

# **Adding biologic agents to chemotherapy improves survivability in cancer patients—for both Black and white patients**

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A trio of researchers working at the Albert Einstein College of Medicine has found that giving biologic agents to metastatic colorectal cancer

patients improved survivability for black and white patients nearly equally. In their paper published in *JAMA Network Open*, Sanjay Goel, Abdissa Negassa and Ana Acuna-Villaorduna describe their study of possible differences in effectiveness in cancer treatments depending on race.

In this new effort, the researchers noticed that studies done to learn more about the benefits of giving certain [biologic agents](#) to patients with [metastatic colorectal cancer](#) involved mostly patients who were white. To find out if giving the same agents to Black patients would confer the same level of improvement, they obtained and analyzed [medical records](#) for 5,617 Black and white Medicare patients who had undergone treatment for metastatic colorectal cancer. As part of their analysis, they looked to see if survival times improved when patients were given prescribed biologic agents within three months of the time they had received chemotherapy. Survival times were defined as starting from the date of receiving their first chemotherapy treatment until the day of their death.

The survival time for colorectal cancer patients drops dramatically if tumors metastasize—in looking at their data, they found that the mean survival time for such patients was 17.9 months for all patients who were given biologic agents in addition to traditional chemotherapy. For those without the biological agents, it was just 8.3 months. When they broke down the same numbers by race, they found that for Black people, survival time was 17.8 months and 9 months, respectively, showing that giving Black people the biologic agents improves survival time just as much for Black people as it does for white people.

The researchers suggest their findings indicate that numbers from other studies showing survival times for people of color with metastasized colorectal cancer as being much lower than for white people is due to differences in treatment options. They also note that their findings also

highlight a problem with randomized clinical trials—the lack of racial diversity. They suggest that more people of color be included in such studies to ensure that the results are consistent across the board.

**More information:** Sanjay Goel et al, Comparative Effectiveness of Biologic Agents Among Black and White Medicare Patients in the US With Metastatic Colorectal Cancer, *JAMA Network Open* (2021). [DOI: 10.1001/jamanetworkopen.2021.36378](https://doi.org/10.1001/jamanetworkopen.2021.36378)

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