

Patients with malignant pleural mesothelioma face barriers to treatment access

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A study of 2,804 patients with stage I to stage III malignant pleural mesothelioma (MPM) found significant variability in access to care and a positive association between multimodality treatment, income levels, and survival outcomes. The research was presented today at the IASLC 2021 World Conference on Lung Cancer in OA13: Topics in Pleural Mesothelioma.

Assistant Professor Dr. Estelamari Rodriguez of the University of Miami Sylvester Comprehensive Cancer Center said that it is unclear what role disparities in access to care or a patient's socioeconomic status play in disease-related outcomes for operable MPM. To determine an answer, Dr. Rodriguez and his co-researchers used the National Cancer Database to assess patterns-of-care and overall survival among patients with malignant pleural mesothelioma by treatment access and individualized patient socioeconomic characteristics.

Dr. Rodriguez examined patient records of those with stage I-III malignant [pleural mesothelioma](#) treated from 2004 to 2017. A total of 2,804 patients were identified, with a median age of 65 years. Of the patients who had surgery, (n = 1,402), the majority were men (70%), of White race (83.1%), and had stage I-II disease (86.7%) that was pathologically defined as epithelioid mesothelioma (58.9%).

Compared to those who did not have surgery, patients who underwent

surgery as part of their treatment were travelling a greater distance for treatment (mean 16.10 miles vs 14.40 [p

"Among patients with operable [malignant pleural mesothelioma](#) there is significant variability in access to care regarding the distance to facility, facility type and volume. In a [multivariable analysis](#), receipt of chemotherapy or multimodality treatment—chemotherapy and radiotherapy—predicted better outcomes despite a patient's race, socioeconomic status, and tumor characteristics," Dr. Rodriguez reported.

"Understanding social determinants of health and addressing disparities in access to surgery and multimodality therapy can help ensure equity of care for [patients](#) with MPM," she said.

Provided by International Association for the Study of Lung Cancer

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