In addition to a person's race or ethnicity, where they live can matter in terms of whether they are diagnosed at a late stage for colorectal cancer, according to a recent study led by a researcher at the School of Public Health at Georgia State University.

The study finds that cancer patients who live in highly segregated Asian communities (mostly in coastal California) are relatively more likely to receive a late diagnosis of colorectal cancer. By contrast, cancer patients living in highly segregated African American communities (mostly large urban areas and the Sun Belt) are less likely to be diagnosed at a late stage.

The timing of diagnosis is important because when cancer is diagnosed at a late stage it is more difficult to treat and outcomes are not as good. The Georgia State study contrasts two approaches that have been used to examine the effects of place of residence on these late-stage diagnoses.

When considering another aspect—whether people are living in segregated places among others of their same race or ethnicity—there was a slight protective effect, with lower likelihood of being diagnosed at late stage. The researchers concluded that in some cases, communities that are segregated by race may be more cohesive and may offer support in encouraging fellow community members to get tested.

The results are published in a paper titled "Using residential segregation to predict colorectal cancer stage at diagnosis: two different"
approaches," in the *Annals of Epidemiology*. The study's lead author is Dr. Lee Rivers Mobley, associate professor of Health Management & Policy at the School of Public Health.

Researchers analyzed data from the Unites States Cancer Statistics database, focusing on more than 500,000 newly diagnosed colorectal cancer cases for 40 states from 2004-2009.

They noted that cancer is the second most common cause of death in the U.S. and that colorectal cancer is second only to lung cancer as a killer of Americans. Screening for colorectal cancer (including colonoscopies) can be effective in identifying and removing pre-cancerous tissue, avoiding diagnosis at a later, less treatable stage in the disease.

The researchers conducted a literature review and found numerous examples of campaigns designed to encourage urban populations, especially minority, low-income and non-English speakers, to be tested, and few examples of campaigns targeting rural residents. They found no examples of campaigns targeted at Asian Americans and suggested such efforts may be warranted in the San Francisco Bay area, where researchers found a relatively high rate of diagnosis of late-stage colorectal cancer.

Provided by Georgia State University

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