

## Inside Information



Michigan State University College of Human Medicine chairman Dr. Richard Leach sits with Dr. Karen Patricia Williams and Dr. Sabrina Ford, left, of the Department of Obstetrics, Gynecology and Reproductive Biology. (Submitted photo)

### MSU COLLEGE OF MEDICINE

# Study addresses disparity in cervical cancer deaths

Nearly 4,100 women die each year from invasive cervical cancer

While studying cervical cancer statistics compiled by the U.S. Centers for Disease Control and Prevention, Dr. Sabrina Ford noticed a discrepancy she thought must be a mistake: While African-American women undergo screenings for cervical cancer at a higher rate than white women, they die from the disease at almost twice the rate.

"I couldn't believe it," said Ford, a psychologist and assistant professor in the Michigan State University College of Human Medicine.

She showed the figures to her colleague, Dr. Karen Patricia Williams, a professor in the college's Department of Obstetrics, Gynecology and Reproductive Biology, who agreed the disparity didn't make sense.

"She was going back over the figures to make sure of what she was seeing," Williams said, "and then it was like, 'I really have something here.'"

Her research confirmed what Ford calls "the black woman's paradox." While African-American women undergo Pap tests more often than white women, their incidence and mortality rate from cervical cancer is much higher.

Now, she wants to know why. Ford plans to have what she has found so far published in a peer-reviewed medical journal, and plans to conduct further research to uncover the reasons for the higher death rate among African-American women.

At the heart of the disparity, she believes, are barriers that prevent many women who receive positive tests from getting the follow-up care that can cure it.

Ford's findings are important, because cervical cancer was one the most common causes of cancer deaths for American women, but since the development of the Pap test, the death rate has been cut in half over the past 30 years, according to the American Cancer Society.

About 12,900 new cases of invasive cervical cancer are diagnosed in the U.S. each year, and about 4,100 women die of it.

About four of every 100,000 African-American women died of cervical cancer in 2012 compared with about two per 100,000 white women, CDC figures show.

"The ability to home in on this finding is very important," said Dr. Richard Leach, chairwoman of the Department of Obstetrics, Gynecology and Reproductive Biology. "This can save lives dramatically."

The study also underlines the significance of the sociological research conducted by Ford, Williams and their colleagues, in addition to the biomedical studies of others in the college to find better treatments and cures for gynecologic cancers and other diseases. What good is a cure if patients don't receive the treatment?

The biomedical and sociological research "really needs to be done together," Leach said. "Looking at the sociological determinants is a critical component. That's the power of these findings. We can essentially reduce the cervical cancer mortality rate if we are able to find ways to get African-American women back into the office after an abnormal Pap test for further screening and treatment."

He, Ford and Williams suspect there are many reasons for the higher incidence and mortality rate among African-American women. That could include such practical barriers to follow-up care as the lack of transportation or child care. They might have moved, changed

phone numbers. It could include a breakdown in communication between the provider and patient and mistrust of the health care system by some African-American women.

Some women might not understand that a positive test means the screening might indicate pre-cancerous or cancerous cells, Ford said, adding that providers and health systems need to do a better job of explaining the finding in layman's terms and what should be done about it.

Because cervical cancer often is slow-growing with no obvious symptoms, some women might be lulled into a false sense of security that they really don't have the disease, Williams said.

The study points out the importance of organizing the health care system in a way that makes it easier for patients to navigate and promotes better communication between providers and patients, Leach said.

"When the patient lacks the understanding of the importance for follow-up it can result in dire consequences," he said. "Our challenge is to help patients navigate the barriers to healthcare by using a team approach to improve patient access and follow up. Today, these teams not only include physicians and nurses but also social workers, psychologists, home-visiting community health workers working together to address these barriers."

As a follow to her study, Ford plans to conduct a focus group with African-American women who received a positive Pap test, but did not come back for treatment.

"It really is a paradox," she said. "I kept going back and saying, 'It doesn't make sense.' And it doesn't make sense that this hasn't been reported before."

Added Williams: "The bottom line is we want to save the lives of people."