

Racial, ethnic differences seen in breast cancer treatment declination

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For patients with breast cancer, there are racial and ethnic differences in treatment declination, according to a [study](#) published online May 9 in

JAMA Network Open.

Jincong Q. Freeman, M.P.H., from the University of Chicago, and colleagues examined trends and racial and ethnic disparities in treatment declination and overall survival using data from patients with [breast cancer](#) from 2004 to 2020. Four treatment modalities were assessed: chemotherapy, [hormone therapy](#) (HT), [radiotherapy](#), and surgery.

Data were included from 2,837,446 patients. The researchers found that 9.6, 6.1, 5.0, and 0.6 percent of the 1,296,488, 1,635,916, 1,893,339, and 2,590,963 patients declined chemotherapy, radiotherapy, HT, and surgery, respectively. The likelihood of declining surgery was increased for American Indian, Alaska Native, or other patients, Asian or Pacific Islander patients, and Black patients compared with white patients (adjusted odds ratios, 1.47, 1.29, and 2.01, respectively).

American Indian, Alaska Native, or other patients and Asian or Pacific Islander patients were more likely to decline chemotherapy (adjusted odds ratios, 1.13 and 1.21, respectively); and Black patients were more likely to decline radiotherapy (adjusted odds ratio, 1.05). The likelihood of declining HT was lower for Asian and Pacific Islander patients, Black patients, and Hispanic patients (adjusted odds ratios, 0.81, 0.86, and 0.66, respectively).

Higher mortality was seen for Black versus white patients who declined [chemotherapy](#) (adjusted hazard ratio, 1.07), while no overall survival differences were seen for Black and white patients who declined HT or radiotherapy.

"Our findings highlight racial and ethnic disparities in declination of treatment recommendations and overall survival, suggesting the need for

equity-focused interventions," the authors write.

More information: Jincong Q. Freeman et al, Declination of Treatment, Racial and Ethnic Disparity, and Overall Survival in US Patients With Breast Cancer. *JAMA Network Open* (2024) [DOI: 10.1001/jamanetworkopen.2024.9449](https://doi.org/10.1001/jamanetworkopen.2024.9449)

Gregory S. Calip et al, Examining the Associations Among Treatment Declination, Racial and Ethnic Inequities, and Breast Cancer Survival, *JAMA Network Open* (2024). [DOI: 10.1001/jamanetworkopen.2024.9402](https://doi.org/10.1001/jamanetworkopen.2024.9402)

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