Sociodemographic inequities in overall survival among younger and older women with cervical cancer

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Background

•Black and Latinx women are more likely to be diagnosed and die from cervical cancer than Non-Latinx White women
•Older Black and Latinx women have much higher incidence and mortality rates than younger women from the same race/ethnicity
•Sociodemographic factors (Socioeconomic status (SES), rurality, and living in an area of persistent poverty) exacerbate disparities in older adults

OBJECTIVE: To investigate the associations between race/ethnicity, area-level SES, rurality, and persistent poverty with overall survival in younger (21-64 years) and older women (≥65 years) with cervical cancer.

Methods

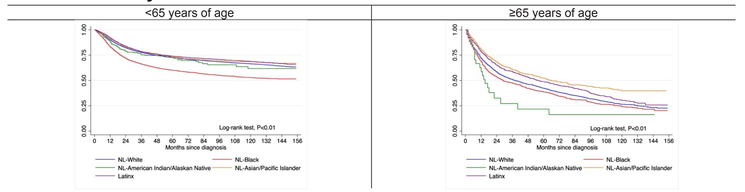
Design: Retrospective, population-based cohort study
Setting: Surveillance, Epidemiology, and End Results program registries
Participants: Analytic cohort of 39,000 women aged 21 and older diagnosed with CC between January 1, 2006, to December 31, 2020. Analysis was performed from June 21 to July 21, 2023.
Main Outcome: Stratified Cox proportional hazards models adjusted for age, diagnosis year, and histology were used to examine sociodemographic differences in overall survival.

Sociodemographic disparities in overall survival in younger women (<65) with cervical cancer **were not found** in older women with cervical cancer (≥65)

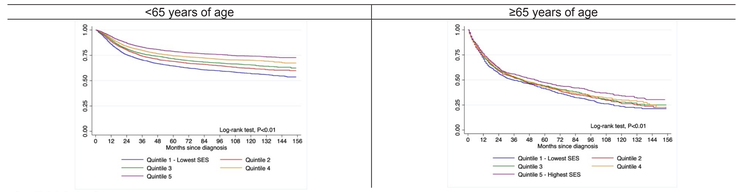
Results

Figure 1: Kaplan-Meier survivor functions for overall survival stratified by age (<65/≥65 years) for race/ethnicity, Yost Quintile, RUCA category, and persistent poverty

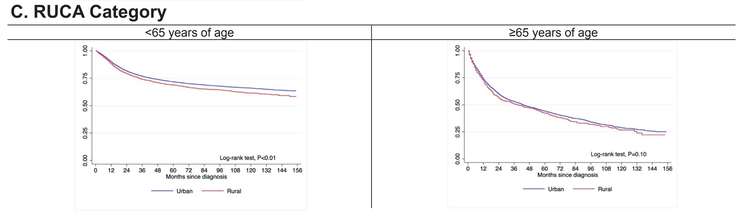
A. Race/Ethnicity



B. Yost SES Quintile



C. RUCA Category



D. Persistent Poverty

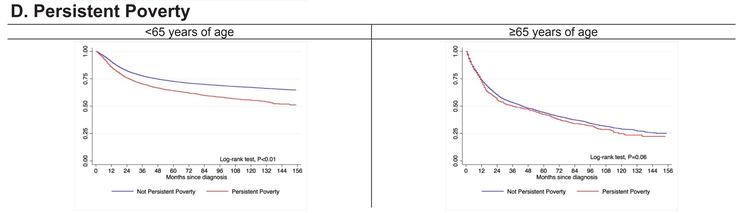
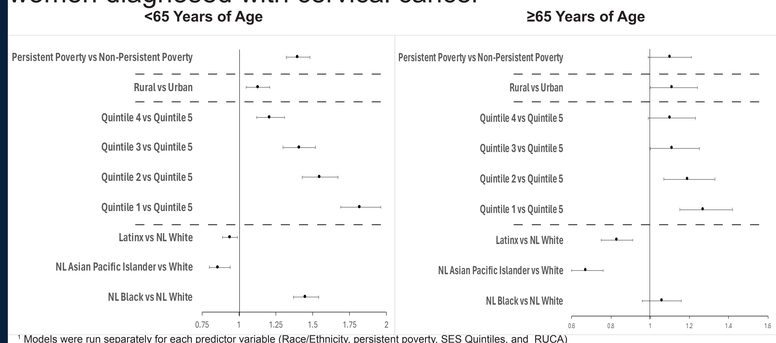


Figure 2: Associations between race/ethnicity and area-level social determinants of health with overall survival among women diagnosed with cervical cancer[1,2]



[1] Models were run separately for each predictor variable (Race/Ethnicity, persistent poverty, SES Quintiles, and RUCA)
[2]Multivariable estimates are adjusted in separate models for age (continuous), diagnosis year (categorical; 2006-2008, 2009-2011, 2012-2014, 2015-2018) and histology (categorical; squamous cell carcinoma, adenocarcinoma, adenosquamous, neuroendocrine, other)

Discussion

•Racial and sociodemographic inequities were found in cervical cancer overall survival for women <65 that were attenuated or nonexistent in women ≥65 years from similar backgrounds

•Availability of social safety programs such as Social Security and Medicare after the age of 65 may mitigate inequities among older women.

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