

# Disparities in Preventive Care in Women

Linda D. Bradley MD

Professor Obstetrics & Gynecology, Reproductive Biology

Cleveland Clinic

bradl@ccf.org

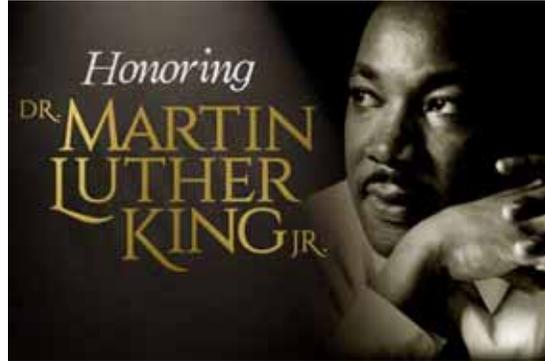


## Objectives

- List challenges and potential solutions for patients and caregivers to dismantle health care disparities
- Describe how social determinants of health impact women's preventative health care

“Of all the forms of inequality, injustice in healthcare is the most shocking and inhumane”

Rev. Dr. Martin Luther King



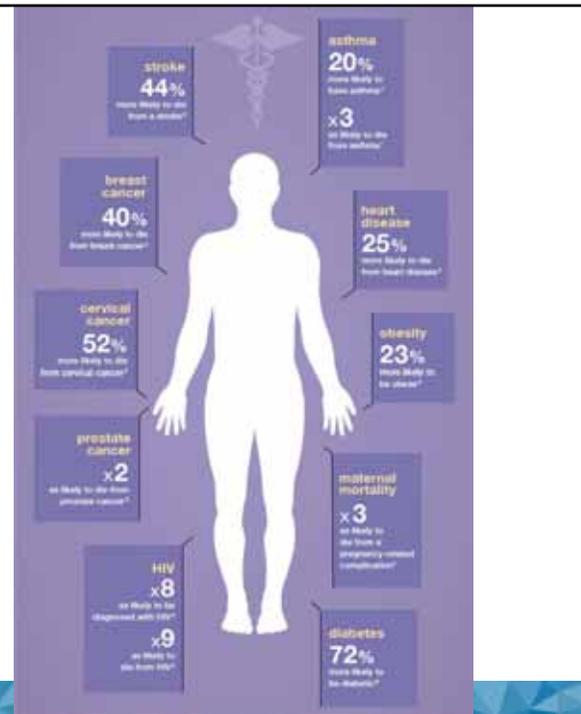
#### Healthy People 2020 Approach to Social Determinants of Health



Societal Determinants of Health in the United States.

<http://www.healthypeople.gov/2010/hp2020/advisory/SocietalDeterminantsHealth.htm>

## African American Health Inequities: Adults



### Leading Causes of Death - Females - Non-Hispanic black - United States, 2017

Non-Hispanic black<sup>1</sup>, Female, All ages<sup>2</sup>

Non-Hispanic black, Female, All ages	Percent
1) Heart disease	22.8%
2) Cancer	21.5%
3) Stroke	6.5%
4) Diabetes	4.5%
5) Alzheimer's disease	4.0%
6) Unintentional injuries	3.7%
7) Chronic lower respiratory diseases	3.5%
8) Kidney disease	3.1%
9) Septicemia	2.2%
10) Hypertension	2.1%

Non-Hispanic black Female, by Age Group		Age Group <sup>a</sup>				
		1-19 years	20-44 years	45-64 years	65-84 years	85+ years
1	Unintentional injuries 27.0%	Unintentional injuries 18.0%	Cancer 29.8%	Cancer 25.3%	Heart disease 27.2%	Heart disease 22.8%
2	Homicide 14.9%	Cancer 14.9%	Heart disease 21.6%	Heart disease 23.6%	Cancer 10.6%	Cancer 21.5%
3	Cancer 8.1%	Heart disease 14.1%	Unintentional injuries 5.1%	Stroke 7.1%	Alzheimer's disease 10.5%	Stroke 6.5%
4	Birth defects 6.6%	Homicide 6.7%	Diabetes 4.9%	Diabetes 5.2%	Stroke 8.9%	Diabetes 4.5%
5	Suicide 5.5%	Diabetes 4.1%	Stroke 4.9%	Chronic lower respiratory diseases 4.3%	Diabetes 3.5%	Alzheimer's disease 4.0%
6	Heart disease 4.4%	Suicide 3.3%	Chronic lower respiratory diseases 3.4%	Kidney disease 3.7%	Chronic lower respiratory diseases 3.0%	Unintentional injuries 3.7%
7	Chronic lower respiratory diseases 2.6%	Pregnancy complications 3.0%	Kidney disease 2.9%	Alzheimer's disease 3.4%	Hypertension 3.0%	Chronic lower respiratory diseases 3.5%
8	Influenza and pneumonia 1.9%	Stroke 2.9%	Septicemia 2.3%	Septicemia 2.5%	Kidney disease 2.9%	Kidney disease 3.1%
9	Stroke 1.6%	HIV disease 2.8%	Chronic liver disease 1.8%	Hypertension 2.1%	Influenza and pneumonia 2.2%	Septicemia 2.2%
10	(tie rank) Benign neoplasms Diabetes 1.3%	Kidney disease 1.7%	Hypertension 1.8%	Influenza and pneumonia 1.8%	Septicemia 1.9%	Hypertension 2.1%

## Leading Sites of New Cancer Cases and Deaths 2019

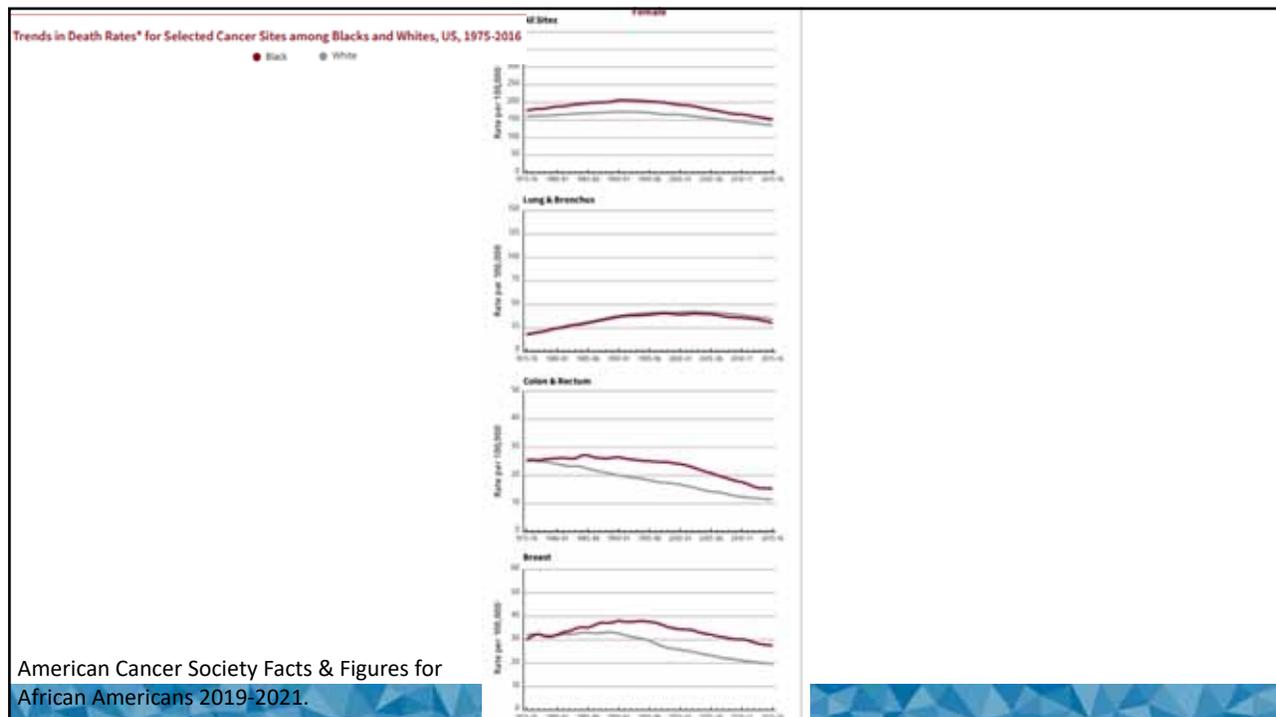
### Leading Sites of New Cancer cases in AA women

	Female	
Breast	33,840	32%
Lung & bronchus	11,660	11%
Colon & rectum	9,860	9%
Uterine corpus	7,460	7%
Pancreas	3,980	4%
Thyroid	3,520	3%
Myeloma	3,500	3%
Kidney & renal pelvis	3,380	3%
Non-Hodgkin lymphoma	2,910	3%
Leukemia	2,600	2%
<b>All sites</b>	<b>104,240</b>	

### Estimated Deaths for AA women

	Female	
Lung & bronchus	7,270	20%
Breast	6,540	18%
Colon & rectum	3,300	9%
Pancreas	2,940	8%
Uterine corpus	2,500	7%
Ovary	1,400	4%
Liver & intrahepatic bile duct	1,350	4%
Myeloma	1,200	3%
Leukemia	980	3%
Uterine cervix	770	2%
<b>All sites</b>	<b>36,190</b>	

American Cancer Society Facts & Figures for African Americans 2019-2021.



## Breast Cancer in Black Women

- Most commonly diagnosed cancer among black women
- Increased detection of asymptomatic lesions by mammography
- Twice as likely to be diagnosed with triple negative breast cancer
- Poorer outcomes due to less effective treatment
- 40% of racial variation is due to inherited genetic mutations
- Inflammatory breast cancer while rare is more common in black women
- Is the second most common cancer deaths and 40% higher than in white patients
- 54% of breast cancers are diagnosed with localized disease compared to 64% of white women

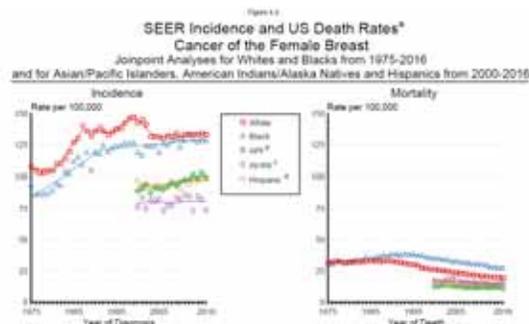
American Cancer Society Facts & Figures for African Americans 2019-2021.

## Breast Cancer

- More advanced stages due to:
  - Access to high-quality health care
  - Fewer mammograms
  - Lack of timely follow up of abnormal results
  - Receipt of health care at lower resourced unaccredited facilities
  - Unequal access to receipt of prompt, high-quality treatment

## Key cancer incidence and mortality disparities among women

- African American women are nearly twice as likely as white women to be diagnosed with [triple-negative breast cancer](#), which is more aggressive and harder to treat than other subtypes of breast cancer.



American Cancer Society Facts & Figures for African Americans 2019-2021.

## Cervical Cancer

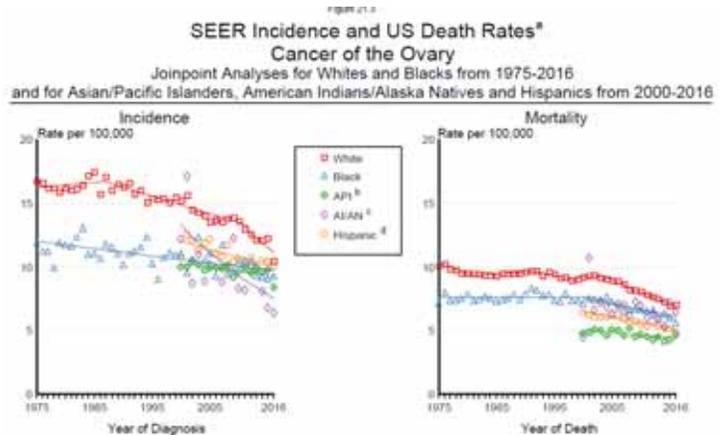
- In 2019, there were 2,290 cases of cervical cancer in black women
- The incidence of cervical cancer is 30% higher than in white women
- 770 deaths in black women, with 80% more likely to die from cervical cancer than white women
- Cervical cancer is highly preventable
- Pap test
- HPV vaccination

American Cancer Society Facts & Figures for African Americans 2019-2021.

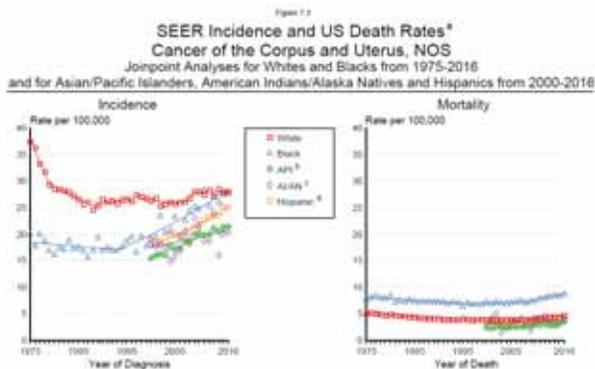
## Cervical Cancer

- Overall 5-year relative survival for blacks is 56% compared to 68%
- Black women more likely to be diagnosed with regional-or distant stage disease
- Less screening, poorer follow up
- Treatment differences accounted for 47% of black-white differences in mortality and lack of insurance explained 19% of excess risks
- A greater proportion of black women (17%) failed to receive surgery compared to 9% white women

## Key cancer incidence and mortality disparities among women (ovary)



## Key cancer incidence and mortality disparities among women(uterine)



**NewsHour's Gwen Ifill memorialized with USPS Forever**



## Why Do Black Women Have a Higher Mortality Rate From Uterine Cancer?

- Endometrial Cancer is most common gyn cancer (1/37) women
- Black women have a 90% higher 5 year mortality compared to white women
- The 5 yr mortality rate of 39% compared to 20% for white women
- Disparities in th cancer stage at diagnosis
- Only 53% black women receive early diagnosis

## Why Do Black Women Have a Higher Mortality Rate From Uterine Cancer?

- Care delays independent of health care access
- Knowledge gaps and silence regarding menopause
- Misinterpretation of vaginal bleeding
- Responses of first-line healthcare practitioners to bleeding

## American Cancer Society Recommendations for the Early Detection of Cancer in Average-risk Asymptomatic People\*

Cancer Site	Population	Test or Procedure	Recommendation
<b>Breast</b>	Women, ages 40-54	Mammography	Women should have the opportunity to begin annual screening between the ages of 40 and 44. Women should undergo regular screening mammography starting at age 45. Women ages 45 to 54 should be screened annually.
	Women, ages 55+		Transition to biennial screening, or have the opportunity to continue annual screening. Continue screening as long as overall health is good and life expectancy is 10+ years.
<b>Cervix</b>	Women, ages 21-29	Pap test	Screening should be done every 3 years with conventional or liquid-based Pap tests.
	Women, ages 30-65	Pap test & HPV DNA test	Screening should be done every 5 years with both the HPV test and the Pap test (preferred), or every 3 years with the Pap test alone (acceptable).
	Women, ages 66+	Pap test & HPV DNA test	Women ages 66+ who have had $\geq 3$ consecutive negative Pap tests or $\geq 2$ consecutive negative HPV and Pap tests within the past 10 years, with the most recent test occurring in the past 5 years, should stop cervical cancer screening.
	Women who have had a total		Stop cervical cancer screening.
<b>Endometrial</b>	Women at menopause		Women should be informed about risks and symptoms of endometrial cancer and encouraged to report unexpected bleeding to a physician.

**BMMA**  
BLACK MAMAS MATTER ALLIANCE

“**DOCTORS AREN'T LISTENING TO US**  
THERE'S A LOT OF PRE-JUDGING...  
THAT DEFINITELY GOES ON. AND  
IT NEEDS TO BE ADDRESSED.”

Serena Williams

**#BLACKMAMASMATTER**  
**#BMHW18**

BLACK MAMAS HEALTH WATCH  
**BMHW**  
2018-2020

**“Doctor, am I going to die having a baby or being pregnant?”**

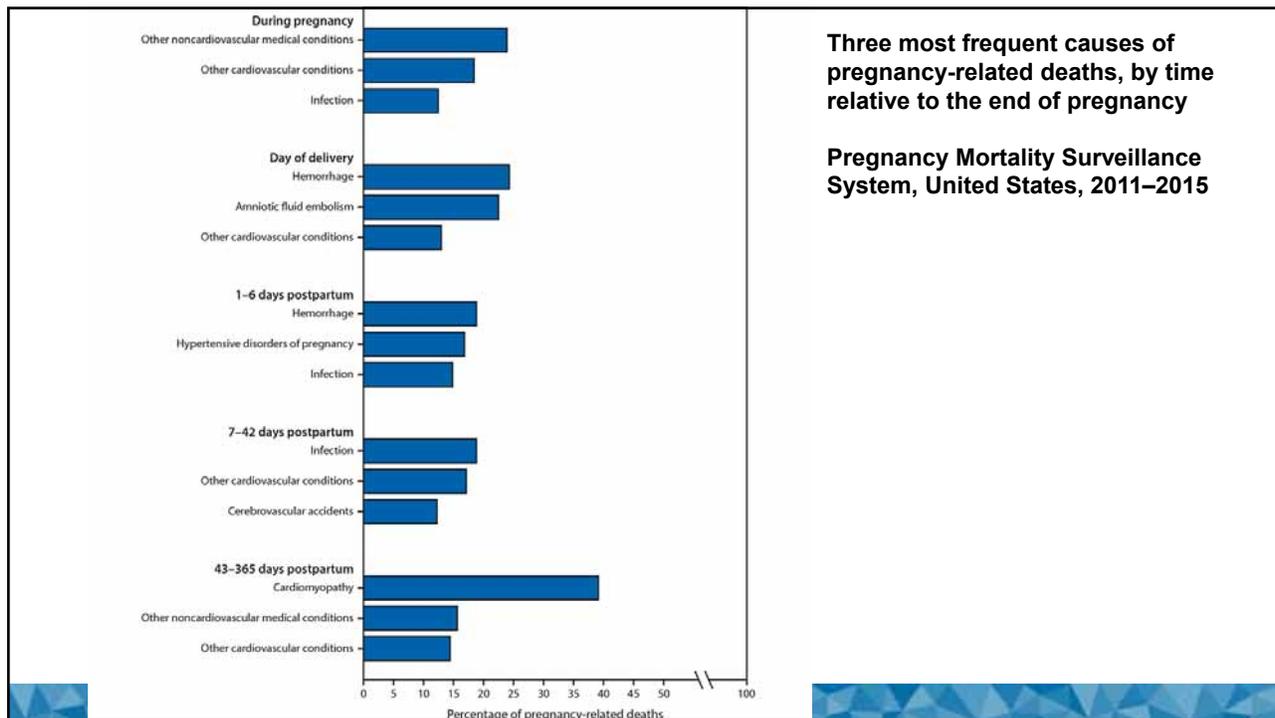
## Maternal Mortality and Morbidity National Statistics

- The US has the highest maternal mortality rate in the developed world, with 700 women dying from pregnancy related complications every year
- It is important to distinguish between Pregnancy Associated death, death while pregnant regardless of cause, and Pregnancy Related death, death within one year of pregnancy from any pregnancy related cause.



Maternal death is the tip of the iceberg  
60% percent are preventable

- For every death , over a hundred women suffer a severe complication
- 1.5-2% of the 4 million deliveries
- Affects 60,000 suffer these effects
- 5-6 women every hour having a blood clot, seizure, stroke, blood transfusion, end organ damage (i.e. kidney failure)



The severity of **intimate partner violence** may sometimes **escalate during pregnancy or the postpartum period.**

**As an ob-gyn, you can help:** Screening during obstetric care should occur at the first prenatal visit, at least once per trimester, and at the postpartum checkup.

ACOG

Approximately **324,000 pregnant women** are **abused** each year in the U.S.

**As an ob-gyn, you can help:** keep printed take-home resource materials such as safety procedures, hotline numbers, and referral information in privately accessible areas such as restrooms and examination rooms.

ACOG

## Intimate Partner Violence in the USA

- More than 3 women every day are killed
- 1 in 4 women and 1 in 7 men have experienced severe physical violence by an intimate partner during their lifetime
- 1 in 3 women and 1 in 6 men experience some form of sexual violence during their lifetime
- Women aged 16-24 are more likely than other women to be victims of violence
- 20-30% of university women report violence during a date
- Spousal homicide peaks in the 15-24 yr old category
- As the age differential between husband and wife increases, so does the risk of spouse homicide
- Affects more than 12 million people each year
- Nearly 3 out of 4 Americans personally know someone who has be a victim of IPV



## Special Populations at Risk for Intimate Partner Violence (IPV)



- ***Non-Hispanic, Black women.*** According to the Centers for Disease Control and Prevention, non-Hispanic, Black women experience some of the highest rates of physical violence at the hands of intimate partners. In addition, statistics indicate that Black women are more likely to be murdered by their partners than White women.

2

## Mission Possible to Improve Health

- **Healthcare providers can:**
- Help patients manage chronic conditions like diabetes, heart disease, high blood pressure and obesity.
- Communicate with patients about warning signs.
- Use tools to flag warning signs early so women can receive timely treatment.

## Mission Possible

- **Hospitals and healthcare systems can:**
- Identify and address unconscious bias in healthcare.
- Standardize coordination of care and response to emergencies.
- Improve delivery of quality prenatal and postpartum care.
- Train non-obstetric providers to consider recent pregnancy history.

## Mission Possible

- **States and communities can:**
- Assess and coordinate delivery hospitals for risk-appropriate care.
- Support review of the causes behind every maternal death.

## Mission Possible



- **Women and their families:**
- Know and communicate about symptoms of complications.
- Note pregnancy history any time medical care is received in the year after delivery.

“When people are determined they can overcome anything.” But “action without vision—its only passing time. Vision without action is merely daydreaming. But vision with action can truly change the world.”

The past we inherit  
The future we create  
Theo Moll

Make the Journey to Eliminate Health Care Disparities

For the betterment of...

You

Women's  
Healthcare

Our  
Community

**Patient**

The Time Is Now to Take Action!

**Revolution**                      **Advocate**

**Voice of Change**

**New Road**                      **Be Different**

