

Study finds Black patients wait longer for uterine cancer testing, diagnosis

February 15 2023, by Mallory Locklear



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Early diagnosis of uterine cancer is known to improve a patient's chances for survival, but previous research has found that Black patients are less likely to receive early diagnoses than people of other racial and ethnic

groups. A new analysis by Yale researchers provides insights into why that is: They found that Black patients were more likely than their white counterparts to experience testing delays or to not receive recommended tests at all.

The findings were published Feb. 15 in the *Journal of the National Cancer Institute*.

At what stage a patient is diagnosed with uterine cancer has a major impact on how well that patient will fare. When diagnosed while the cancer is still confined to the uterus, nearly 95% of patients will survive the next five years. But that rate drops to less than 70% once the cancer has spread to areas or [lymph nodes](#) nearby and plummets to around 18% once the cancer has spread to other parts of the body.

"Early diagnosis is important," said Xiao Xu, an associate professor of obstetrics, gynecology, and reproductive sciences at Yale School of Medicine and lead author of the study. "We don't know why there's a racial disparity in [early diagnosis](#) and until we do, it's hard to address it."

To determine whether differences in the diagnosis process contribute to this disparity, Xu and her colleagues used the MarketScan Multi-State Medicaid Database, which has deidentified data from more than 44 million Medicaid patients across the United States.

For their analysis, they included [adult patients](#) who had reported abnormal uterine bleeding to their [health care providers](#) and later received a diagnosis of uterine cancer. Abnormal uterine bleeding is the most common symptom of uterine cancer, Xu said, and can present as light spotting or heavier bleeding at unexpected times.

The American College of Obstetricians and Gynecologists recommends several procedures to evaluate the cause of abnormal uterine bleeding,

such as endometrial biopsy, transvaginal/pelvic ultrasound, and hysteroscopy, in which a physician examines the inside of the cervix and uterus with a small, telescope-like device. In the new study, researchers found that more than twice as many Black patients than white patients did not receive any of these procedures (10.1% of Black patients versus 5% of white patients).

Further, of the patients who did receive procedures, Black patients were more likely than white patients to experience a delay of more than two months in receiving their first diagnostic procedure following their report of abnormal uterine bleeding.

Ultimately, Black patients were more likely than white patients to experience a delay in receiving their cancer diagnosis. The researchers found that 11.3% of Black patients who'd reported abnormal uterine bleeding waited more than a year to receive a uterine [cancer diagnosis](#), compared with 8.3% of white patients.

"Overall, we found a pretty consistent difference in the quality of care received by Black and white patients," said Xu.

To better understand the driving factors behind this difference in care and how best to address them, Xu and her colleagues are evaluating additional sets of data to determine whether Black patients might experience barriers to accessing specialist care, if more education about the symptoms of [uterine cancer](#) may be beneficial for patients, and whether delays in diagnoses result in patients being diagnosed at later stages of cancer. They are also studying whether these findings among Medicaid patients are similarly seen in other patient populations.

"The goal," said Xu, "is for every patient to receive high-quality care."

More information: Xiao Xu et al, Racial Disparities in Diagnostic

Evaluation of Uterine Cancer among Medicaid Beneficiaries, *JNCI: Journal of the National Cancer Institute* (2023). DOI: [10.1093/jnci/djad027](https://doi.org/10.1093/jnci/djad027)

Provided by Yale University

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