

# Race, insurance status linked to lower cancer survival

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Nonwhite, uninsured patients with clinically favorable human

papillomavirus (HPV)-associated squamous cell carcinoma of the head and neck (SCCHN) have higher mortality than their white peers, according to a study published in the February issue of the *Journal of the National Comprehensive Cancer Network*.

Luke R.G. Pike, M.D., from Massachusetts General Hospital in Boston, and colleagues used a custom Surveillance, Epidemiology, and End Results database to analyze 4,735 patients with nonmetastatic SCCHN and known HPV [status](#) who were diagnosed between 2013 and 2014. The authors performed a multivariable logistic regression analysis to identify associations between patient characteristics and HPV status and cancer-specific mortality (CSM).

The researchers found that oropharyngeal primary, male sex, and [higher education](#) were positively associated with HPV-positive SCCHN, while uninsured status, single marital status, and nonwhite race were negatively associated with HPV-positive SCCHN. Among patients with HPV-positive SCCHN, white race was associated with lower CSM (adjusted hazard ratio [aHR], 0.55), while uninsured status was associated with higher CSM (aHR, 3.12). The investigators did not observe these associations for HPV-negative or nonoropharynx SCCHN.

"It's unsettling that black and Hispanic men and women with HPV-positive oropharyngeal carcinoma—a disease we now recognize to be curable in many patients with even very advanced disease—appear to do disproportionately poorly as compared to their white peers," Pike said in a statement. "We also speculate that patients with insufficient insurance were unable to access high-quality radiotherapy, surgery, and chemotherapy, which is crucial to the successful treatment of locally advanced HPV-positive oropharyngeal cancer. We must strive to ensure that all men and women, no matter their insurance status or race, can get access to high-quality treatment for head and neck cancers."

**More information:** [Abstract/Full Text](#)

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