one company to offer the tests, she said.

Still, "there clearly are disparities in the rates of genetic testing and the rate of prophylactic surgery," said Dr. Victoria Seewaldt, professor of population science at the City of Hope in Duarte, Calif. She wasn't involved in the study.

Neither she nor Pal think awareness of testing has increased across the board.

Underlying some of the disparity may be a lack of access to qualified surgeons, Seewaldt said.

Experts also need to learn more about the biology driving breast cancers in <u>black women</u>, Seewaldt added. Genes found so far to be linked with <u>breast cancer</u> are more likely to occur in women of European ancestry, she pointed out.

Pal presented the findings Monday at the annual meeting of the American Society of Clinical Oncology, in Chicago. Research presented at medical meetings should be considered preliminary until published in a peer-reviewed journal.

More information: To learn more about breast cancer risk factors, visit the <u>American Cancer Society</u>.

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