

Title: A Pilot Investigation of Ethnic Disparities in Patient-Initiated Premature Treatment Discontinuation Among Colon Cancer Patient

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Abstract:

Colon cancer is the third leading site for cancer and is the second or third leading cause of cancer death among men and women, respectively. In examining colon cancer disparities, it is evident that African Americans suffer a disproportionate burden of this disease having both higher incidence and mortality rates. We hypothesize that the disparities in colon cancer mortality may be attributable, in part, to differences in the receipt of treatment after diagnosis. We postulate that these differences in treatment may be manifested through higher rates of patient-initiated premature discontinuation of chemotherapeutic treatment among African Americans in comparison to European Americans. Furthermore, patient demographic characteristics associated with patient-initiated premature discontinuation of chemotherapeutic treatment may differ by ethnicity. With this investigation, we seek to explore ethnicity-stratified rates and determinants of patient-initiated premature discontinuation of chemotherapeutic treatment. Thus, the specific aims of the study are 1) To develop a protocol to retrospectively identify African-American and European-American colon cancer patients who received chemotherapy treatment at a local oncology office; 2) To conduct a medical record review of the random sample of colon cancer patients previously identified; 3) To determine and compare by ethnicity the prevalence of patient-initiated premature discontinuation of chemotherapeutic treatment among the random sample of colon cancer patients; 4) To determine and contrast by ethnicity the patient demographic characteristics associated with patient-initiated premature discontinuation of chemotherapeutic treatment. We propose a retrospective, cohort study design to explore ethnicity-stratified rates and determinants of patient-initiated premature discontinuation of chemotherapeutic treatment among a sample of 400 African-American and European-American colon cancer patients. Such a study would aid in the development of interventions aimed at increasing compliance to treatment regimens with the ultimate goal to improve quality of life and promote survivorship among ethnic minority groups disproportionately affected by the devastating disease of colon cancer.

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