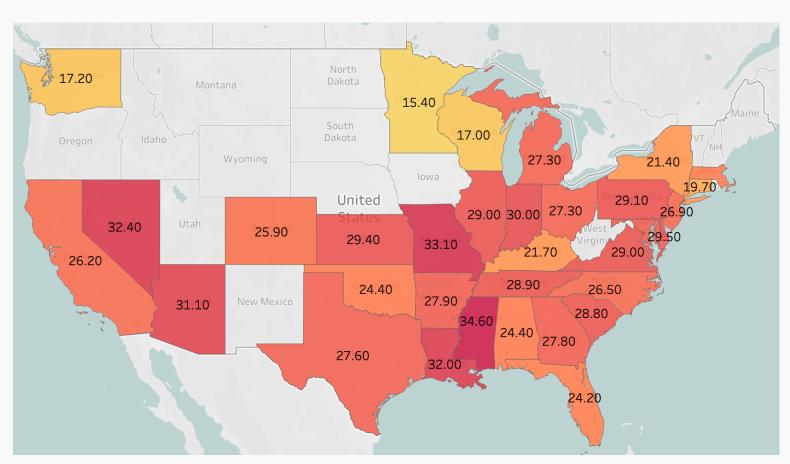
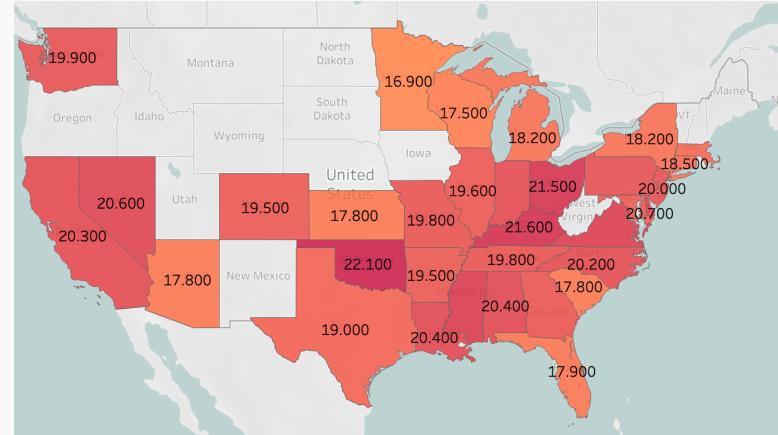
THE CANCER DIVIDE

Tackling a Racial Gap in Breast Cancer Survival

By Tara Parker-Pope December 20, 2013





BLACK MORTALITY RATE BY STATE 2017

Map shows sum of Black Rate. Details are shown for State.

SUM(Black Rate)

15.40 34.60

WHITE MORTALITY RATE BY STATE 2017

Map shows sum of White Rate. Details are shown for State.



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Like many other African-American women in Memphis and around the country, Ms. Reid learned about her breast cancer after it had already reached an advanced stage, making it difficult to treat and reducing her odds of survival. Her story reflects one of the most troubling disparities in American health care. Despite 20 years of pink ribbon awareness campaigns and numerous advances in medical treatment that have sharply improved survival rates for women with breast cancer in the United States, the vast majority of those gains have largely bypassed black women.

The cancer divide between black women and white women in the United States is as entrenched as it is startling. In the 1980s, breast cancer survival rates for the two were nearly identical. But since 1991, as improvements in screening and treatment came into use, the gap has widened, with no signs of abating. Although breast cancer is diagnosed in far more white women, black women are far more likely to die of the disease. And Memphis is the deadliest major American city for African-American women with breast cancer. Black women with the disease here are more than twice as likely to die of it than white women.

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Over all, black women with a breast cancer diagnosis will die three years sooner than their white counterparts. While nearly 70 percent of white women live at least five years after diagnosis, only 56 percent of black women do. And some research suggests that institutions providing mammograms mainly to black patients miss as many as half of breast cancers compared with the expected detection rates at academic hospitals.

The gap in cancer survival cannot be explained away by biological differences in cancer between blacks and whites, researchers say. While African-American women are at greater risk of a more aggressive form of cancer known as triple negative, those cancers account for only about 10 percent of diagnoses.

Researchers from the Sinai Institute last year analyzed breast cancer cases in the country's 25 largest cities and found that African-American women with breast cancer were, on average, 40 percent more likely to die of their disease than white women. In the United States, the disparity in breast cancer survival translates to about 1,700 additional deaths each year — or about five more black women dying every day. With a grant from the Avon Breast Cancer Foundation.

Many Health Issues

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BLACK AND WHITE MORTALITY RATE BY STATE 2017

Year of Death vs. Black Females All Ages and White Females All Ages.



TACKLING A RACIAL GAP IN BREAST CANCER SURVIVAL

By Tara Parker-Pope | DEC 20, 2013

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Debrah Reid, who has breast cancer, was assisted by ushers when she felt sick during a service at her church in Memphis.Credit...Ruth Fremson/The New York Times "The big change in the 1990s was advances in care that were widely available in early detection and treatment," said Steven Whitman, director of the Sinai Urban Health Institute in Chicago. "White women gained access to those advances, and black women didn't."

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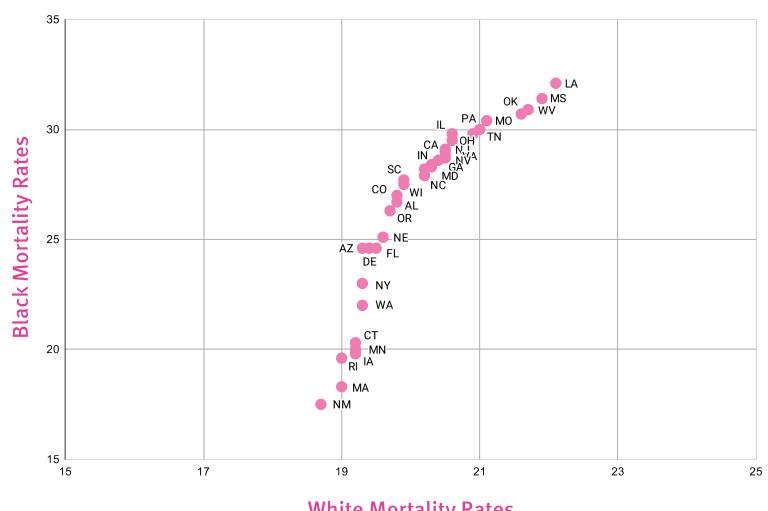
Article:

https://www.nytimes.com/2013/12/20/health/tackling-a-racial-gap-in-breast-cancer-survival.html

Data:

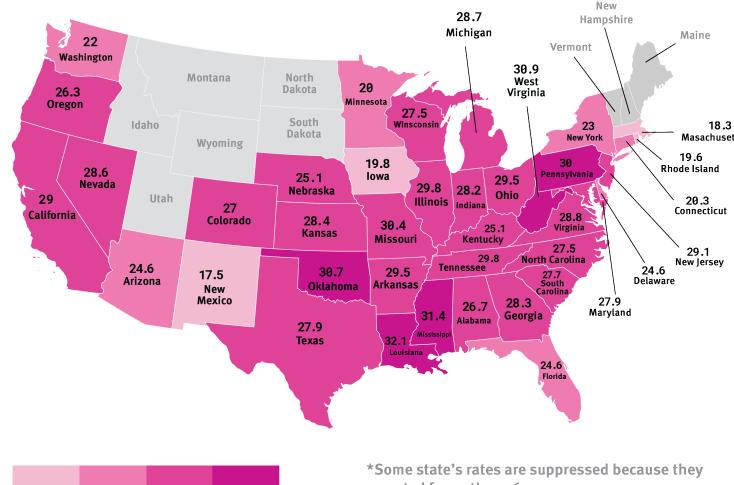
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Black vs White Mortality Rates by State (2013-2017)



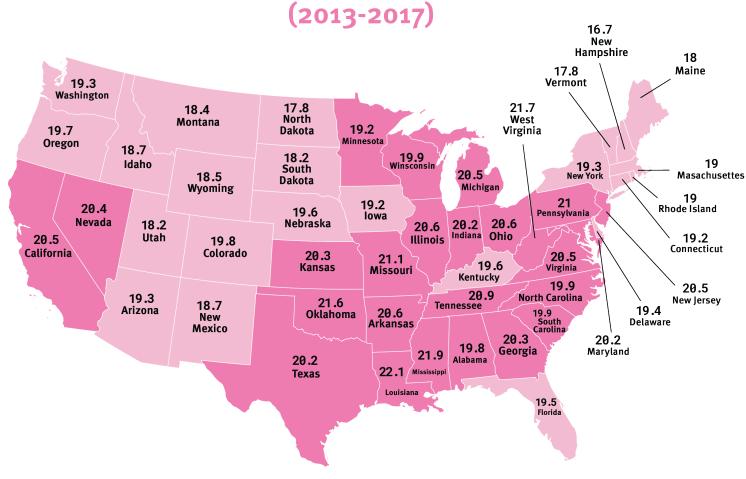
White Mortality Rates

Black Mortality Rates by State per 100,000 (2013-2017)



reported fewer than 16 cases. 20 25 30

White Mortality Rates by State per 100,000



Mortality Rates per 100,000

20.6 34.4

Breast Cancer Mortality

Tackling a Racial Gap in Breast Cancer Survival

Dec. 20, 2013

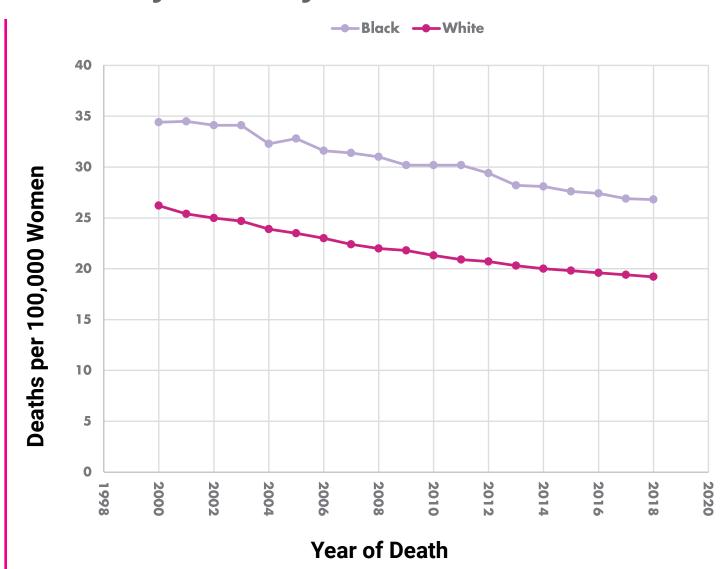
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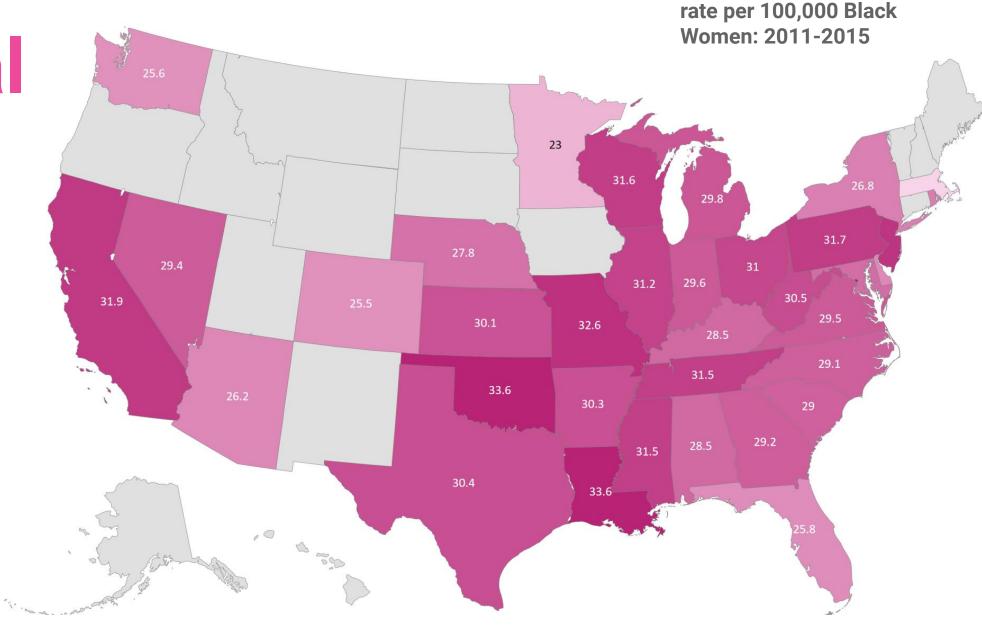
Dr. Whitman flew to Memphis for a strategy session. The study's co-author, Marc Hurlbert of the Avon Breast Cancer Crusade, which funded the research, joined the conference by phone. The solution, everyone agreed, would not be simple. Doctors and health care researchers say the reasons behind the blackwhite cancer divide are complex. Economic disparities that disproportionately affect African-Americans explain some of it. Years of racial discrimination and distrust of the medical establishment dating back to the Tuskegee, Ala., syphilis experiments on black men in the 1930s continue to influence health decisions made by African-American families in the South. Lack of health insurance among low-income and self-employed women was also cited as an obstacle to timely care, a problem that may be eased if some of them gain insurance through the Affordable Care Act. Black women often arrive at the hospital with cancers so advanced, they rival the late-stage disease that doctors see among women in developing nations. A study based on Medicare records published in July in JAMA, the Journal of the American Medical Association, found that 20 percent of African-American women with breast cancer did not learn of their disease until it had advanced to Stage 3 or 4. By comparison, only 11 percent of white women learn at late stages. Doctors in Memphis and in cities around the country tell horrific stories of poor and uneducated patients, black and white, who arrive at the clinics with festering tumors or a breast that has been all but consumed by a growing cancer. With a grant from the Avon Breast Cancer Foundation, researchers at the Methodist system analyzed their records of breast cancer patients and discovered that even in what is widely viewed as the top hospital system in the region, black patients took on average about a month longer to begin treatment after diagnosis compared with white patients.

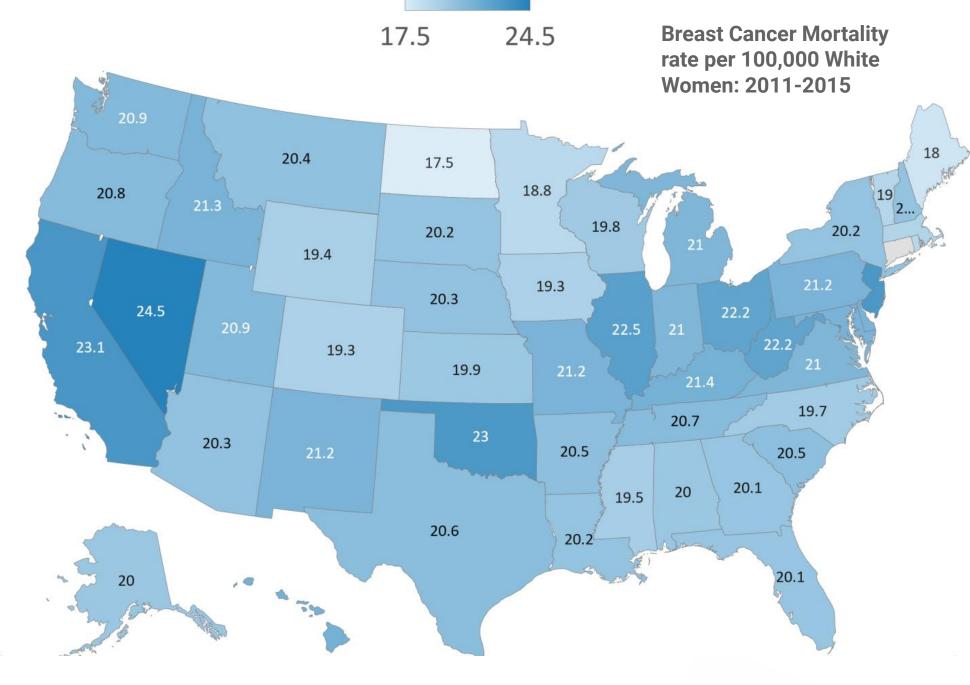
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Breast Cancer

Mortality Rate by Race







The difference in mortality rates between black women and white women with breast cancer has widened since 1975, in part because black women have not benefited as much from improvements in screening and treatment.

Tackling a Racial Gap in Breast Cancer Survival

By Tara Parker-Pope Dec. 20, 2013 05 | Jasmine Wah Hoang | DAI 523.01 | Project # 2.3 | Trogu | SFSU | Fall 2020

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more than a quarter of its residents are poor.

"When you look at any epidemiological study, Memphis is often the epicenter of virtually any disease, be it diabetes, heart failure — there are a lot of health issues here," Dr. Rafalski said. "But for breast cancer to be as bad as it is — that's why everyone came to the table and said, 'We have to do something.'"

Doctors and health care researchers say the reasons behind the black-white cancer divide are complex. Economic disparities that disproportionately affect African-Americans explain some of it. Years of racial discrimination and distrust of the medical establishment dating back to the Tuskegee, Ala., syphilis experiments on black men in the 1930s continue to influence health decisions made by African-American families in the South.

Lack of health insurance among low-income and self-employed women was also cited as an obstacle to timely care, a problem that may be eased if some of them gain insurance through the Affordable Care Act.

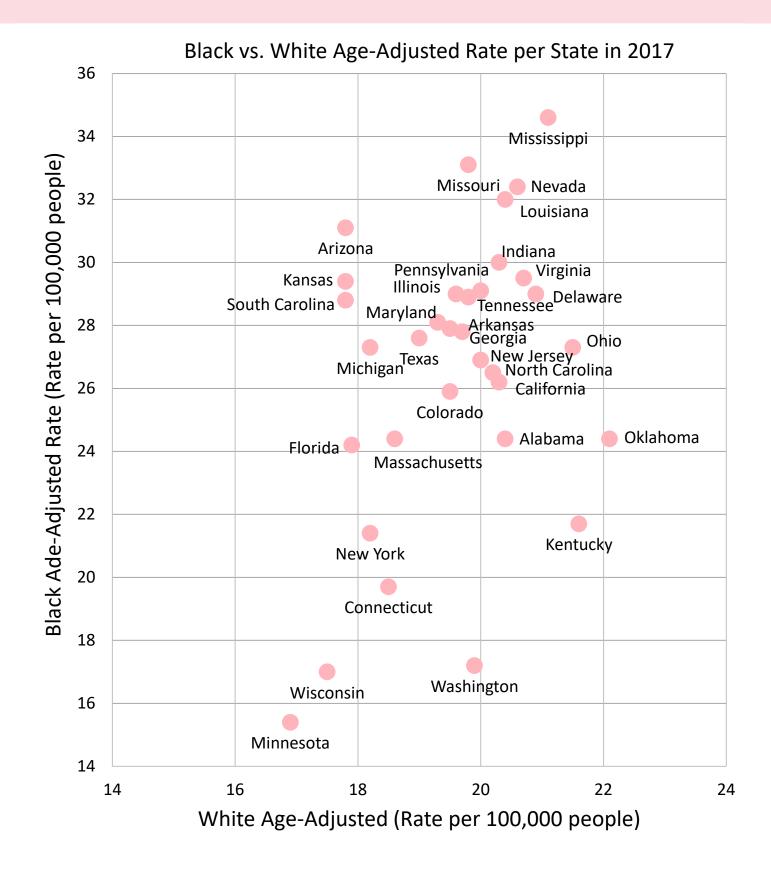
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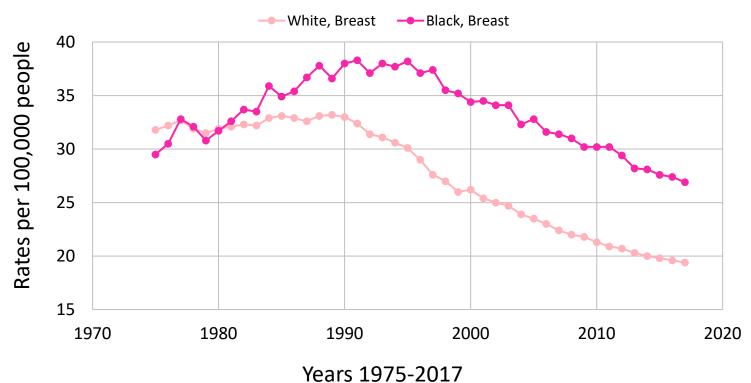
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"I had to get cancer to get health insurance."

-Ms. Singleton

U.S. Mortality Rate: White Females vs Black Females



Tackling a Racial Gap in Breast Cancer Survival

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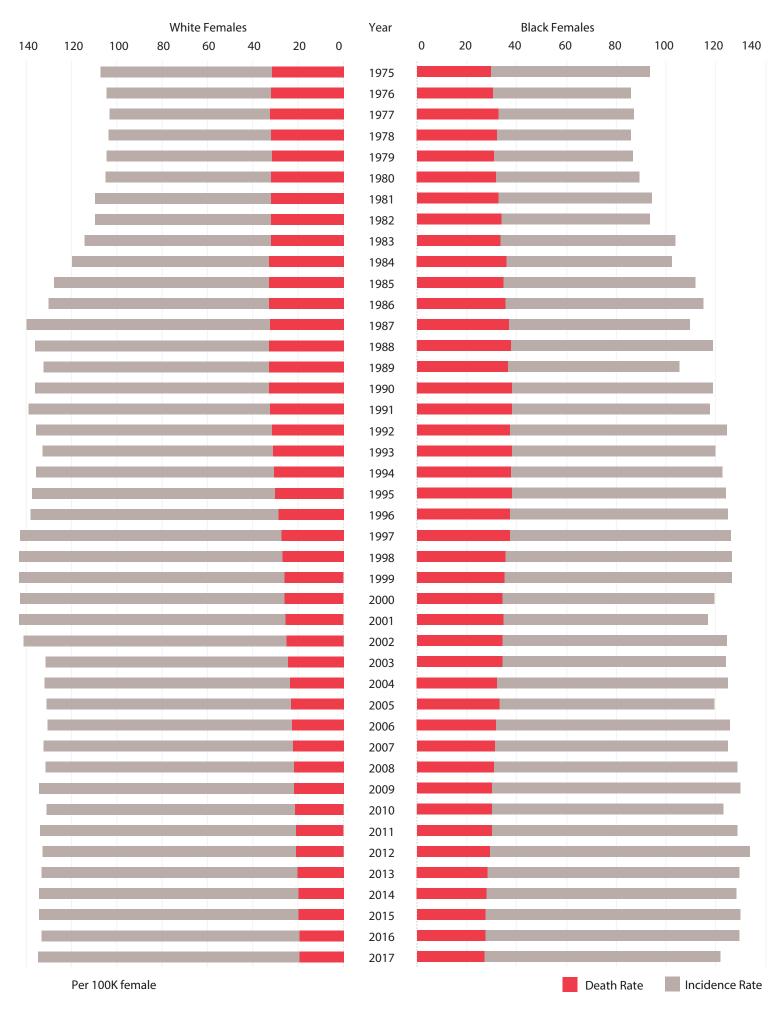
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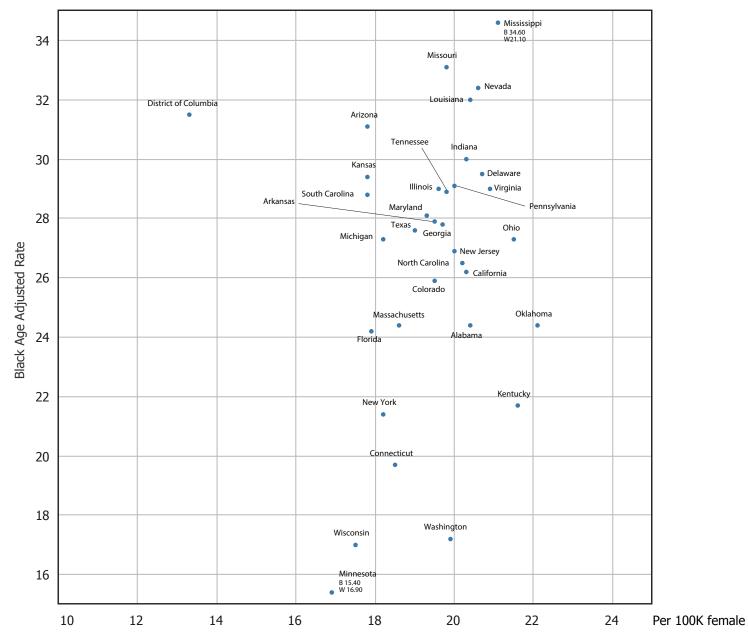
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US Mortality and Incidence Rate from 1975–2017



Black and White Cancer Death in US by State 2017



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White Age Adjusted Rate

* THE CANCER DIVIDE *

Tackling a Racial Gap in Breast Cancer Survival

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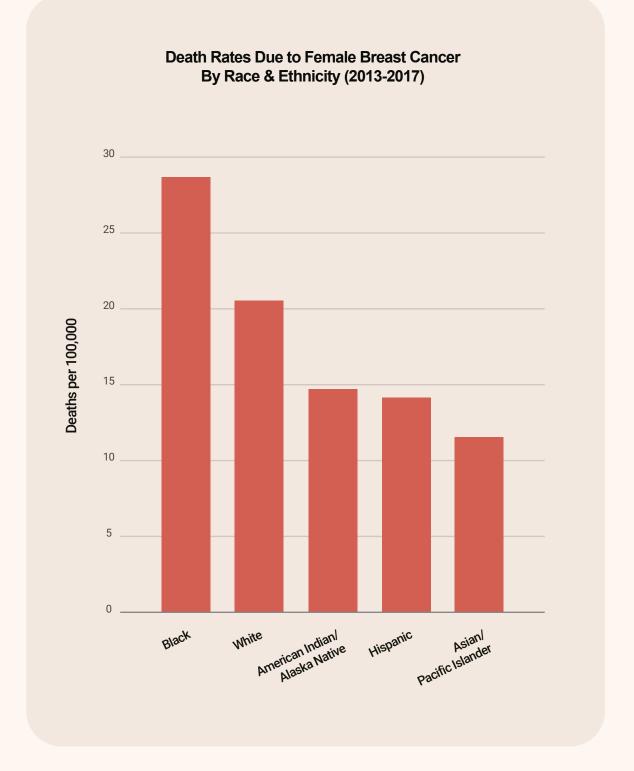
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(2012-2016)





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THE CANCER DIVIDE

TACKLING THE GAP IN BREAST CANCER SURVIVAL

Article by Tara Parker-Pope, The New York Times

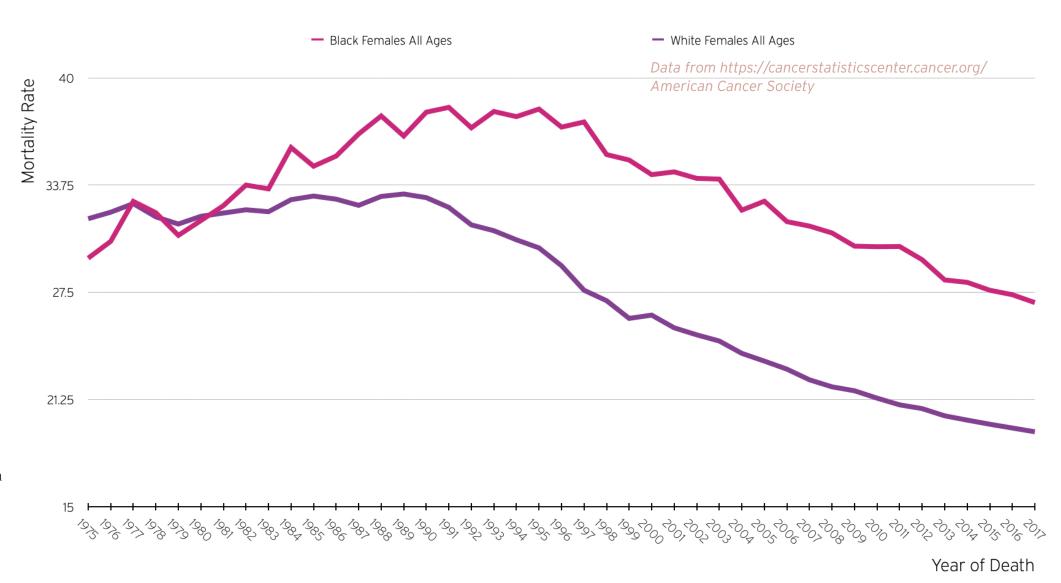
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BLACK AND WHITE BREAST CANCER MORTALITY RATE 1975-2017



BLACK AND WHITE BREAST CANCER MORTALITY RATE BY STATE



Disparity between black and white breast cancer mortality rate are especially strong when looking state by state. Economic disparities that disproportionately affect African-Americans explain some of it.

Data from cdc.gov

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56%

Tackling a Racial Gap in Breast Cancer Survival

By Tara Parker-Pope

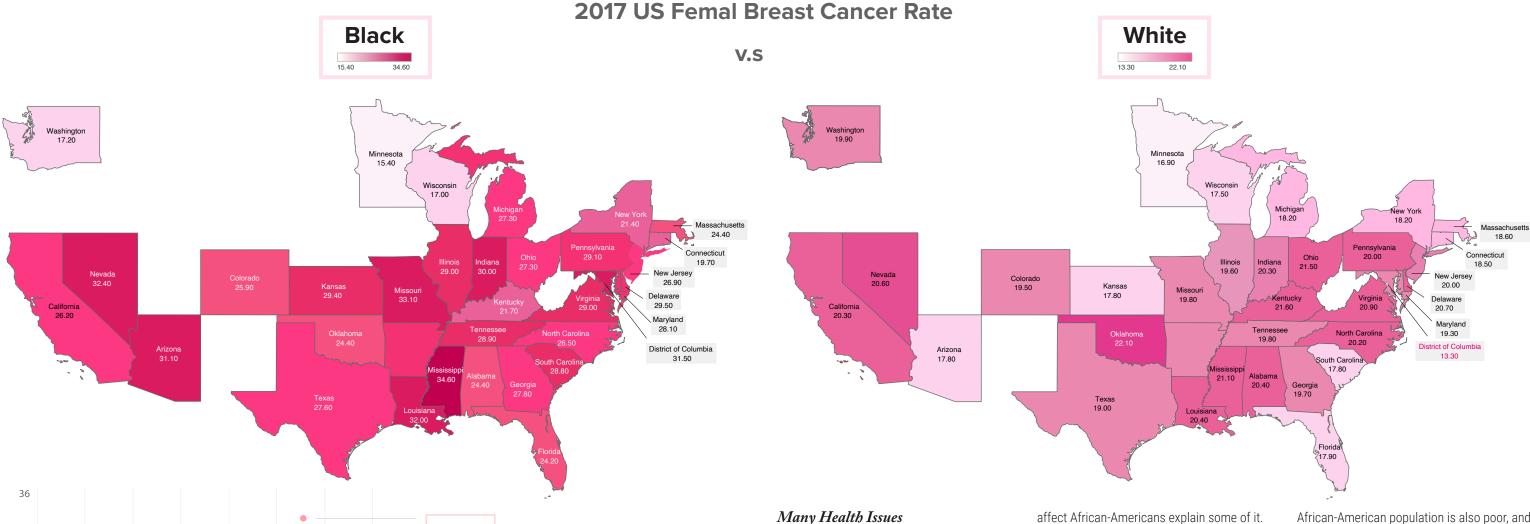
Dec. 20, 2013

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disease. And Memphis is the deadliest major American city for African-American women with breast cancer. Black women with the disease here are more than twice as likely to die of it than white women. "The big change in the 1990s was advances in care that were widely available in early detection and treatment," said Steven Whitman, director of the Sinai Urban Health Institute in Chicago. "White women gained access to those advances, and black women didn't." Over all, black women with a breast cancer diagnosis will die three years sooner than their white counterparts. While nearly 70 percent of white women live at least five years after diagnosis, only 56 percent of black women do. And some research suggests that institutions providing mammograms mainly to black patients miss as many as half of breast cancers compared with the expected detection rates at academic hospitals. The gap in cancer survival cannot be explained away by biological differences in cancer between blacks and whites, researchers say. While African-American women are at greater risk of a more aggressive form of cancer known as triple negative, those cancers account for only about 10 percent of diagnoses. Researchers from the Sinai Institute last year analyzed breast cancer cases in the country's 25 largest cities and found that African-American women with breast cancer were, on average, 40 percent more likely to die of their disease than white women. In the United States, the disparity in breast cancer survival translates to about 1,700 additional deaths each year – or about five more black women dying every day.

Anuual Female Death Rates Females All Ages Measure Names Black Females All Ages White Females All Ages 15

Year of Death



Black 34.60 Mississippi White 21.10 Missouri Nevada Louisiana District of Columbia Black 31.50 Arizona White 13.30 30 Delaware Kansas Virginia Maryland Georgia Michigan California Colorado Alabama Florida Kentucky New York 20 Connecticut Wisconsin Black 15.40 Minnesota White 16.90 • Black and White Breast Cancer Death in the U.S. by States 2017 18 22 24 White Age Adjusted Rate

Many Health Issues

News that Memphis has the widest survival gap between black and white hit the medical community here hard. When the breast cancer disparity study was published in the journal Cancer Epidemiology last year, Edward Rafalski was one of the first here to read it. He is senior vice president for strategic planning at Methodist Le Bonheur Healthcare, which operates eight hospitals in the Memphis area. As it happened, Dr. Rafalski had previously worked at Mount Sinai Hospital in Chicago and knew the study's lead author, Dr. Whitman of the Sinai Institute. As local headlines declared the city's troubling record, Dr. Rafalski invited Dr. Whitman to the city. Memphis, population 655,000, is more than two-thirds black, and more than a quarter of its residents are poor."When you look at any epidemiological study, Memphis is often the epicenter of virtually any disease, be it diabetes, heart failure — there are a lot of health issues here," Dr. Rafalski said. "But for breast cancer to be as bad as it is — that's why everyone came to the table and said, 'We have to do something."

Dr. Whitman flew to Memphis for a strategy session. The study's co-author, Marc Hurlbert of the Avon Breast Cancer Crusade, which funded the research, joined the conference by phone. The solution, everyone agreed, would not be simple. Doctors and health care researchers say the reasons behind the black-white cancer divide are complex. Economic disparities that disproportionately

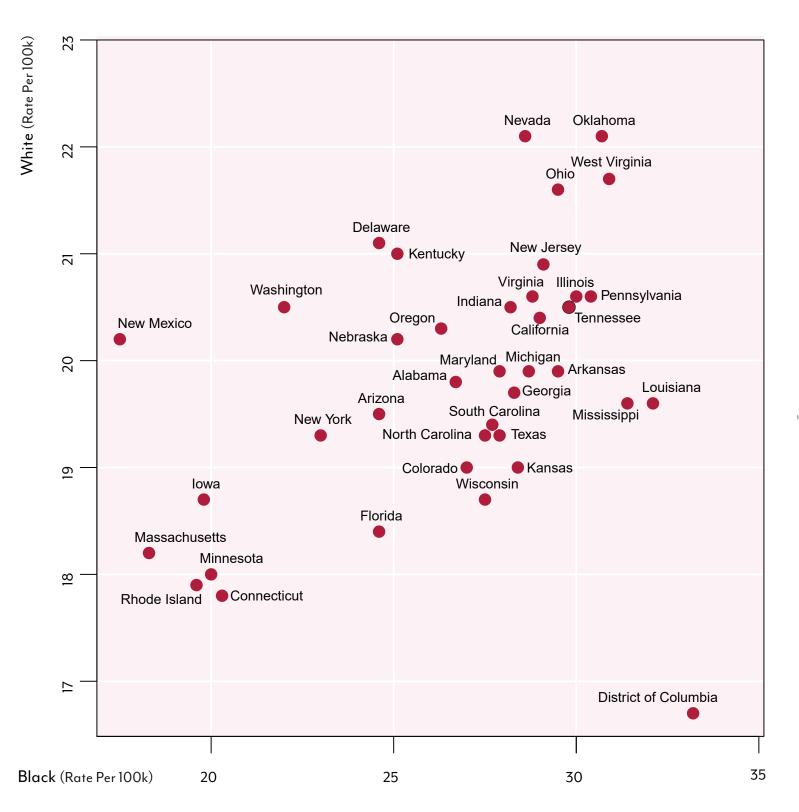
Years of racial discrimination and distrust of the medical establishment dating back to the Tuskegee, Ala., syphilis experiments on black men in the 1930s continue to influence health decisions made by African-American families in the South.Lack of health insurance among low-income and self-employed women was also cited as an obstacle to timely care, a problem that may be eased if some of them gain insurance through the Affordable Care Act.Black women often arrive at the hospital with cancers so advanced, they rival the late-stage disease that doctors see among women in developing nations. A study based on Medicare records published in July in JAMA, the Journal of the American Medical Association, found that 20 percent of African-American women with breast cancer did not learn of their disease until it had advanced to Stage 3 or 4. By comparison, only 11 percent of white women learn at late stages. Doctors in Memphis and in cities around the country tell horrific stories of poor and uneducated patients, black and white, who arrive at the clinics with festering tumors or a breast that has been all but consumed by a growing cancer. With a grant from the Avon Breast Cancer Foundation, researchers at the Methodist system analyzed their records of breast cancer patients and discovered that even in what is widely viewed as the top hospital system in the region, black patients took on average about a month longer to begin treatment after diagnosis compared with white patients."A large percentage of our

African-American population is also poor, and poor people don't have the luxury of being sick," said Dr. Kurt Tauer, an oncologist with the West Cancer Clinic, which is affiliated with the Methodist system. "They have to take off work, find someone to give them a ride." But the larger issue, hospital officials say, is that many black women in Memphis do not seek health care at all. They do not undergo mammograms for screening or see a doctor when the earliest signs of breast cancer develop. Even among women with Medicare coverage, black women were significantly less likely than white women to have seen a primary care doctor in the six to 18 months before diagnosis, and also had far lower rates of breast cancer screening – 23.5 percent in that period, compared with 35.7 percent of white women, the JAMA study found. The challenge is to get women screened and treated in good time. But how, the Methodist officials asked, do you reach African-American women who have felt excluded from the health care system for most of their lives?

Doctors say it will be months or even years before they know if their efforts to reach out to African-American women will lead to more early diagnoses and begin to narrow the black-and-white divide for breast cancer."It's such a daunting task," said Dr. Rafalski of Methodist. "It's almost easier to throw up your hands, but we can't. We have to fix it, one little step at a time."

Tackling a Racial Gap in Breast Cancer Survival

The Rate of **Black mortality** VS. **White mortality** in Forty States in The United States from 2013 to 2017.



By Tara Parker-Pope

The New York Times

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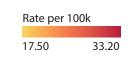
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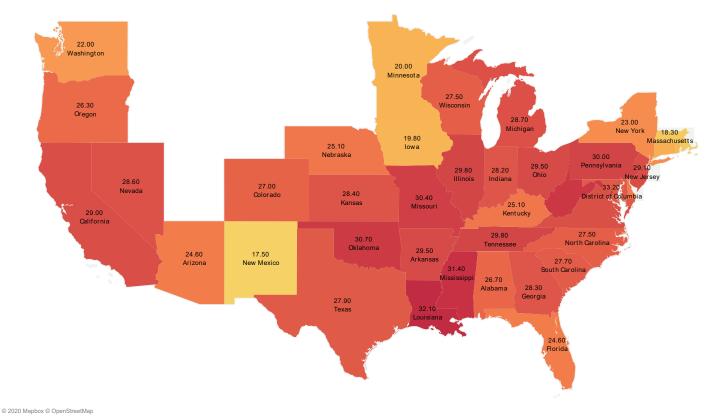
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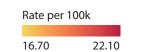
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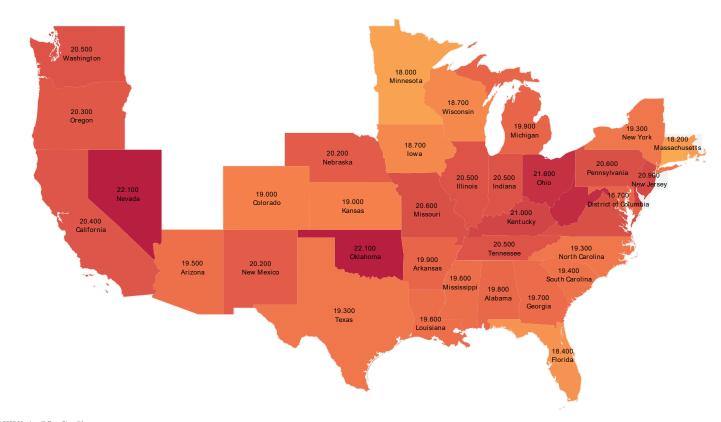
Black Death Rate by State from 2013 to 2017



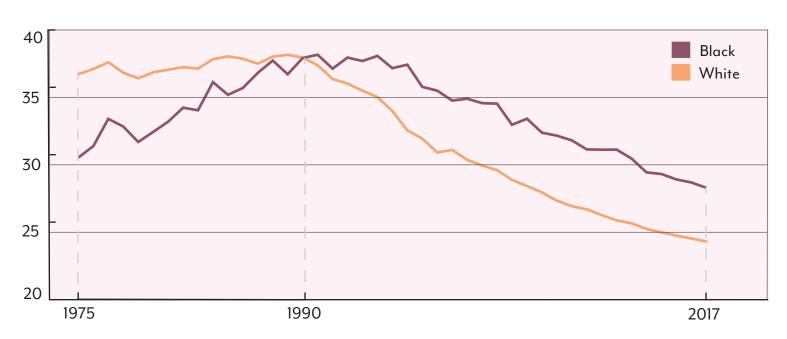


White Death Rate by State from 2013 to 2017





Female Mortality Rate comparison from 1975 to 2017



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THE BREAST CANCER

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By Tara Park-Dec. 20, 2013

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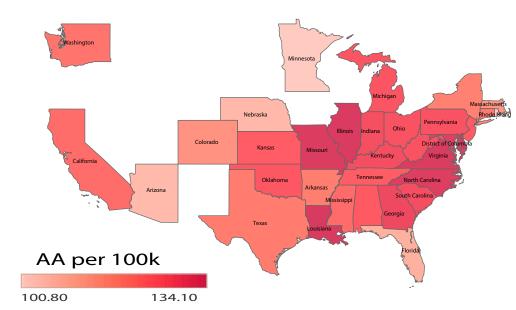
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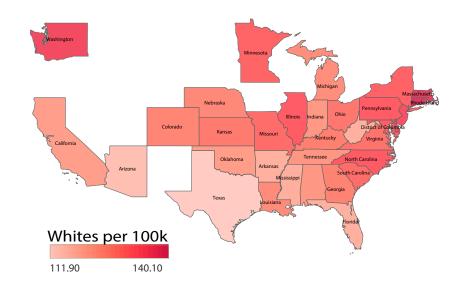
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ImageDebrah Reid, who has breast cancer, was assisted by ushers when she felt sick during a service at her church in Memphis. Debrah Reid, who has breast cancer, was assisted by ushers when she felt sick during a service at her church in Memphis. Credit...Ruth Fremson/The New York Times "The big change in the 1990s was advances in care that were widel y available in early detection and treatment," said Steven Whitman, director of the Sinai Urban Health Institute in Chicago. "White women gained access to those advances, and black women didn't."

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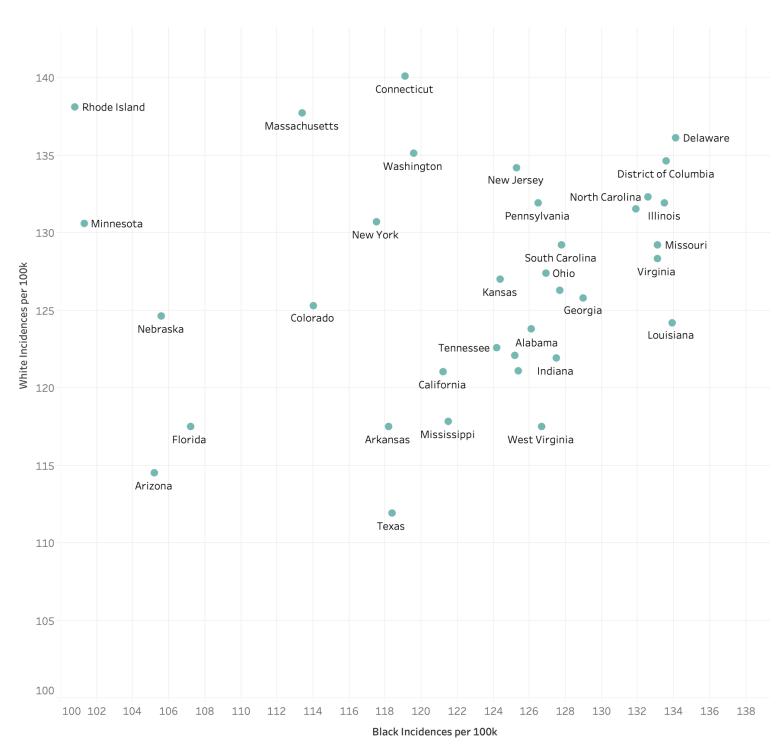
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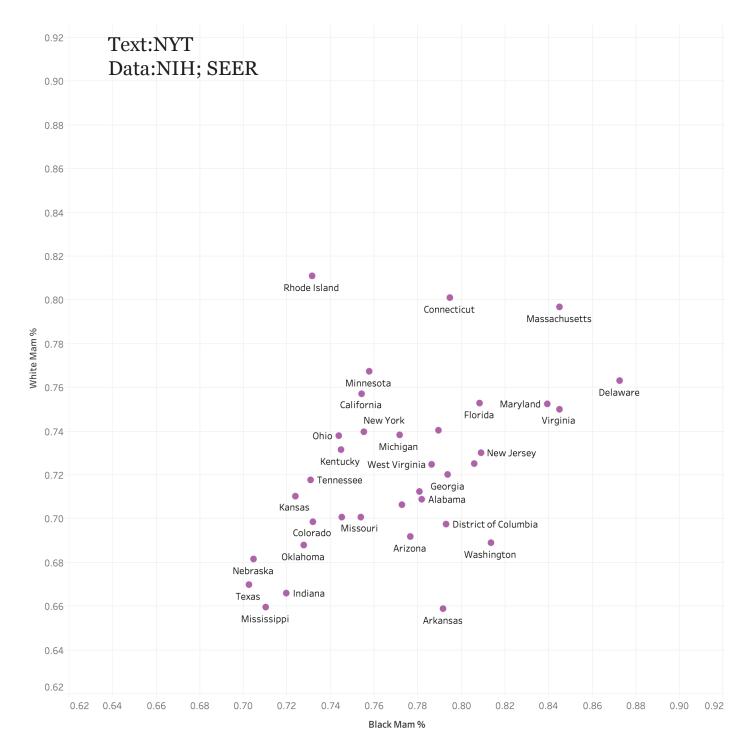


CASES PER 100K

African Americans have higher rates of breast cancer overall than do whites which is denoted in this heat map showing high prevalence in the eastern and western US.



Compared to whites African American incidence rates are highest in the south compared to whites who tended to often get breast cancer in states like Rhode Island, Minnesota and Nebraska.



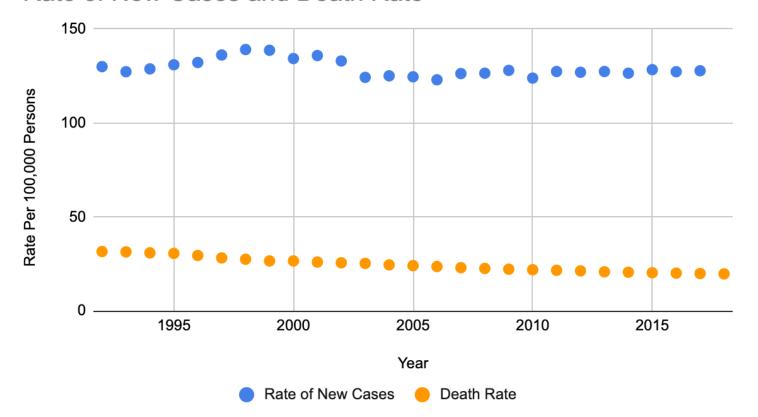
Mamograms rates for African Americans are lowest in Nebraska, Texas and Indiana.

Advances in treatment have improved survival rates for women with breast cancer in the United States, but the majority of those gains have bypassed black women.

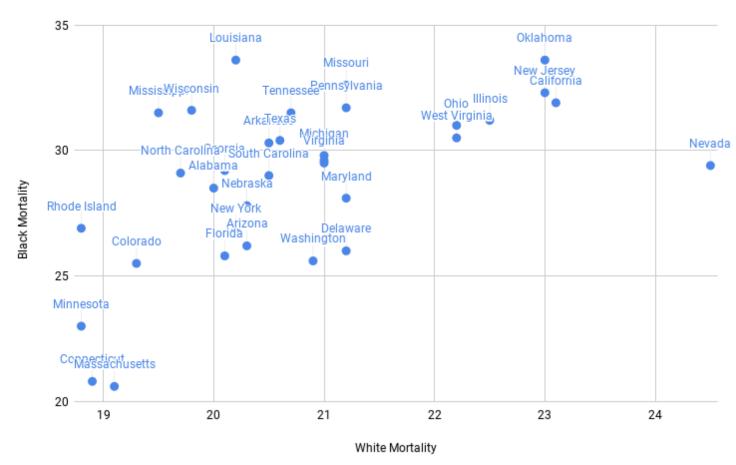
Tackling a Racial Gap in Breast Cancer Survival

By Tara Parker-Pope Dec. 20, 2013

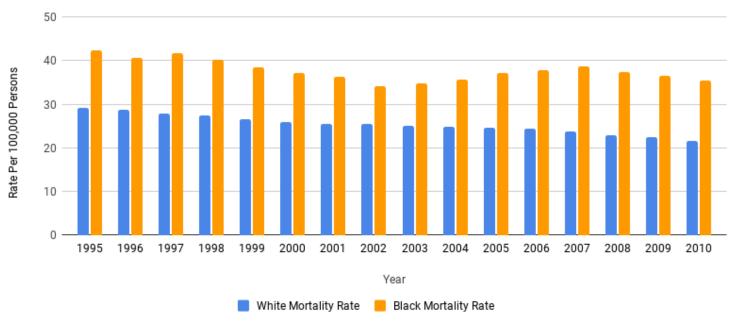
Rate of New Cases and Death Rate



Breast Cancer Mortality for Black Women vs White Women By State (2015)



Breast Cancer Mortality for Black Women vs White Women in Tennessee (1995-2010)



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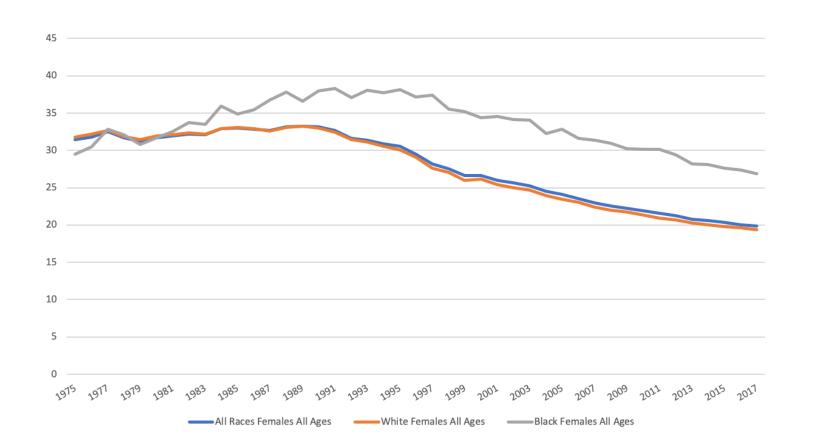
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Rate of Breast Cancer Deaths 1975-2017

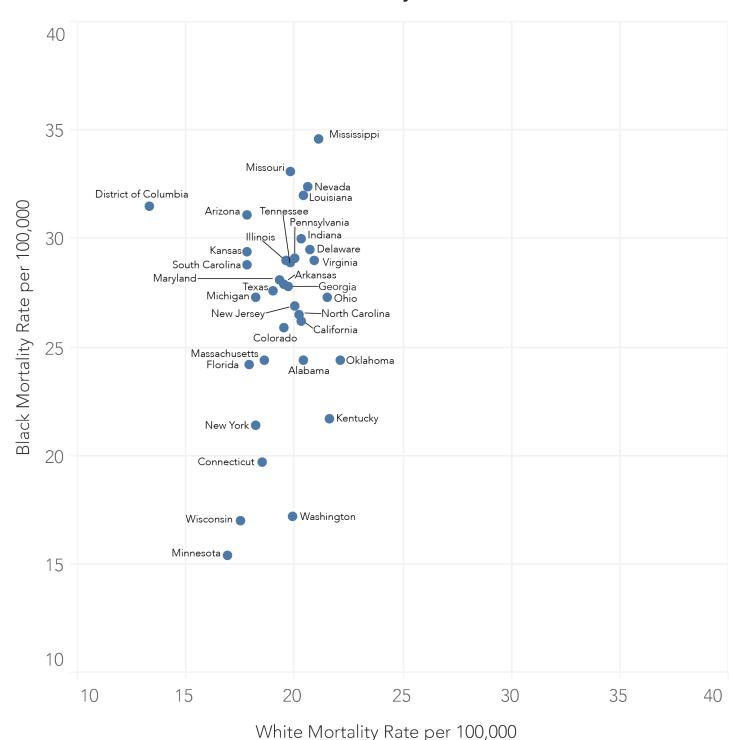


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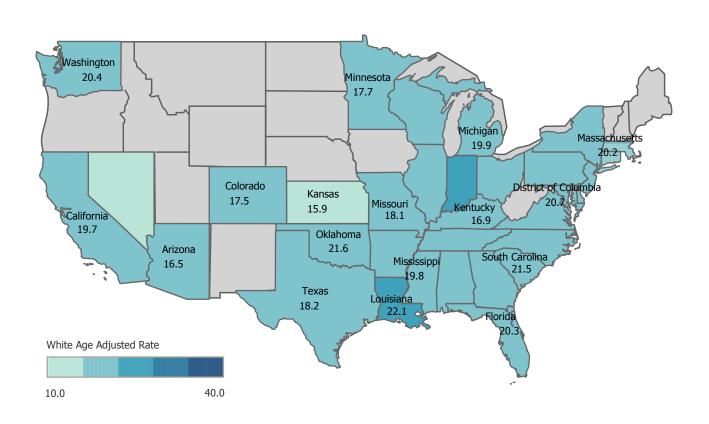
Parker-Pope, Tara. "Tackling a Racial Gap in Beast Cancer Surviva." The New York Times, The New York Times. 20 Dec. 2013, https://www.nytimes.com/2013/12/20/health/tackling-a-racial-gap-in-breast-cancer-survival.html?searchResultPosition=1

"U.S. Cancer Statistics Tools and Data." Center for Disease Control and Preventer, Centers for Disease Control and Prevention, 30 Sep. 2020, https://www.cdc.gov/cancer/uscs/tools.htm

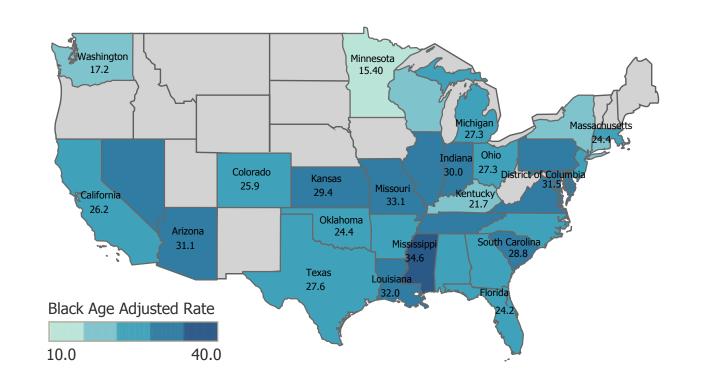
Black and White Mortality Rates 2017



White Mortality Rates in the U.S. Per 100,000 in 2017



Black Mortality Rates in the U.S. Per 100,000 in 2017



THE CANCER DIVIDE

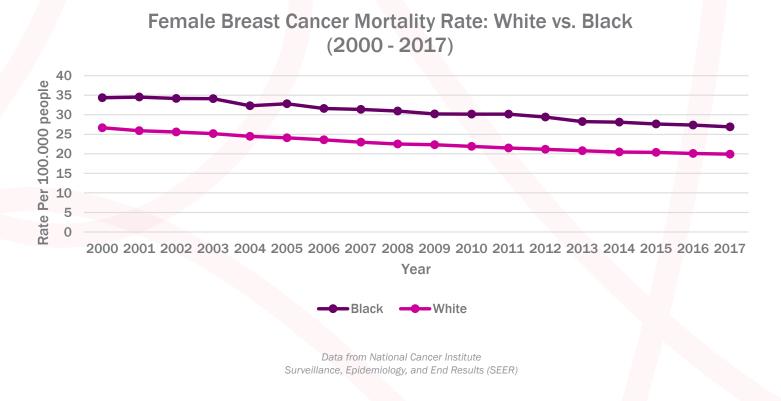
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Article by Tara Parker-Pope

Female Breast Cancer: Incidence and Mortality Rate (2000 - 2017)180.0 9 160.0 140.0 120.0 100.0 100.0 80.0 60.0 40.0 20.0 ■ Deaths ■ Incidence Rate Data from National Cancer Institute Cancer Stat Facts: Female Breast Cancel

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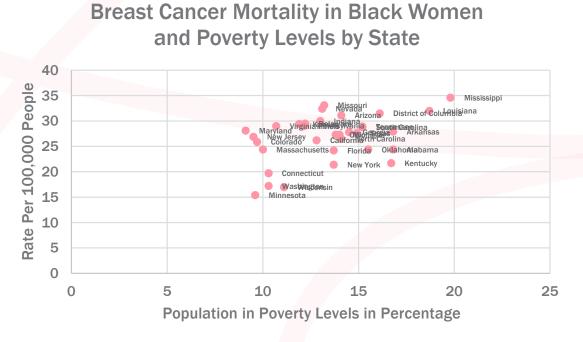


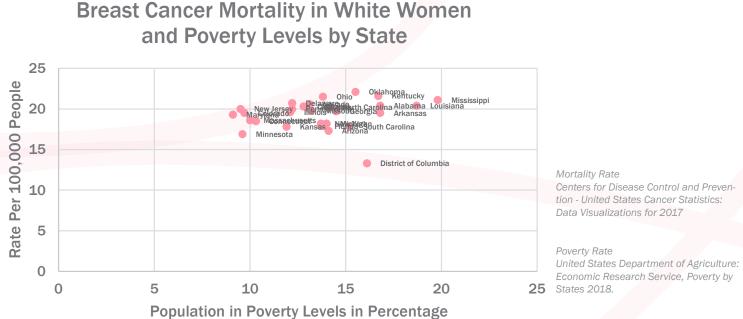
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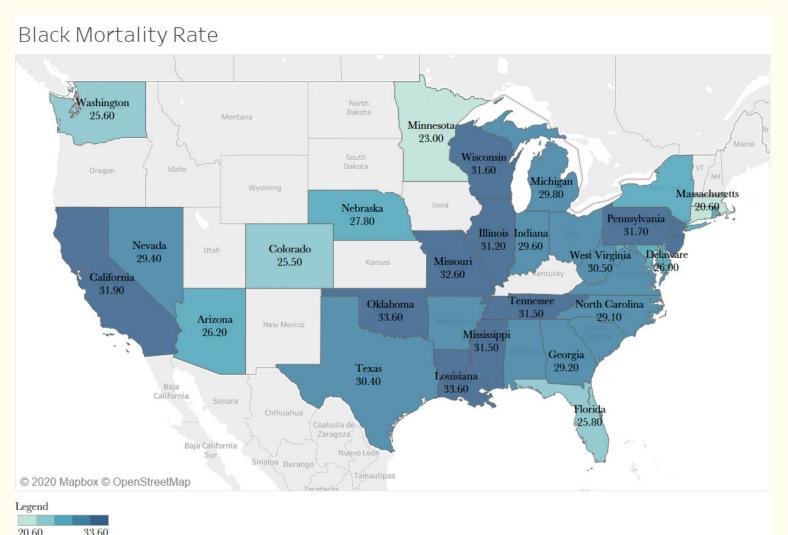
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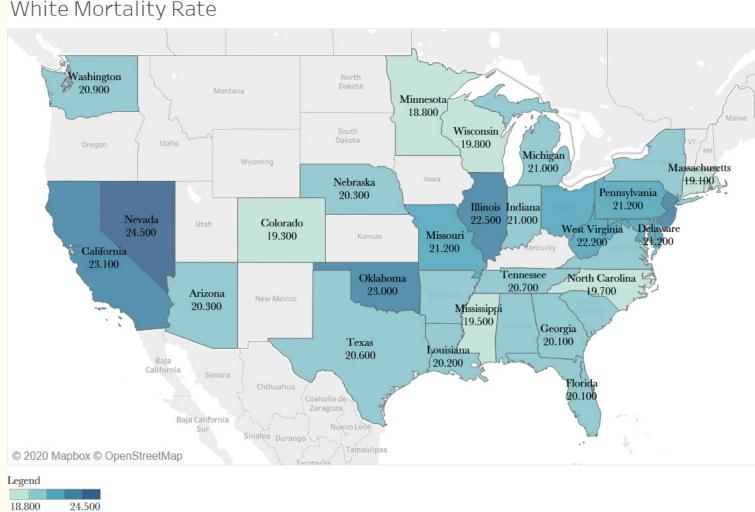




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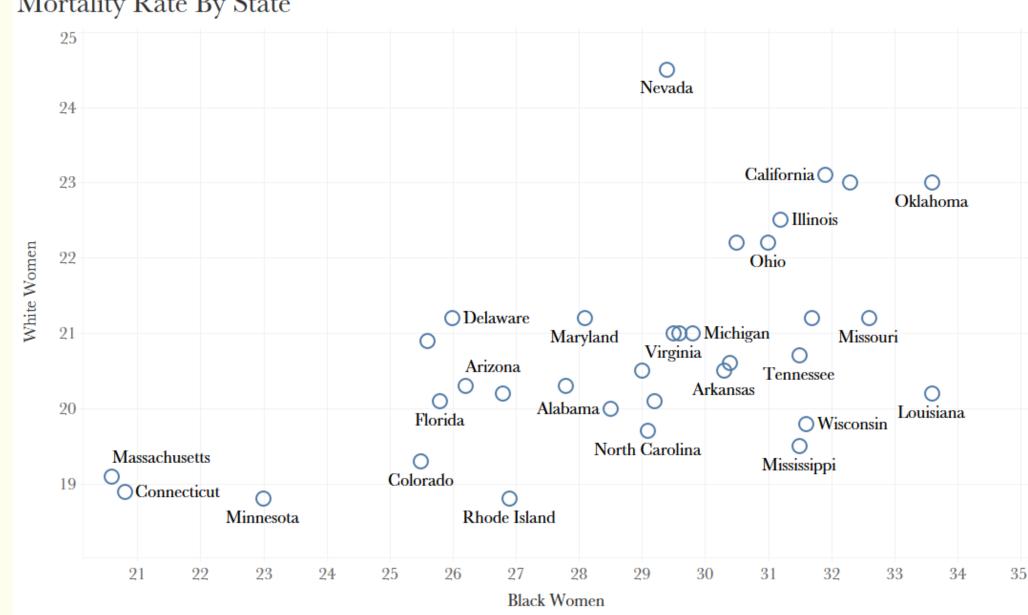
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"I'm not a weak person," she said. "I decided to be a messenger."

Mortality Rate By State



Many Health Issues

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The solution, everyone agreed, would not be simple. Doctors and health care researchers say the reasons behind the black-white cancer divide are complex. Economic disparities that disproportionately affect African-Americans explain some of it. Years of racial discrimination and distrust of the medical establishment dating back to the Tuskegee, Ala., syphilis experiments on black men in the 1930s continue to influence health decisions made by African-American families in the South.

Lack of health insurance among low-income and self-employed women was also cited as an obstacle

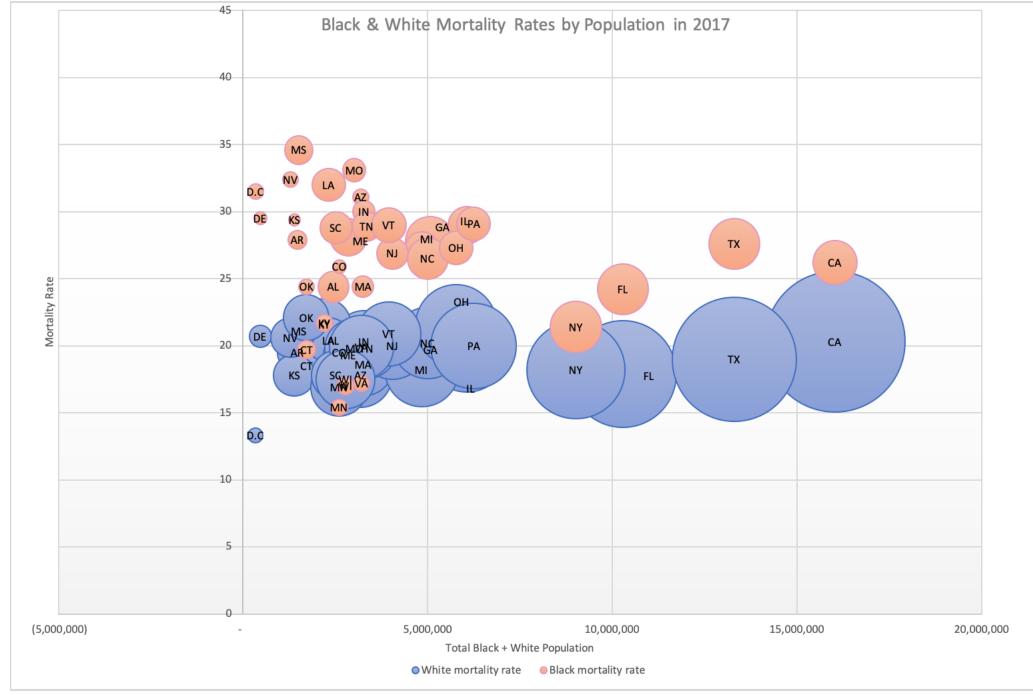
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New York Times Dec. 20, 2013



Black and White People Breast Cancer Mortality Rates by States (2017)

*Each individual cirle size represents its state's percentage of race according to total numbers of black and white population.

MEMPHIS — After her doctor told her two months ago that she had breast cancer, Debrah Reid, a 58-year-old dance teacher, drove straight to a funeral home. She began planning a burial with the funeral director and his wife, even requesting a pink coffin. Sensing something was amiss, the funeral director, Edmund Ford, paused. "Who is this for?" he asked. Ms. Reid replied quietly, "It's for me." Aghast, Mr. Ford's wife, Myrna, quickly put a stop to the purchase. "Get on out of here," she said, urging Ms. Reid to return to her doctor and seek treatment. Despondent, Ms. Reid instead headed to her church to talk to her pastor. "I was just going to sit down and die," she says.

Like many other African-American women in Memphis and around the country, Ms. Reid learned about her breast cancer after it had already reached an advanced stage, making it difficult to treat and reducing her odds of survival. Her story reflects one of the most troubling disparities in American health care. Despite 20 years of pink ribbon awareness campaigns and numerous advances in medical treatment that have sharply improved survival rates for women with breast cancer in the United States, the vast majority of those gains have largely bypassed black women. The cancer divide between black women and white women in the United States is as entrenched as it is startling. In the 1980s, breast cancer survival rates for the two were nearly identical. But since 1991, as improvements in screening and treatment came into use, the gap has widened, with no signs of abating. Although breast cancer is diagnosed in far more white women, black women are far more likely to die of the disease.

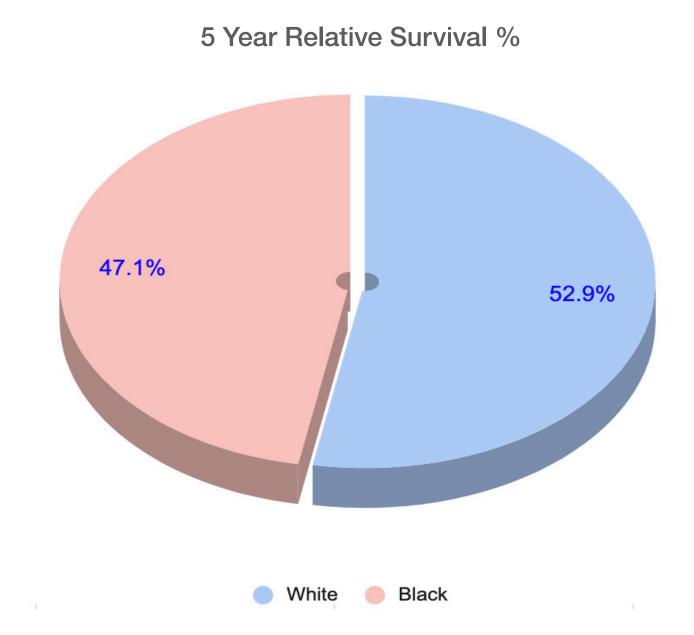
And Memphis is the deadliest major American city for African-American women with breast cancer. Black women with the disease here are more than twice as likely to die of it than white women. "The big change in the 1990s was advances in care that were widely available in early detection and treatment," said Steven Whitman, director of the Sinai Health Institute in Chicago. "White women gained access to those advances, and black women didn't."

Over all, black women with a breast cancer diagnosis will die three years sooner than their white counterparts. While nearly 70 percent of white women live at least five years after diagnosis, only 56 percent of black women do. And some research suggests that institutions providing mammograms mainly to black patients miss as many as half of breast cancers compared with the expected detection rates at academic hospitals. The gap in cancer survival cannot be explained away by biological differences in cancer between blacks and whites, researchers say. While African-American women are at greater risk of a more agagressive form of cancer known as triple negative, those cancers account for only about 10 percent of diagnoses. Researchers from the Sinai Institute last year analyzed breast cancer cases in the country's 25 largest cities and found that African-American women with breast cancer were, on average, 40 percent more likely to die of their disease than white women. In the United States, the disparity in breast cancer survival translates to about 1,700 additional deaths each year — or about five more black women dying every day.

News that Memphis has the widest survival gap between black and white hit the medical community here hard. When the breast cancer disparity study was published in the journal Cancer Epidemiology last year, Edward Rafalski was one of the first here to read it. He is senior vice president for strategic planning at Methodist Le Bonheur Healthcare, which operates eight hospitals in the Memphis area. As it happened, Dr. Rafalski had previously worked at Mount Sinai Hospital in Chicago and knew the study's lead author, Dr. Whitman of the Sinai Institute. As local headlines declared the city's troubling record, Dr. Rafalski invited Dr. Whitman to the city. Memphis, population 655,000, is more than two-thirds black, and more than a quarter of its residents are poor.

"When you look at any epidemiological study, Memphis is often the epicenter of virtually any disease, be it diabetes, heart failure — there are a lot of health issues here," Dr. Rafalski said. "But for breast cancer to be as bad as it is — that's why everyone came to the table and said, 'We have to do something.'" Dr. Whitman flew to Memphis for a strategy session. The study's co-author, Marc Hurlbert of the Avon Breast Cancer Crusade, which funded the research, joined the conference by phone.

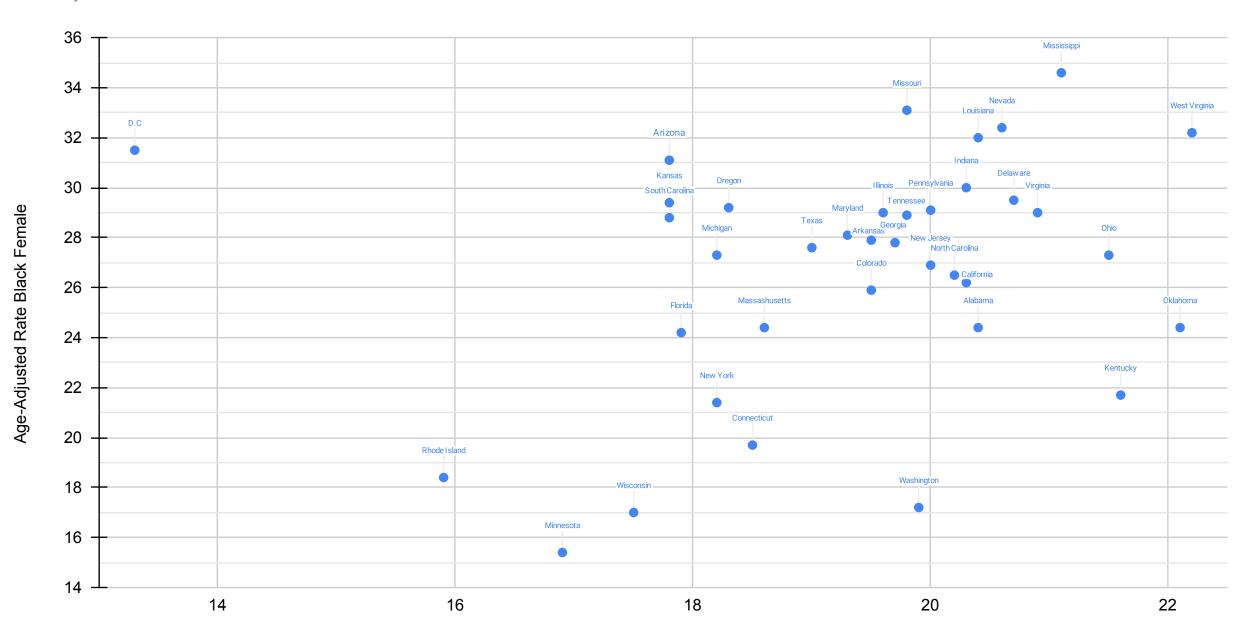
The solution, everyone agreed, would not be simple. Doctors and health care researchers say the reasons behind the black-white cancer divide are complex. Economic disparities that disproportionately affect African-Americans explain some of it. Years of racial discrimination and distrust of the medical establishment dating back to the Tuskegee, Ala., syphilis experiments on black men in the 1930s continue to influence health decisions made by African-American families in the South. Lack of health insurance among low-income and self-employed women was also cited as an obstacle to timely care, a problem that may be eased if some of them gain insurance through the Affordable Care Act.



Tackling a Racial Gap in Breast Cancer Survival

Age-Adjusted Rate Black Female vs. Age-Adjusted Rate White Female

Mortality Rate Per 100,000 Women of Breast Cancer



The difference in mortality rates between black women and white women with breast cancer has widened since 1975, in part because black women have not benefited as much from screening and treatment.

All information and statistics in visuals supported by: U.S. Cancer Statistics Working Group. U.S. Cancer Statistics Data Visualizations Tool, based on 2019 submission data (1999-2017): U.S. Department of Health and Human Services, Centers for Disease Control and Prevention and National Cancer Institute; www.cdc.gov/cancer/dataviz, released in June 2020. States with unavailable data are not represented in scatter plot.

Age-Adjusted Rate White Female

By Tara Parker-Pope

December 20, 2013

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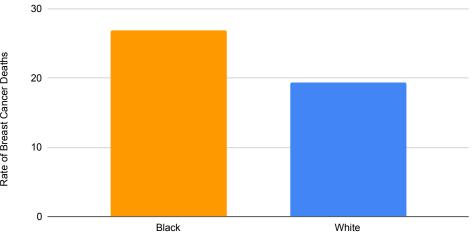
Article Source from New York Times

her church in Memphis. Debrah Reid, who has breast cancer, was assisted by ushers when she felt sick during a service at her church in Memphis.Credit...Ruth Fremson/The New York Times "The big change in the 1990s was advances in care that were widely available in early detection and treatment," said Steven Whitman, director of the Sinai Urban Health Institute in Chicago. "White women gained access to those advances, and black women didn't." Over all, black women with a breast cancer diagnosis will die three years sooner than their white counterparts. While nearly 70 percent of white women live at least five years after diagnosis, only 56 percent of black women do. And some research suggests that institutions providing mammograms mainly to black patients miss as many as half of breast cancers compared with the expected detection rates at academic hospitals. The gap in cancer survival cannot be explained away by biological differences in cancer between blacks and whites, researchers say. While African-American women are at greater risk of a more aggressive form of cancer known as triple negative, those cancers account for only about 10 percent of diagnoses. Researchers from the Sinai Institute last year analyzed breast cancer cases in the country's 25 largest cities and found that African-American women with breast cancer were, on average, 40 percent more likely to die of their disease than white women. In the United States, the disparity in breast cancer survival translates to about 1,700 additional deaths each year — or about five more black women dying every day. Many Health Issues News that Memphis has the widest survival gap between black and white hit the medical community here hard. When the breast cancer disparity study was published in the journal Cancer Epidemiology last year, Edward Rafalski was one

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Overall Mortality Rate Between Black and White Ethnicity

Rate Per 100,000 Women in America



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A Stark Gap in Breast Cancer Mortality Rates

adapted from The New York Times article "Tackling a Racial Gap in Breast Cancer Survival"

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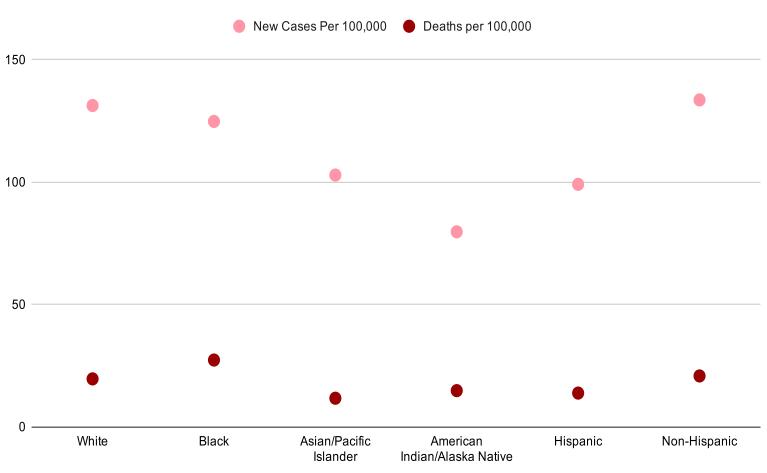
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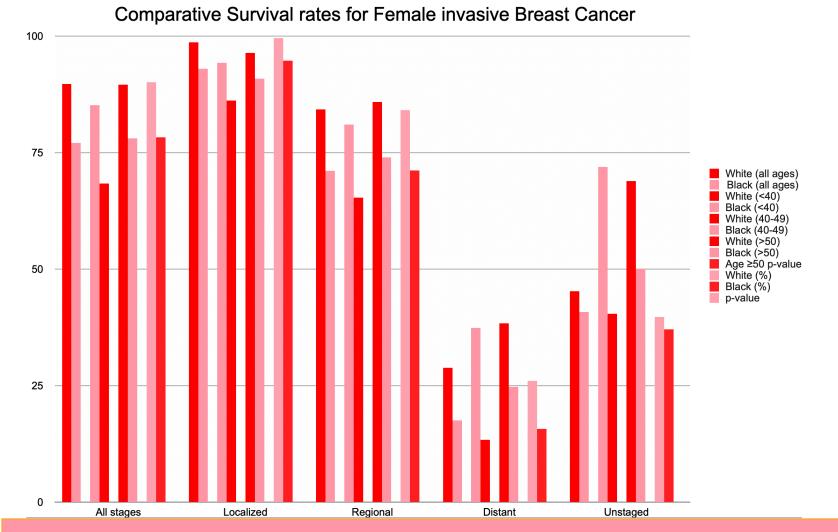
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Breast Cancer Rates by Race



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THE CANCER DIVIDE Tara Parker-Pope

Tackling a Racial Gap in Breast Cancer Survival

Dec. 20, 2013

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The solution would not be simple. Doctors and health care researchers say the reasons behind the black-white cancer divide are complex. Economic disparities that disproportionately affect African-Americans explain some of it. Years of racial discrimination and distrust of the medical establishment dating back to the Tuskegee, Ala., syphilis experiments on black men in the 1930s continue to influence health decisions made by African-American families in the South.

Lack of health insurance among low-income and self-employed women was also cited as an obstacle to timely care, a problem that may be eased if some of them gain insurance through the Affordable Care Act.

Black women often arrive at the hospital with cancers so advanced, they rival the late-stage disease that doctors see among women in developing nations.A study based on Medicare records published in July in JAMA, the Journal of the American Medical Association, found that 20 percent of African-American

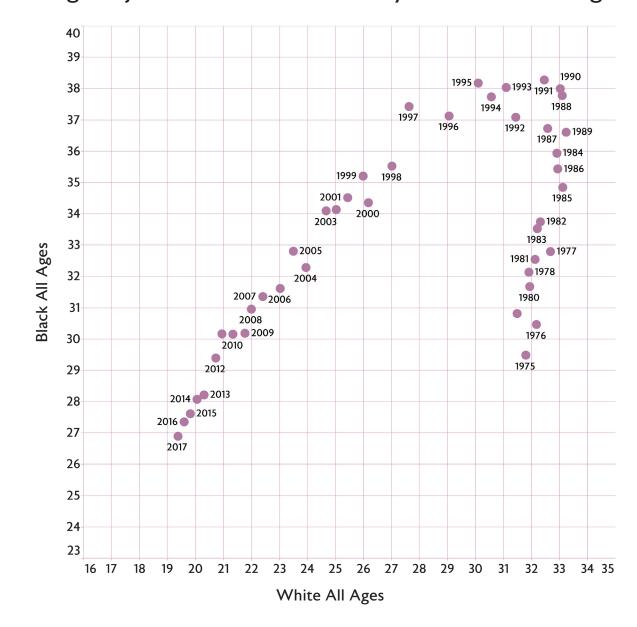
women with breast cancer did not learn of their disease until it had advanced to Stage 3 or 4. By comparison, only 11 percent of white women learn at late stages.

With a grant from the Avon Breast Cancer Foundation, researchers at the Methodist system analyzed their records of breast cancer patients and discovered that even in what is widely viewed as the top hospital system in the region, black patients took on average about a month longer to begin treatment after diagnosis compared with white patients.

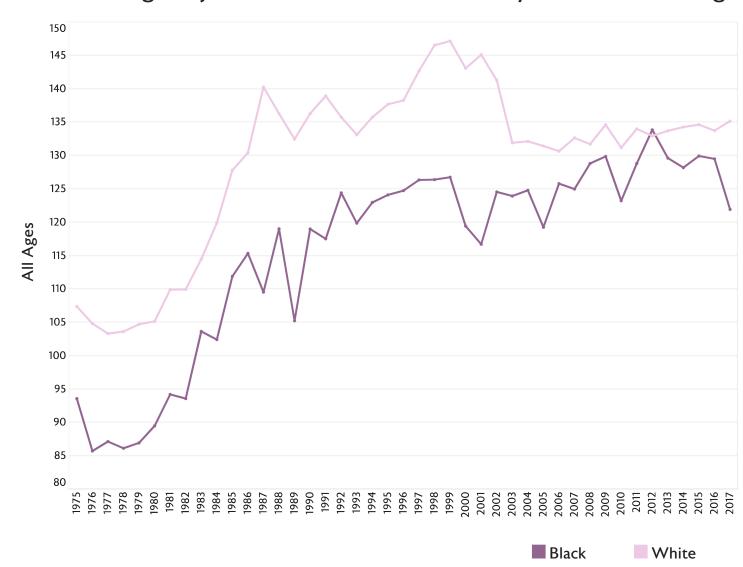
The larger issue, hospital officials say, is that many black women in Memphis do not seek health care at all. They do not undergo mammograms for screening or see a doctor when the earliest signs of breast cancer develop. Even among women with Medicare coverage, black women were significantly less likely than white women to have seen a primary care doctor in the six to 18 months before diagnosis, and also had far lower rates of breast cancer screening — 23.5 percent in that period, compared with 35.7 percent of white women, the JAMA study found.

The challenge is to get women screened and treated in good time. But how, the Methodist officials asked, do you reach African-American women who have felt excluded from the health care system for most of their lives.

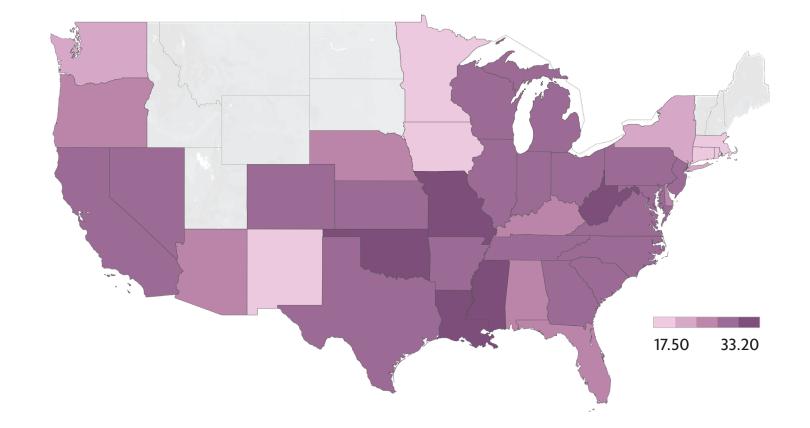
Age-adjusted U.S. Death Rates by Year, Race and Age



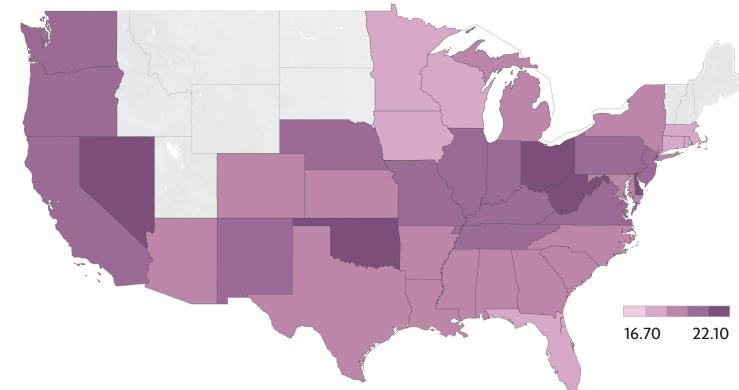
Age-adjusted SEER Incidence Rates by Year, Race and Age



Rate of Breast Cancer Deaths for Blacks by State 2013 - 2017



Rate of Breast Cancer Deaths for Whites by State 2013 - 2017



A Grim Breast Cancer Milestone for Black Women

BY TARA PARKER-POPE

For the first time the incidence of breast cancer among black women is equal to that of white women, the American Cancer Society reports.

African-American women in the United States have reached a dubious milestone. For the first time, the incidence of breast cancer among black women is equal to that of white women, according to a sweeping new report from the American Cancer Society.

The finding is worrisome because breast cancer has historically been more deadly in black women than in white women, but at least it has not been as common. Now, as incidence rates equalize, data suggests that breast cancer will continue to exact a far greater toll on black women, and that the trend shows no sign of abating.

"It is a crisis," said Marc Hurlbert, chief mission officer for the Breast Cancer Research Foundation. "The increasing incidence is unfortunate because the mortality rate for black women is already so much higher, and now if more women are getting breast cancer, then unfortunately, the number of black women dying from the disease will go up."

Over all, the report painted a grim picture of the state of breast cancer in African-American women, showing that advances in diagnosis and treatment that have sharply improved survival rates from breast cancer and saved countless lives have largely bypassed African-American women. By virtually every measure of the disease — age of diagnosis, age of death, stage of diagnosis — black women are at a significant disadvantage compared with white women, the data show.

The reasons for the increase are complex and are thought to be driven largely by rising obesity rates among African-American women. Researchers also believe that changes in reproductive patterns may play a role, as more African-American women delay childbirth and have fewer children. Both are recognized risk factors for breast cancer.

Black women are given breast cancer diagnoses at younger ages and die from the disease at younger ages than white women, suggesting that the disease may exact a greater economic and family toll on blacks by stealing more of a woman's most productive years. The median age at diagnosis is 58 for black women and 62 for white women. The median age for breast cancer death is 62 for black women and 68 for white women.

The data for the report was obtained from the Surveillance, Epidemiology, and End Results (SEER) program of the National Cancer Institute, a program that has been collecting information on cancer patients since 1973.

Among white women, breast cancer incidence rates have been stable since

2004, hovering around 135 per 100,000 women. But among black women, rates have been consistently lower, ranging from 119 to 125 per 100,000. But in 2012, a startling change occurred. The incidence rate moved to 135 cases per 100,000 women for both white and black women. "The lines have crossed for the first time," said Carol E. DeSantis, senior epidemiologist at the American Cancer Society and the lead author of the report. "There is variation in year-to-year rates, especially in smaller populations such as in black women, but I think, over all, the picture we've seen is this slow steady increase in black women and stable rates in white women."

While it is possible that a fraction of the rise could be attributed to earlier detection, that would not fully explain the trend because rates at which women are being screened for breast cancer have remained stable. As a result, the trends suggest that the uptick in incidence is not a result of doctors simply finding more cases of breast cancer, but is probably the result of other factors.

"To me the bottom line of these statistics is the evidence that the health disparity between African-American and white women in the U.S. is still going strong," said Kirsten Moysich, a professor of oncology at the Roswell Park Cancer Institute in Buffalo. "And it's even more pronounced than previously reported."

Obesity is considered a risk factor because it has been linked to an increased risk of estrogen-receptor positive breast cancers, and much of the increase in breast cancers among black women has been due largely to more cases of this type of tumor. The obesity rate in black women was 58 percent during the 2009 to 2012 period, up from 39 percent from 1999 to 2002. Meanwhile, the obesity rate among white women has stabilized at around 33 percent.

Over all, a black woman given a breast cancer diagnosis is 42 percent more likely to die from the disease than a white woman with breast cancer. An analysis of breast cancer mortality trends in 41 of the largest cities in the United States, published last year in Cancer Epidemiology, found that in some cities the risk is even greater. In Los Angeles, a black woman with breast cancer is about 70 percent more likely to die from the disease than a white woman is. In Memphis, black women face more than double the risk. Black women also are less likely than white women are to be given a diagnosis of early stage disease, and more likely to be given a diagnosis with later stage, and less treatable, tumors, according to the report.

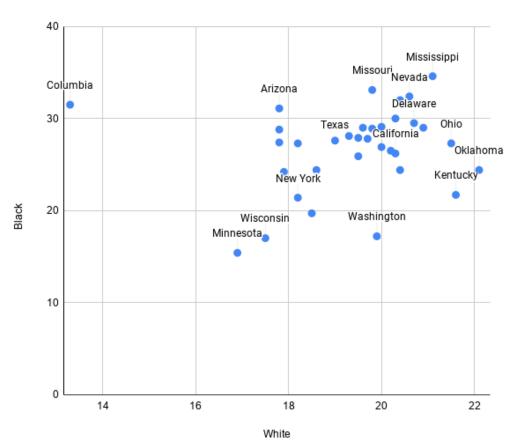
Compared with white women, black women were more likely to be found to have an aggressive form of the disease called triple negative breast cancer, which has a poorer prognosis, in part, because there are not targeted therapies to treat it. Triple negative breast cancers account for 22 percent of the cases among black women, and 11 percent among white women.

Black women also lag white women in diagnosis of estrogen-receptor positive disease, the most treatable form of breast cancer. Among white women, 76 percent of cancers diagnosed are ER positive, compared with 62 percent in black women.

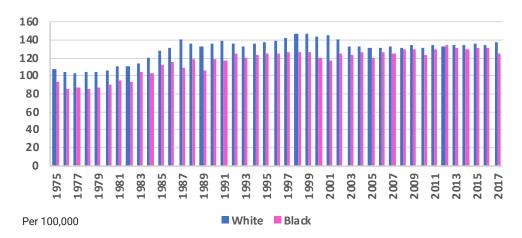
Researchers say the racial divide in breast cancer mortality may be because of a combination of factors, including disparities in the quality of care available to black women, who may have less access to quality screening and treatment, compared with white women. Lower rates of follow-up after a mammogram, cultural distrust of doctors, and lack of insurance coverage among black women may also play a role.

Dr. Hurlbert said the report should prompt not only more research, but more efforts to include black women in clinical trials. "Percentage enrollment in trials has been low for black women," Dr. Hurlbert said. "So do the drugs work as well on them? We don't know."

BREAST CANCER DEATH OF 2017: BLACK vs WHITE



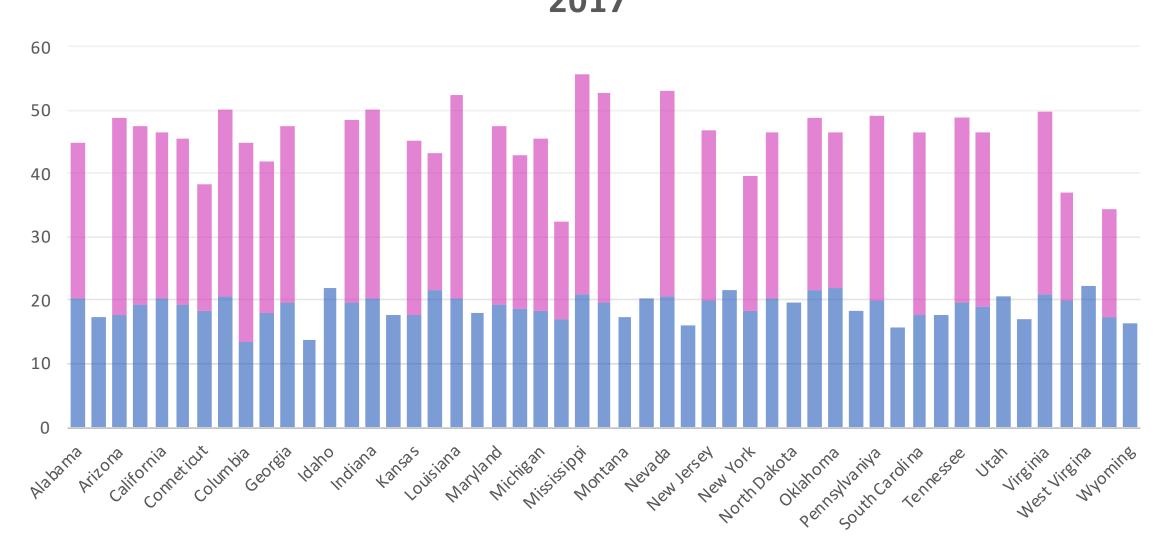
Cancer of the Breast SEER Incidence White vs Black Females



Dr. Hurlbert said there were so many unanswered questions, that it will take some time before the data begin to influence clinical practice, but he hopes doctors will take it to heart and be more vigilant when they are treating black women and offer more follow up and support when needed. He also encouraged women to talk to their doctors about genetic cancer screening and have regular mammograms.

"Because breast cancer has shown up in younger ages for black women, they should be very vigilant," Dr. Hurlbert said. "But the really big issue is that we hope it does raise alarm bells that more needs to be done in these populations."

BREAST CANCER DEATH OF BLACK AND WHITE BY STATE 2017



Per 100,000 ■ White ■ Black