



**April 14, 2023**

## **Road Map Bulletin: Why is Uterine Cancer Becoming More Prevalent and Deadly for Women of Color?**

Happy Friday, Mount Sinai Community –

As part of our ongoing series on disparities in cancer [screening](#) and [care](#), this week we're discussing uterine cancer, which, [according to a new study in JAMA Oncology](#), is becoming more prevalent and more deadly over time among women of color, especially Black women. Uterine cancer is a significant health concern for women and is [expected to](#) displace colorectal cancer as the third most common cancer among women and the fourth-leading cause of women's cancer deaths in the coming years. While it is generally considered highly curable if caught early, stark racial disparities in diagnosis and outcomes are coming into focus.

For example, Black women [represented](#) just under 10 percent of the more than 200,000 uterine cancer cases diagnosed in the United States between 2000 and 2017 but accounted for almost 18 percent of uterine cancer deaths during that period. According to an [expert panel](#) convened by the American College of Obstetricians and Gynecologists, Black women die of uterine cancer at twice the rate of white women—one of the largest racial disparities in cancer survival rates.

Researchers are hard at work trying to uncover the causes behind this disparity.

[A recent study](#) found that Black women face barriers to early care, including diagnosis. More than twice as many Black patients (10 percent) did not receive a diagnostic procedure after reporting abnormal bleeding, the most common symptom of uterine cancer, compared to white patients (5 percent). As a result, Black patients were 46 percent more likely than white patients to encounter a delay of more than two months in receiving their first diagnostic procedure after reporting abnormal bleeding—and 71 percent more likely to have a delayed diagnosis of uterine cancer.

This disparity can have significant consequences: without proper diagnostic evaluations, uterine cancer may go undetected until it has reached a later stage, making it more difficult to treat and potentially more deadly.

**Black patients were 71 percent more likely to have a delayed diagnosis of uterine cancer.**

It appears that, finally, the Omicron-driven wave of COVID-19 cases may be declining, but we must remain vigilant. The reality is that while COVID-19 does not discriminate, our societal structures do—and that puts communities of color in harm's way.

**Ana Acuna-Villaorduna, MD, Assistant Professor of Hematology-Oncology at the Icahn School of Medicine at Mount Sinai** told us that



“Access to care is a complex, multidimensional concept —while we don’t know what caused these disparities, it is likely a combination of factors like not having a primary care doctor or gynecologist, difficulties navigating the health system, and patients’ beliefs and attitudes toward having procedures, among others. What’s clear is there is a lot more for us to study so we can fight uterine cancer for all of our patients.”

Addressing the root causes of disparities and working to ensure that every patient, regardless of gender, race, or ethnicity, receives the care they need and deserve will help improve health outcomes and reduce the burden of uterine cancer.

All the best,

Angela and Shawn

## Join Us for Upcoming Events

**Black Maternal Health Disparities Webinar** – Pregnancy and childbirth should be joyous events. But for Black women, they are too often marred by tragedy. For instance, Black women are three to four times more likely to experience pregnancy-related deaths than white women. A key reason for this disparity is that Black women who complain of pain are often ignored or dismissed. Potentially serious health problems thus go untreated, leading to unnecessary suffering and preventable deaths. April 11-17 is Black Maternal Health Week. In recognition of this annual celebration, the Arnhold Institute for Global Health (AIGH) is highlighting the maternal issues affecting Black women and women of color on **April 17 at 5:30 pm**. This exciting webinar will feature two panelists, Zahirah McNatt, DrPH, MHSA, and Chanel Porchia-Albert, CD, CLC, CPD, CHHC, and our moderator, Sheela Maru, MD, MPH. [Register on Zoom](#).

**Chats for Change: White Supremacy Culture's Impact on Organizing and Activism | What can we do?** – Chats for Change is a production of the Icahn School of Medicine's Racism and Bias Initiative. Join facilitators [RBI x CAP Fellows](#) Paloma Orozco Scott (MS4) and Carina Seah (MD/PhD Candidate, 4th year student) on **Tuesday, April 18 from noon-1 pm** to investigate how white supremacy culture impacts our collective and individual ability to actively organize for justice. In this session, we will focus on what aspects of white supremacy culture may constrain collective organizing. In small groups, we want to hear what frameworks, strategies, and cultural shifts have allowed you and others to actively organize for change. Identifying barriers and sharing lessons is an inquisitive + empowering practice that we hope leads us closer to our dreams of a more just future. [Register on Zoom](#).

**Autism Awareness Panel** — In recognition of National Autism Awareness Month, join the Heritage of Latinx Alliance (HOLA) Employee Resource Group (ERG) and the All Differing Abilities Partnering Together (ADAPT) ERG for the Autism Awareness Panel. This virtual panel will take place on **Tuesday, April 25** at 1 pm and will feature an engaging and informative dialogue centered around Autism Spectrum Disorder. [Click here](#) to register to attend the panel and receive a calendar notice with the Zoom link.

[Road Map for Action](#)

[Past Bulletins](#)