

Understanding Healthcare Disparities in Colorectal Cancer

Thursday, March 25, 2021



In the United States, an estimated 147,950 people were diagnosed with cancer of the colon or rectum in 2020. It is one of the most highly diagnosed cancers in the US, with 12 percent of cases diagnosed in people under the age of 50.[i] Additionally, more than 20 percent of Americans with colorectal cancer have metastatic disease at diagnosis.

Metastatic disease means the cancer has already begun to spread to other parts of the body.[ii]

The COVID-19 pandemic has revealed flaws within healthcare systems, including the fact that minority communities sometimes receive inadequate healthcare.[iii] For colorectal cancer (CRC) specifically, data suggests that certain minority populations in the US are disproportionately affected by the disease and have a higher likelihood of being diagnosed when their disease has already advanced to the metastatic stage. Notably:

Black Americans, who have the highest CRC incidence and mortality rates of all racial groups in the US, have a 20 percent higher likelihood of getting colorectal cancer and a 40 percent higher death rate.[iv],[v],[vi] Among Native Americans, CRC is the second most common cancer and the second leading cause of cancer death. [vii] Other minority groups, including Ashkenazi Jews, are at a higher risk for CRC due to certain gene mutations.[viii]

This CRC Awareness month and every month, we need to show our support for the CRC community and raise awareness of this disease. That's why we've partnered with Edith Peterson Mitchell, MD, MACP, FCPP, FRCP (London), Associate Director, Diversity Affairs, Sidney Kimmel Cancer Center at Jefferson Health, to shed light on healthcare disparities in CRC care.

Colorectal Cancer Screening & Biomarker Testing Addressing these healthcare disparities starts with raising awareness and people talking to their doctor about getting screened. According to the American Cancer Society, all average-risk adults should begin routine CRC screening at age 45. People at higher risk may need to begin screening at a younger age. Talking with a doctor will help determine when to start screening for CRC.[ix]

If someone is faced with a metastatic CRC diagnosis, they can talk to their doctor about biomarker testing, which can identify specific gene mutations, or in other words, a permanent change in the DNA sequence that makes up a gene. Knowing and understanding the mutational status of the cancer can help inform a patient's care plan.

Let's work together to help end healthcare disparities in CRC.

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