



FOR IMMEDIATE RELEASE

Rachael Vander Martin  
(510) 608-5160 / [rachael@nccc.org](mailto:rachael@nccc.org)

David Perry / David Perry and Associates, Inc.  
(415) 693-0583 / [news@davidperry.com](mailto:news@davidperry.com)

## **Racial/Ethnic Differences in Colorectal Cancer Puzzle Researchers**

**Mortality rates 33% higher among Blacks and 16% higher  
among Hispanic men compared to Whites**

FREMONT, CA – *October 22, 2007* - Colorectal cancer, if detected early, has greater than 90% 5-year survival. However, survival has been shown to vary across racial and ethnic groups in the United States. In a newly published study, research scientists at the Northern California Cancer Center ([www.nccc.org](http://www.nccc.org)) and the University of California at Berkeley found higher colorectal cancer mortality rates among Black men and women and Hispanic men, and lower mortality rates among male and female Japanese, compared with Whites.

Among Blacks, half of the difference in survival after colorectal cancer was primarily attributable to later disease stage and lower socioeconomic status, but most of the remaining difference is unexplained. This study was conducted within a large national database containing cancer and other clinical information on more than 40,000 persons aged 65 years or older diagnosed with colorectal cancer.

“We found that, in the older Medicare population, earlier state at diagnosis from better screening could substantially reduce race differences in survival after colorectal cancer,” notes **Scarlett Lin Gomez, Ph.D.**, the **Northern California Cancer Center** research scientist who led the study.

“But neither stage, nor a large set of other clinical and treatment factors, entirely explained the poorer outcomes we saw in Blacks. This is alarming.”

Cancers of the colon and rectum are the second leading cause of cancer deaths among men and women in the United States, responsible for more than 57,000 deaths each year. The difference in mortality rates between Blacks and Whites have widened over time and studies attempting to explain the disparity have been inconsistent.

Stage of the cancer remains the single factor that has the greatest impact on survival after colorectal cancer. For persons aged 50 years or older, the American Cancer Society recommends one of five colorectal cancer screening schedules, yet only 53% of this target population reports having had a fecal occult blood test in the past year or a sigmoidoscopy/colonoscopy in the past five years.

The authors recommend additional research in areas that have traditionally received less attention, such as structural and institutional barriers to health care, as well as behavioral factors that may affect survival, including physical activity and vitamin D intake. This kind of research is necessary to identify the factors and mechanisms leading to the poorer outcomes among Blacks and Hispanic men.

Data for this study were obtained from the linked Surveillance, Epidemiology and End Results (SEER)–Medicare database, which combines data from the National Cancer Institute SEER Program of population-based cancer registries. The study population includes the states of Connecticut, Hawaii, Iowa, New Mexico and Utah, and the metropolitan areas of Atlanta, Detroit, San Francisco/Oakland, Seattle/Puget Sound, San Jose/Monterey and Los Angeles, representing approximately 14% of the US population.

The study, “Longitudinal, population-based study of racial/ethnic differences in colorectal cancer survival: Impact of neighborhood socioeconomic status, treatment and comorbidity,” can be viewed online at <http://www.biomedcentral.com/bmccancer/>.

[About the Northern California Cancer Center](#)

The Northern California Cancer Center ([www.nccc.org](http://www.nccc.org)) is an established, nationally recognized leader dedicated to understanding the causes and prevention of cancer and to improve the quality of life for individuals living with cancer. NCCC has been working with scientists, educators, patients, clinicians, and community leaders successfully since 1974, and is an active partner with Stanford University's Cancer Center. NCCC is a 501(c) 3 nonprofit with over 170 employees and a \$15 million operating budget.

# # #