Racial disparities in breast cancer: a review of current literature

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In the United States, the incidence of breast cancer has remained stable and the mortality rate has continued to decline largely due to population-level screening mammography and improved treatment. Despite the higher overall incidence of the disease in Caucasians, breast cancer mortality is paradoxically higher in African American women. Interestingly, younger African American women have a higher incidence of breast cancer at an age less than 45-50, with a reversal or age-related crossover beyond that age resulting in older Caucasian women having a higher incidence.

African Americans more often present at a younger age with ER negative, aggressive, later stage tumors. Hispanics have been hugely under-represented in studies dealing with these issues. The effects of comorbid illness may also play a part in worsened outcomes compared to Caucasians.

Numerous studies have attempted to explain the racial disparities in outcome. The reason for these differences is likely multifactorial and include socioeconomic factors as well as biological differences in the way the disease manifests among the races. Treatment of minorities by physicians in terms of delivery of cancer/reconstructive surgery and adjuvant care has also varied. Disparities in the delivery of screening mammography have also been identified.

We will aim to review the current literature and discuss the means by which these disparities can be eliminated.