

# Racial discrepancy in oncologic outcomes for low-risk PCa

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Among men with very-low-risk prostate cancer who meet criteria for active surveillance but undergo radical prostatectomy, African-American race is associated with poorer outcomes, with higher rates of disease upgrading and adverse pathology, according to a study published online June 17 in the *Journal of Clinical Oncology*.

(HealthDay)—Among men with very-low-risk prostate cancer (PCa) who meet criteria for active surveillance but undergo radical prostatectomy, African-American race is associated with poorer outcomes, with higher rates of disease upgrading and adverse pathology, according to a study published online June 17 in the *Journal of Clinical Oncology*.

To examine whether race-based [health disparities](#) exist among men with very-low-risk PCa who undergo [prostatectomy](#), Debasish Sundi, M.D., from Johns Hopkins University in Baltimore, and colleagues studied 1,801 men (256 African-American, 1,473 white, and 72 others) who met

National Comprehensive Cancer Network criteria for very low-risk PCa. Comparisons were made by racial group with regards to presenting characteristics, pathologic data, and [cancer recurrence](#).

The researchers found that more adverse pathologic features at prostatectomy and poorer oncologic outcomes were seen for African-American men with very-low-risk PCa. For African-American men, there was an increased likelihood of experiencing disease upgrading at prostatectomy (27.3 versus 14.4 percent; P

"African-American men with very-low-risk PCa should be counseled about increased oncologic risk when deciding among their disease management options," the authors write.

**More information:** [Abstract](#)  
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