

For African American men with prostate cancer, decision regret linked to medical mistrust

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Medical mistrust is one reason why African American patients are more likely to have regrets about their choice of treatment for prostate cancer, suggests a study in *The Journal of Urology*, Official Journal of the American Urological Association (AUA). The journal is published in the Lippincott portfolio by Wolters Kluwer.

Concerns about masculinity also contribute to decision regret among African American men with localized prostate [cancer](#), suggests the new research by Molly DeWitt-Foy, MD, and colleagues of the Cleveland Clinic. "Our findings may help to identify new approaches to reducing racial disparities in risk and treatment outcomes for African American men with prostate cancer," Dr. DeWitt-Foy comments.

Beliefs about prostate cancer help to explain racial disparities

The study included 1,112 men, average age 63 years, treated for localized prostate cancer between 2010 and 2016. Because their cancer hasn't spread beyond the prostate gland, patients with localized disease have a choice of treatment options, including active surveillance, hormone therapy, radiation, surgery, or watchful waiting.

About 40 percent of patients in the study were African American, while 60 percent were of other racial/ethnic groups. Most medical

characteristics were similar for African American versus non-African American men. Initial treatment consisted of surgery (prostatectomy) in about 50 percent of patients and radiation (brachytherapy) in 42 percent.

The men completed a series of surveys, including a newly designed Prostate Cancer Beliefs Questionnaire (PCBQ). Based on previous studies of racial differences in cultural beliefs regarding [medical care](#), the PCBQ aimed at a better understanding cancer-related beliefs and experience with prostate cancer diagnosis, treatment, recovery and survival.

The outcomes of prostate cancer treatment were generally similar between groups, including problems with urinary incontinence, bowel function, and hormonal symptoms. African American men had lower scores for sexual function compared to non-African American men. Yet despite similar outcomes, African American men had higher average scores for decision regret: about 45 versus 35 (on a 100-point scale).

There were also some racial differences in responses to the PCBQ. "African American men exhibited greater concern about masculinity and more [medical mistrust](#) than non-African American men," Dr. DeWitt-Foy and coauthors write.

African American patients were more likely to say their doctor treated them differently because of their race—although 80 percent of them disagreed with this statement. African American patients were also more likely to feel that screening and treatment for prostate cancer "made them feel like less of a man."

After adjusting for other factors, African American patients were more than twice as likely to have high decision regret regarding prostate cancer treatment. Medical mistrust and concerns about masculinity explained some of the effect of race on regret scores. Regardless of race,

poorer sexual function and worse urinary incontinence—two major side effects of prostate cancer treatment—also predicted higher decision regret scores.

Despite progress over the past 20 years, African American men are still more likely to be diagnosed with, and die from, prostate cancer. The new study sought to better understand patients' beliefs about prostate cancer, and ultimately to reduce treatment-related decisional regret.

The findings confirm African American men have higher decision regret about their [prostate](#) cancer treatment, and suggest these regrets are related to medical mistrust and concerns about masculinity. Dr. DeWitt-Foy and colleagues conclude: "This information may help inform counseling of patients, and has the potential to reduce [racial disparities](#) in patients' experiences with [prostate cancer](#) by targeting opportunities for education and improved communication."

More information: Molly E. DeWitt-Foy et al. Race, Decisional Regret and Prostate Cancer Beliefs: Identifying Targets to Reduce Racial Disparities in Prostate Cancer, *Journal of Urology* (2020). [DOI: 10.1097/JU.0000000000001385](#)

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