

Racial differences seen for cancer diagnosis, treatment, survival

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and Hispanic patients versus Asian patients (black: adjusted odds ratio, 0.630; Hispanic: adjusted odds ratio, 0.751). Compared with Asian patients, white, black, and Hispanic [patients](#) were more likely to have poorer CSS and OS (CSS adjusted hazard ratios: white, 1.310; black, 1.645; Hispanic, 1.300; OS adjusted hazard ratios: white, 1.333; black, 1.754; Hispanic, 1.279).

"The findings of this study may lead to different management strategies based on race and ethnicity to improve outcomes," the authors write.

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

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(HealthDay)—Stage at diagnosis, treatment, and survival differ by race and ethnicity for patients with one of the nine leading cancers, according to a study published online April 8 in *JAMA Network Open*.

Chenyue Zhang, Ph.D., from Shanghai Medical College, and colleagues examined stage of cancer at diagnosis, use of therapy, overall survival (OS), and cancer-specific survival (CSS) in 950,377 patients with cancer (prostate, ovarian, breast, stomach, pancreatic, lung, liver, esophageal, and colorectal) from different racial/[ethnic groups](#) (71.7 percent white, 12.2 percent black, 6.9 percent Asian, and 9.2 percent Hispanic). The authors analyzed information from the Surveillance, Epidemiology, and End Results (2004 through 2010) database.

The researchers found that compared with Asian patients, [black patients](#) were more likely to have metastatic disease at diagnosis (odds ratio, 1.144). Definitive treatment was less likely among black

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