

POSTER ABSTRACTS

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Cancer 01

Colorectal Cancer Disease Free Survival in an Insured Population.

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Background. Prediction models are often used to identify high risk individuals for whom altered or intensified surveillance may be appropriate.

Methods. Data for this study was available from a multi-site study of colorectal cancer recurrence. Participating sites included Henry Ford Health System (Detroit, MI) and HealthPartners Research Foundation (Minneapolis, MN). Enrollees in the health maintenance organizations at both sites diagnosed with incident colorectal cancer between 1990-2000 and treated with intent to cure were eligible for this study. Using several variables that were determine a priori (tumor location, histology, grade, previous polypectomies, presence of benign polyps at the time of diagnosis, race, age, and sex) we tested a prediction model of disease free survival.

Results. Data was available on all the variables of interest for 464 cases (61% Caucasian, 35% African-American, 4% other race). The analysis was limited to Caucasians and African-Americans (n=454). The mean follow-up time was 49.5 months and the mean time for disease free survival was 45 months. The only significant variable in the model was race. The hazard ratio for African-Americans was 1.54 (p-value=0.04).

Conclusions. Our data suggest that despite having equal access to care, African-Americans are at an increased risk of colorectal cancer recurrence.