

COLORECTAL CANCER IN THE BLACK AMERICAN MALE POPULATION

By: Brett Walker

Introduction

- Colorectal cancer (CRC) has become the second most common death due to cancer and Black Americans are 20% more likely to get CRC and 40% more likely to die from it due to the health inequities that plague Black American communities.
- Black American men specifically during the last decade have experienced a spike in colorectal cancer incidence and diagnosis.
- Colorectal cancer is the growth of polyps that starts in the most inner wall (mucosa) of the colon or rectum which then grow into the blood vessels or lymph vessels and travel to nearby lymph nodes or to distal parts of the body.
- Black Americans are usually diagnosed with CRC when they are experiencing symptoms such as a bloody stool or other complications when having a bowel movement and at that point the effectiveness of treatment greatly decreases.

Objectives

- Address social determinants of health and health care barriers that impact CRC rates in Black men.
- Address the epidemiological risk factors.
- Address health initiatives that have contributed to decreasing CRC rates through improving access to screening and health education.

Methods

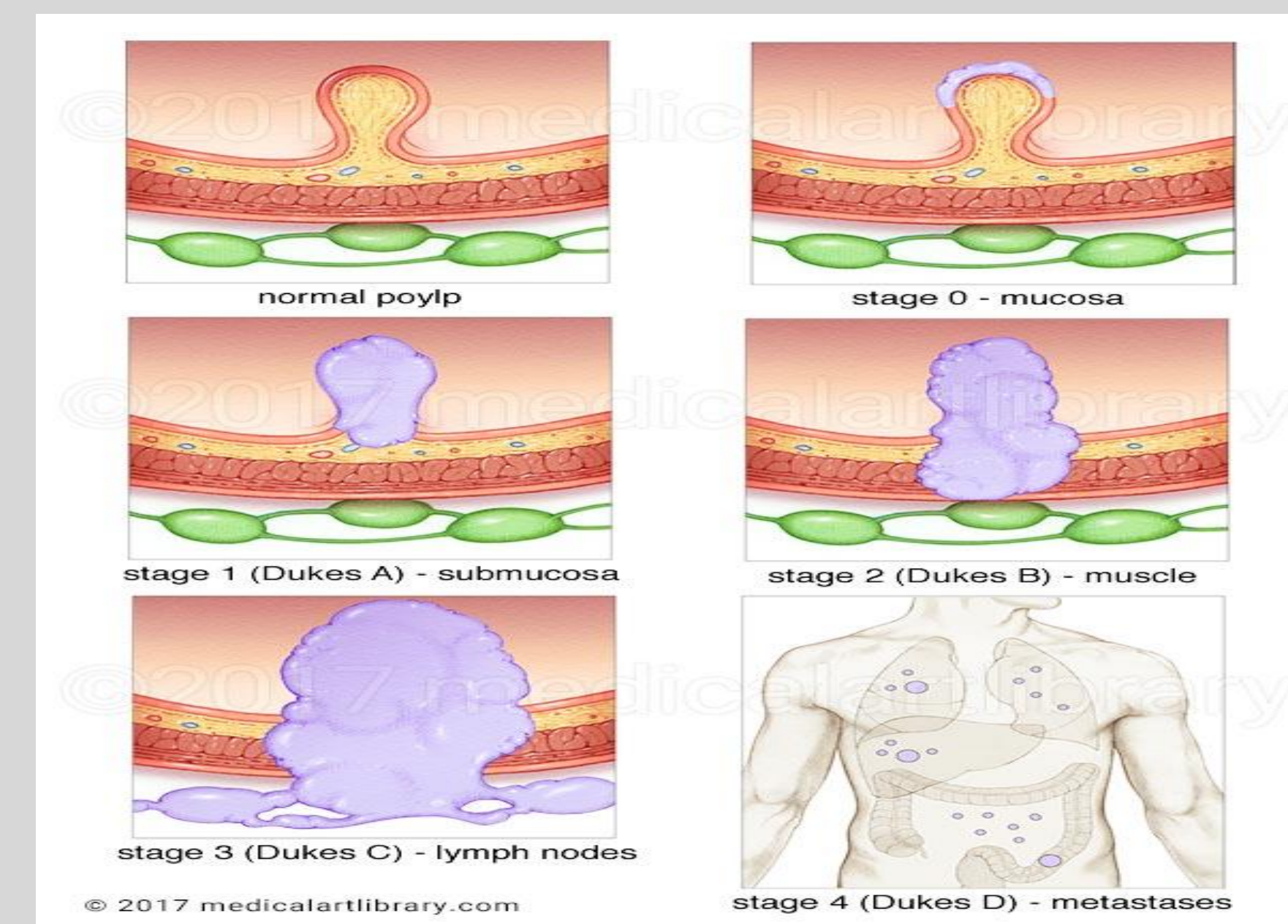
- Research and literature review based on the foundational principles of public health.
- I researched the social determinants of health and barriers that lead to black men having a high incidence and mortality rate.
- Key search terms- preventative screening, racial wealth gap, health care access, and nutrition.
- Environmental health is addressed through exploiting the inadequate nutritional options available in Black communities.
- I researched physiological impacts of colorectal cancer at each stage and life expectancy.
- I used search terms such as association, risk factors, cumulative incidence, and relative risk to find literature on a plethora of chronic illness that increase incidence of CRC.
- Lastly, I address how health initiatives and programs have been implemented to mitigate this public health crisis.

Social Determinants of health

- Limited access to affordable health coverage and being poor become major barriers to people getting the necessary screening to detect CRC. Expanding health care coverage would increase the number of Black Americans who will get screening and will also increase their use of primary care physicians.
- Black men also struggle with health literacy and making health promoting choices. Black men avoid colonoscopies due to the location of the procedure.
- Many Black men may not be aware of the different testing methods for CRC and not informed on age and frequency screening should take place.
- Poor nutrition in a community is a major health barrier and an environmental health issue that certainly increases incidence rates of Colorectal cancer and other chronic health illness.
- Black Americans live in communities that don't have access to low fat meat and fresh fruit and vegetables which leads to relying on processed meats for protein.
- Black men reported a higher median intake of processed meat than most ethnic groups.

Epidemiology

- As the cancerous cells grow and begin to metastasize outside of the colon and rectal region the cancer becomes more difficult to treat and manage.
- Localized cancer: stage I and stage II colon or rectal cancers has 89.9% five-year relative survival rate.
- Regional Cancer -pertains to stage III and has a 71.3% five-year relative survival rate.
- Distant Cancer pertains to Stage IV -14.2% five-year relative survival rate.



Risk Factors

- CRC relative risk with red meat consumption was 1.12 (95% CI: 1.03–1.21)
- RR with processed meat consumption was 1.15 (95% CI: 1.07–1.24)
- Obesity has a (RR 1.54, 95% CI 1.01-2.35) with respect to CRC.
- Hyperlipidemia has a (RR 1.62, 95% CI 1.22-2.13) with respect to CRC.
- Diabetes has a (RR 1.38, 95% CI 1.26-1.51) for colon cancer and for rectal cancer it was 20 percent higher (RR 1.20, 95% CI 1.09-1.31).

Protective Factors

- Early screening
- Following screening Frequency every 10 years after first colonoscopy and every 2 years after the first FIT test.
- Limiting consumption of red and processed meat
- Reducing risk of comorbidities and metabolic diseases that elevate the risk of CRC.
- Access to a primary care physician and health coverage.

Health Programs and Initiatives

- A study, combined text messaging with mailing people free, at-home test kits to boost the number of people who get screened for colorectal cancer.
- Health care workers and providers are using a text message system would be a conductive way of increasing health literacy and reminding people to get the necessary screening.
- Approximately 20% completed the test and returned it over the same time period. 10-fold increase in screening completion.
- From late 2009 to late 2013, community health workers visited 111 interested barbershops in all five boroughs of New York City and screened 4,025 black male customers or nearby residents aged 50 or older for eligibility based on whether they were up-to-date for colorectal screening.
- Community outreach in public places of gathering is a good way to increase address the CRC health crisis educating the targeted population on health risks and the benefits of early screening.
- Heritage New York Medical PC is a medical group that prioritizes patients getting the necessary screening such as FIT test and colonoscopies by reaching out to patients and sending reminders for when patients are due for screening.

Discussion/Conclusion

- The high incidence and mortality rates of colorectal cancer in the Black male population are caused by the many health inequities that exist within in Black communities.
- It is important to implement more health education and health promoting lifestyle options in Black American communities to prevent chronic health conditions linked to CRC.
- Over consumption of red meats, processed meats, and foods with high cholesterol content are greatly associated with CRC and those foods should be avoided.
- Access to better quality of health, regularly seeing a primary care physician, improving health converge will remedy the some of the health disparities.
- The government must continue to expand Medicaid so all people can be insured and have access to preventative services.
- I would suggest the government making screening measures for CRC more accessible or free for all people over the age of 45.
- Early screening is the most effective treatment and there is a 90% survival rate of catching CRC in its earliest stages.
- Health initiatives such as community outreach in Black community barbershops or health companies relying on text messages to encourage screening are great ways to mitigate the high incidence of CRC in Black males.

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Faculty Advisor

Dr. Ehlke