

# Time to breast cancer surgery delayed for non-hispanic blacks

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(hazard ratio, 1.45; 95 percent confidence interval, 1.06 to 2.01); the risks for death were similar for NHB and NHW [women](#) receiving mastectomy (hazard ratio, 1.06; 95 percent confidence interval, 0.76 to 1.48). After adding TTS to the Cox proportional hazards regression models, the hazard ratios remained similar.

"Future research on factors that influence surgical decisions, treatment delays, and short-term and long-term clinical outcomes is warranted to better understand racial disparities in breast cancer treatment and overall survival," the authors write.

**More information:** [Abstract/Full Text](#) ([subscription or payment may be required](#))

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(HealthDay)—The time to surgery (TTS) after a breast cancer diagnosis is delayed for non-Hispanic black (NHB) versus non-Hispanic white (NHW) women, according to a study published online Jan. 23 in *JAMA Surgery*.

Yvonne L. Eaglehouse, Ph.D., M.P.H., from the Uniformed Services University in Bethesda, Maryland, and colleagues compared TTS among 998 NHB women and 3,899 NHW women who received a diagnosis of stages I to III breast cancer and underwent breast-conserving [surgery](#) or mastectomy in the U.S. Military Health System.

The researchers found that the median TTS was 21 and 22 days among NHW and NHB women, respectively. At the 75th and 90th percentiles, NHB women had a significantly greater estimated TTS (3.6 and 8.9 days, respectively) than NHW women in multivariable models. Similar differences were seen by type of surgery. For patients receiving breast-conserving surgery, NHB women had a higher adjusted risk for death than NHW women

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