

Black race not tied to worse prostate cancer mortality

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black race was associated with an increased age-adjusted prostate cancer-specific mortality (PCSM) hazard (subdistribution hazard ratio [sHR], 1.30; 95 percent confidence interval [CI], 1.23 to 1.37; P significant difference for high-risk men (sHR, 1.04; 95 percent CI, 0.97 to 1.12; P = 0.29). In the VA cohort, there were no significant differences in PCSM (sHR, 0.85; 95 percent CI, 0.56 to 1.30; P = 0.46). In the RCT cohort, black men had a significantly lower hazard (sHR, 0.81; 95 percent CI, 0.66 to 0.99; P = 0.04). Other-cause mortality was significantly higher among black men in the SEER (sHR, 1.30; 95 percent CI, 1.27 to 1.34; P

"In this study, after adjustment for nonbiological differences, notably access to care and standardized treatment, black race did not appear to be associated with inferior stage-for-stage PCSM," the authors write.

(HealthDay)—After adjustment for nonbiological differences, black race is not associated with worse prostate cancer-specific mortality among men with nonmetastatic prostate cancer, according to a study published online May 23 in *JAMA Oncology*.

Robert T. Dess, M.D., from the University of Michigan in Ann Arbor, and colleagues evaluated the association of black race with long-term [prostate](#) cancer survival outcomes among men with nonmetastatic prostate cancer. Data were used from the Surveillance, Epidemiology, and End Results U.S. population registry (SEER; 296,273 patients; 17.8 percent black), five equal-access regional medical centers within the Veterans Affairs health system (VA; 3,972 patients; 38.1 percent black), and four pooled National Cancer Institute-sponsored Radiation Therapy Oncology Group phase 3 randomized [clinical trials](#) (RCT cohort; 5,854 patients; 19.3 percent black).

The researchers found that in the SEER cohort,

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