

Transcript Details

This is a transcript of an educational program accessible on the ReachMD network. Details about the program and additional media formats for the program are accessible by visiting: <https://reachmd.com/programs/project-oncology/confronting-the-disparity-crisis-in-breast-cancer-care/12127/>

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Confronting the Disparity Crisis in Breast Cancer Care

Dr. Sands:

Coming to you from the ReachMD studios in Fort Washington, Pennsylvania, this is *Project Oncology* on ReachMD. I'm Dr. Jacob Sands, and on this episode, we're going to hear from Dr. Mariana Chavez MacGregor, Associate Professor at the University of Texas MD Anderson Cancer Center. Dr. Chavez MacGregor joins us to talk about the disparity crisis in breast cancer care. Let's hear from her now.

Dr. Chavez Mac Gregor:

As an oncologist, I would like to share some of the health care disparities that I see in the breast cancer space. We know that there's a disparity crisis when it comes to breast cancer outcomes where all of the benefits from our newer therapies are not equally distributed in the population. Blacks and Hispanics are more likely to die of breast cancer, and this disparity it's seen across the cancer care continuum, meaning across all the entire survivorship journey of our patients. We see disparities in screening, in diagnosis, in treatment, and even in access to end-of-life care. And it's been clearly reported that racial and ethnic minorities, women of lower socioeconomic status or lower educational levels are less likely to participate in screening programs. These women are therefore more likely to be diagnosed with advanced stages. Independently, we also know that certain groups of patients are at higher risk of having delays in diagnosis and also at having delays in treatment initiation, not only surgery but also chemotherapy, and also less likely to participate in end-of-life care like hospice transition for those with metastatic breast cancer. So, we do see disparities across our entire cancer journey that ultimately affect the outcomes of our patients.

The impacts of the disparities in breast cancer are significant. The impacts, of course, will affect the individual experience of our patients, of their families, of their communities, but they also are associated with worse outcomes. There's very strong data that supports the fact that a delay in diagnosis, and after a diagnosis a delay in treatment initiation, it's associated with less benefit from our treatments. So, as a field, as we try to improve the treatments for breast cancer patients and bring new drugs to our patients, I think it's also fundamental for us to try to administer the treatments that we have to be delivered timely and appropriately to everybody because ultimately these delays and these disparities can explain in part that crisis that I mentioned at the beginning where ultimately our patients are dying more or benefiting less from the treatments that we have since they don't have the same access to care.

I think that it's a responsibility for us to identify, recognize, and ultimately eliminate these disparities. There are a number of things that can be done. No solution is gonna attack or tackle all the dimensions of this problem, so we need to think about different interventions at a multidimensional level. We need to think high level in terms of policy, in terms of access of care, but also we need to think about navigation that can help patients interact better with the health care system, that it's quite complex. We also need to engage community leaders, participate with our community and community engagement programs, participatory research. We need to continue understanding our own communities, our own institutions, and having the conversation with colleagues and individually to recognize any potential implicit biases that can affect the care that we are individually giving our patients. So, there are a number of things that we need to continue to do. There're different strategies ongoing, but, of course, there's a big road ahead, and we need to think in many different strategies at the same time. We need to understand the impact of the social determinants of health in the disparities of our patients and combine that with increased knowledge in the biology of breast cancer that can help us identify specific populations that are a higher risk. So, ultimately what we can see is that we continue to improve the outcomes of our patients, but that these outcomes are improved homogenously in the population.

Dr. Sands:

That was Dr. Mariana Chavez MacGregor from the University of Texas MD Anderson Cancer Center talking about the disparities she's

seen in breast cancer. I'm Dr. Jacob Sands. To access this episode and others in our series, visit reachmd.com/ProjectOncology, where you can Be Part of the Knowledge. Thanks for joining us.