

Colon cancer survival varies by insurance type

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other insurance. Even after adjustment for stage, especially for later-stage disease, significant disparities persisted, but the discrepancy decreased when only patients with stage I to II disease who had definitive surgery and resection of ?12 lymph nodes were included in the analysis.

"Colon cancer survival is lower for patients with no insurance or with Medicaid than for those with [private insurance](#)," the authors write. "Differences in rates of definitive surgery and adequate [lymph node dissection](#) explain some of this disparity."

More information: [Abstract/Full Text](#)

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(HealthDay)—Compared to patients with private insurance, colon cancer survival is lower for patients with no insurance or with Medicaid, according to a study published in the May issue of *Diseases of the Colon & Rectum*.

Dianne Pulte, M.D., from the German Cancer Research Center in Heidelberg, and colleagues examined survival for [patients](#) with colon cancer by insurance type (Medicaid, uninsured, or other insurance) using a sample derived from the Surveillance, Epidemiology, and End Results 18 database.

The researchers found that of the 55,432 patients, 13.7 percent had Medicaid, 7.5 percent no insurance, and 78.8 percent other insurance. Compared to patients with other insurance, those with Medicaid or without insurance were more likely to have metastatic disease. Survival was lowest for patients with Medicaid, with three-year survival estimates of 57.0 percent for Medicaid, 61.2 percent for uninsured, and 75.6 percent for

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