Prostate cancer treatment disparities during the COVID-19 pandemic, lessons from a multi-institutional collaborative. Adrien Bernstein, Ruchika Talwar, Elizabeth A. Handorf, Kaynaat Syed, Serge Ginzburg, Laurence H Belkoff, Adam Reese, Edouard John Trabulsi, Bruce Lee Jacobs, Jeffery Tomaszewski, Eric A. Singer, Thomas J. Guzzo, Jay D. Raman, Andres F Correa, Pennsylvania Urologic Regional Collaborative; Fox Chase Cancer Center, Philadelphia, PA; University of Pennsylvania, Philadelphia, PA; The Health Care Improvement Foundation, Philadelphia, PA; Albert Einstein Med Ctr, Rydal, PA; Main Line Health, Wynnewood, PA; Temple Univ School of Medcn, Philadelphia, PA; Department of Urology, Sidney Kimmel Cancer Center, Thomas Jefferson University, Philadelphia, PA; University of Pittsburgh, Pittsburgh, PA; Cooper University Health Care, Camden, NJ; Section of Urologic Oncology, Rutgers Cancer Institute of New Jersey and Rutgers Robert Wood Johnson Medical School, New Brunswick, NJ; Penn State Health Milton S. Hershey Medical Center, Hershey, PA. Poster Session.

FOR IMMEDIATE RELEASE

Media Contact:

Amy Merves
215-280-0810
Amy.Merves@fccc.edu

Fox Chase Researchers Find Racial Disparities in Prostate Cancer Surgery Rates During COVID-19

PHILADELPHIA (June 4, 2021)—The likelihood of prostate cancer surgery for patients presenting for treatment across Pennsylvania declined among Black patients, but not white patients, during the initial wave of the COVID-19 pandemic, according to new research from Fox Chase Cancer Center.

Black men with non-metastatic prostate cancer were 94% less likely to undergo surgery compared to Black men prior to the pandemic and 97% less likely relative to white men during the lockdown.

“This really provided a stark example of how fragile our healthcare system can be and how, when stressed, systemic inequalities can have a dramatic impact on care,” said Adrien Bernstein, MD, a urologic oncology fellow at Fox Chase and lead researcher on the project, which was conducted with several other centers in Pennsylvania and New Jersey.

She presented the findings at a poster session as part of the virtual scientific program at the American Society of Clinical Oncology (ASCO) 2021 Annual Meeting.

Prostate cancer is the most common malignancy after skin cancer and the second leading cause of cancer death in American men. It affects one in eight men, with that number rising to one in six for Black men.
Prior to the COVID-19 pandemic, Black and white men in the study sample, taken from the Pennsylvania Urologic Regional Collaborative (PURC) database, who were diagnosed with prostate cancer were equally likely to go on to surgery (17% and 19%, respectively). During the first wave of the pandemic, these rates dramatically diverged, with the rate for Black men decreasing to 1.3% while the rate for white men increased to 26%.

The researchers examined several possible reasons for this disparity. One possibility, they said, was that Black men may have been diagnosed with less severe cancer during this time. Another was that they may have been older or had more comorbidities like obesity, diabetes, or lung disease that would put them at higher risk of severe COVID-19—thus justifying delaying surgery until conditions were safer.

However, the data did not bear out any of these explanations. Instead, the researchers found that the degree to which treatment sites reduced surgery due to COVID-19 varied substantially, and the sites that cared for more Black patients were the ones that reduced surgery the most.

Furthermore, in the two months after the initial lockdown, when rates of surgery rose back to baseline, rates for the Black prostate cancer patients did not show the sort of compensation the researchers would have expected from those delayed surgeries.

“We need to be cognizant of the disparate unintended consequence of the diversion of cancer resources to the pandemic,” said Bernstein. “Different policies were enacted for different communities requiring balanced mitigation strategies, lest we see the prostate cancer mortality gap start to widen again.”

She added that presenting at the ASCO meeting is particularly important. “This is a pattern that I would anticipate is happening across medicine, not just oncology or prostate cancer.”

The abstract for the poster, “Prostate Cancer Treatment Disparities During the COVID-19 Pandemic, Lessons From a Multi-Institutional Collaborative,” can be viewed on the meeting website.

***

About Fox Chase Cancer Center
The Hospital of Fox Chase Cancer Center and its affiliates (collectively “Fox Chase Cancer Center”), a member of the Temple University Health System, is one of the leading cancer research and treatment centers in the United States. Founded in 1904 in Philadelphia as one of the nation’s first cancer hospitals, Fox Chase was also among the first institutions to be designated a National Cancer Institute Comprehensive Cancer Center in 1974. Fox Chase researchers have won the highest awards in their fields, including two Nobel Prizes. Fox Chase physicians are also routinely recognized in national rankings, and the Center’s nursing program has received the Magnet recognition for excellence five consecutive times. Today, Fox Chase conducts a broad array of nationally competitive basic, translational, and clinical research, with special programs in cancer prevention, detection, survivorship and community outreach. It is the policy of Fox Chase Cancer Center, that no one shall be excluded from or denied the benefits of or participation in the delivery of quality medical care on the basis of race, ethnicity, religion, sexual orientation, gender, gender identity/expression, disability, age, ancestry, color, national origin, physical ability, level of education, or source of payment.