

Analysis of Health Care Delivery and Outcomes in Hispanic Women with Breast Cancer



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Background

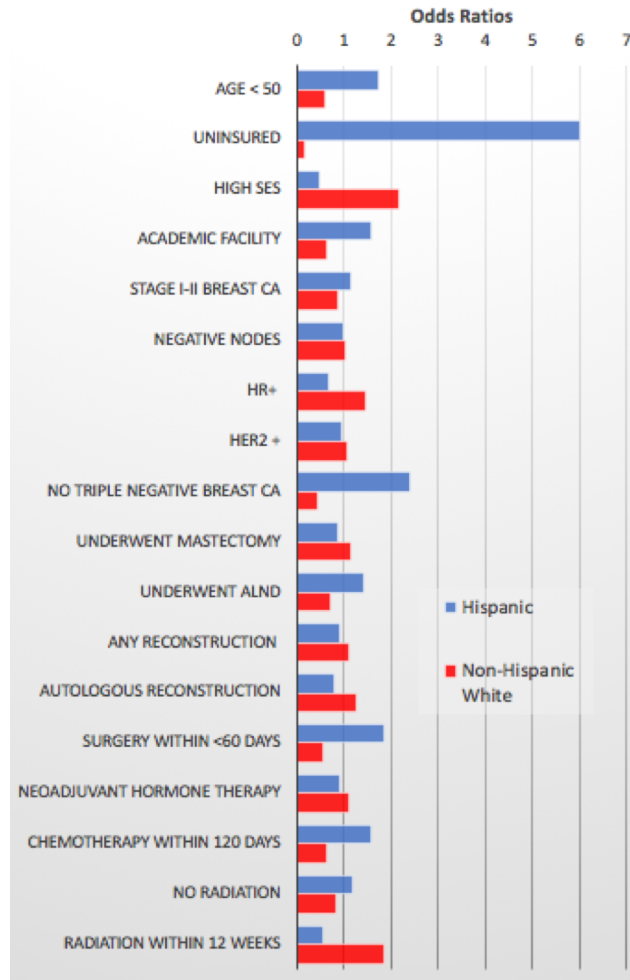
- Hispanics are the largest ethnic minority in the US
- Process of health care delivery in this population is unknown
- We aimed to evaluate the breast cancer care process among Hispanic women and to assess factors associated with mortality

Methods

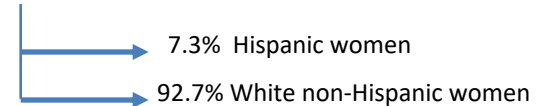
- A retrospective analysis of the National Cancer Database was performed, consisting of women with stage I-IV breast cancer from 2005 to 2015
- Ethnicity/Race was classified as Hispanic, and White non-Hispanic
- Demographics and breast cancer care process were evaluated
- Descriptive statistics and adjusted logistic regression analysis were performed to evaluate covariates by ethnicity
- COX hazard model was used to evaluate 10-year overall survival

Results

Variables Evaluated Between Hispanic and Non-Hispanic White Patients



- 178,398 women with stage I-IV breast cancer



- Hispanic women when compared to their counterparts:
 - Presented at more advanced stages (III/IV) (23.6% vs 21.2%)
 - More likely to undergo lumpectomy compared to mastectomy (OR 0.87; 95% CI 0.77-0.98).
 - Less likely to receive reconstruction (OR 0.90; 95% CI 0.75-1.08)
 - More likely to receive adjuvant chemotherapy vs. neoadjuvant chemotherapy (OR 1.22; 95% CI 1.01-1.46)
 - Greater delays in time to chemotherapy (≥ 120 days) (OR 1.58; 95% CI 1.35-1.85)
 - Delays in time to surgery (≥ 60 days) (OR 1.83; 95% CI 1.56-2.16)
- No difference in terms of receipt of hormone therapy
- No difference in 10-year overall survival among Hispanic and White non-Hispanic women with breast cancer.

Conclusion

- Variation from standard care and greater delays in timeliness of treatment were observed in Hispanic women
- The findings may point to the need to address process of care factors in the management of breast cancer in the Hispanic population