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Neha Hippalgaonkar MD  
*VCU Health*

Khalid Matin MD  
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The influence of health disparities on risk factors in patients with Colorectal cancer
Neha R. Hippalgaonkar MD¹, Khalid Matin MD¹
¹Virginia Commonwealth University, Richmond, Virginia

Background

- There are convincing data that suggest that lifestyle factors play a strong role in colorectal carcinogenesis.
- Obesity is associated with higher incidence of colorectal cancer (CRC) and increased mortality.
- Racial and ethnic minorities are more likely to develop colorectal cancer when compared to the general population in the US.
- Richmond is made up of 47% of African Americans (AA), with 24% of the total persons in poverty and a median household income of $45,117.

Purpose

- We aim to uncover trends in the African American population as compared to the Caucasian population to determine the effect of health disparities in obesity-related risk factors in patients with CRC.

Methods

- We used the Virginia Commonwealth University (VCU) network within TriNetX, a global federated health research network that provides access to statistics in electronic medical records of diagnoses, laboratory values and vitals.
- Compared Caucasian and AA patients with a diagnosis of CRC from 14 different health networks in the US from 2010-2019.

Figure 1. The VCU African American (AA) population exhibited higher rates of obesity (33% vs 26%), IBD (38% vs. 33%) and hypertension (71% vs 33%) as compared to AA patients in the other 14 networks.

Figure 2. Increased rates of diabetes (33% vs. 22%), hyperlipidemia (33% vs. 28%) and hypertension (71% vs. 56%) were found in the AA population compared to the Caucasian population in the VCU Network.

Conclusion

- Results suggest that important comorbidities are more prevalent in AA populations than in the Caucasian populations.
- This data highlights the fundamental importance of considering racial and socioeconomic factors when designing screening, treatment and management plans to reduce the mortality of CRC in an underserved community.

References