

MOVING TOWARD THE ELIMINATION OF CANCER HEALTH DISPARITIES

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MAYO CLINIC

HISTORY OF CANCER RESEARCH

- 1937: NATIONAL CANCER INSTITUTE ACT SIGNED INTO LAW
- 1971: NIXON'S WAR ON CANCER BEGINS/SEER ESTABLISHED
- 1984: "HECKLER REPORT" IDENTIFIES DISPARITIES
- 1990: OFFICE OF MINORITY HEALTH

HEALTH DISPARITIES

- 1987-1993: LEADERSHIP INITIATIVES DEVELOPED BY CONGRESS
- 1999: IOM REPORT TO CONGRESS
- 2000: RFA FOR SPECIAL POPULATIONS NETWORKS
- 2001: CENTER TO REDUCE CANCER HEALTH DISPARITIES

“UNEQUAL BURDEN”

- What are the most common cancers?
- How many new cancers each type/each year
- Are numbers (incidence) high or low?
- Are #s increasing?
- Are screening programs working?
- What treatments are patients receiving?
- Do any groups have unique cancer risks?

SPECIAL POPULATIONS NETWORKS

- 18 FUNDED ORIGINALLY
- MAYO'S "SPIRIT OF EAGLES"
- BUILDING INFRASTRUCTURE
- INCREASING MINORITY RESEARCHERS
- "PARTICIPATORY RESEARCH"

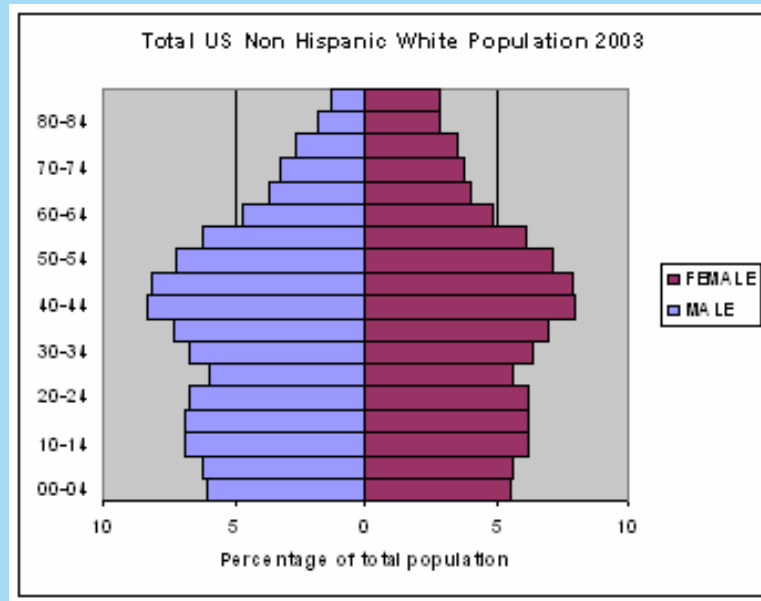
COMMUNITY NETWORKS PROGRAMS

- NCI COOPERATIVE AGREEMENTS
- NATIONAL, REGIONAL AND LOCAL PROGRAMS FUNDED (TOTAL 25 NATIONWIDE)
- CBPR IS THE CORNERSTONE

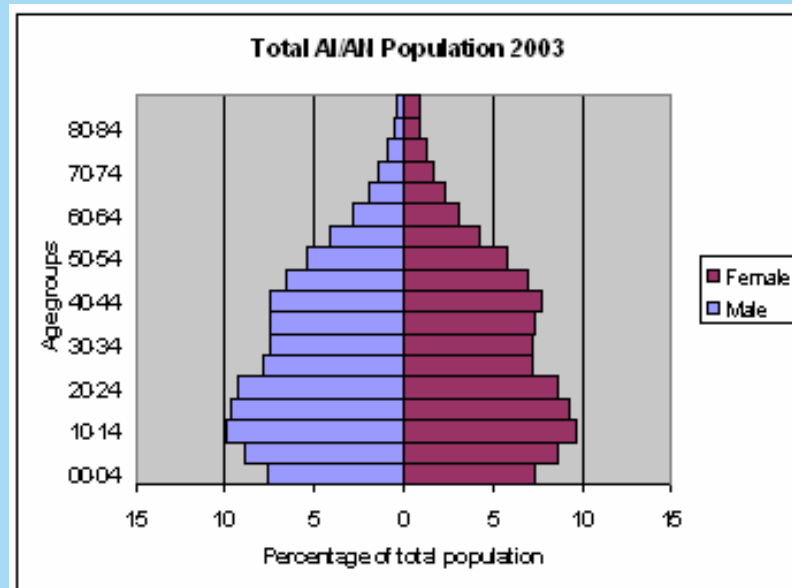
PRIMARY PREVENTION

- AVOIDANCE OF HARMFUL CARCINOGENS (TOBACCO, ASBESTOS)
- VACCINES: HEPATITIS B, HPV
- AGE GROUP MOST EFFECTED: YOUNG ADULTS

DEMOGRAPHICS COUNT!



HIGH PREVENTION POTENTIAL



SECONDARY PREVENTION

- SCREENING: BREAST, COLORECTAL, PAP, ? PROSTATE
- DEPENDENT ON PUBLIC ACCEPTANCE
- LIMITED BY ACCESS TO CARE
- AGE GROUP FOCUS: >AGE 40

Community Partners



TERTIARY PREVENTION

- ACCESS TO STATE OF THE ART CANCER TX (SURGERY, RADIATION, CHEMO, HORMONAL)
- ACCESS TO CLINICAL TRIALS
- PROVISION OF COMPASSIONATE END OF LIFE CARE

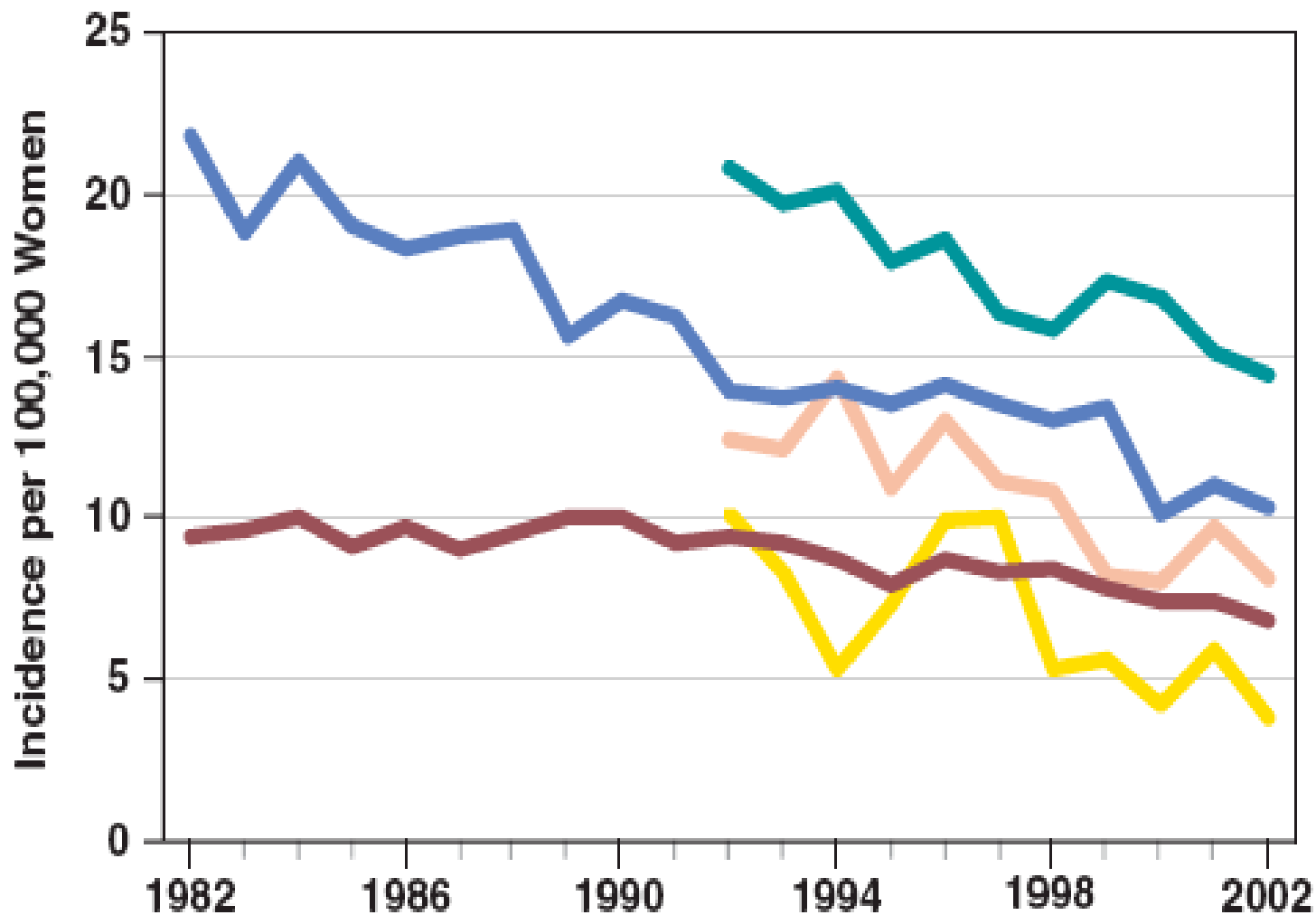
CLINICAL TRIALS

- REPRESENT STATE OF THE ART
- NEED TO INCREASE MINORITY ACCRUAL
- NEED TO BUILD “TRUST FACTOR” WITH COMMUNITIES

ANNUAL REPORT TO THE NATION

- 2006 SPECIAL FOCUS ON LATINOS
- 2007 SPECIAL FOCUS ON AI/AN
- HIGHLIGHTS SUBPOPULATION ISSUES
- DELINEATES REGIONAL PATTERNS IN AI/AN

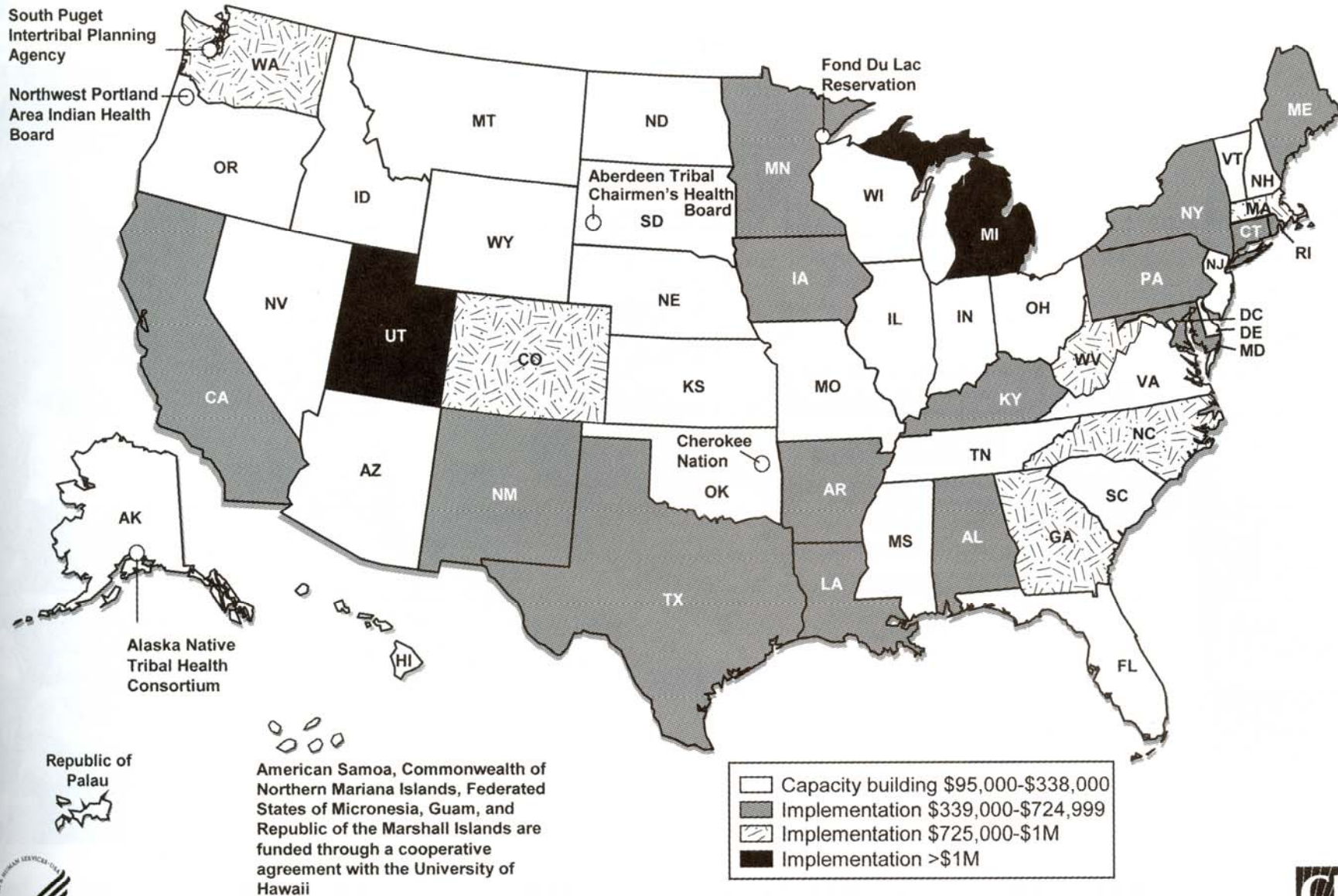
U.S. Cervical Cancer Incidence



Whites Hispanics* African Americans
Asians or Pacific Islanders* American Indians/Alaskan Natives*

**Incidence and mortality data not available for earlier years.*

Status of CDC Comprehensive Cancer Control Funding FY05



PAST SUCCESS

- BIOLOGIC BASIS OF CERVICAL CANCER
- DEVELOPMENT OF A SCREENING TEST
- INFRASTRUCTURE BUILDING TO MAXIMIZE SCREENING
- FURTHER RESEARCH TO DEVELOP VACCINE

CHANGING CANCER PATTERNS IN MINORITIES

- STILL EXCESS OF CANCERS RELATED TO INFECTIOUS ETIOLOGIES (CX, GASTRIC, LIVER)
- INCREASING RATES OF THE MOST COMMON CANCERS (BREAST, COLON, LUNG)

COLORECTAL CANCER

- BIOLOGIC BASIS OF DISEASE UNDERSTOOD
- SCREENING DEVELOPED
- INFRASTRUCTURE NEEDED TO CONTINUE DECLINE IN DEATH RATES



RESEARCH NEEDS

- BIOLOGICAL
- PSYCHOLOGICAL
- SOCIAL

FUTURE NEEDS AND DIRECTION

- INFRASTRUCTURE BUILDING
- IMAGING RESEARCH TO BRING AFFORDABLE AND ACCESSIBLE SCREENING
- RESEARCH ON MODELS OF CARE
- DATA TO INFORM COMMUNITIES FOR PRIORITIZATION

ARE WE MOVING FORWARD?

