

Colorectal cancer surgery rates in indigenous versus nonindigenous patients

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The rate of colorectal cancer surgery in indigenous Australians is slightly lower than in the rest of the population when adjusted for demographic and clinical factors.

Background

We compared the rate of colorectal cancer surgery between indigenous and non-indigenous patients controlling for differences in demographic and clinical characteristics.

Methods

The proportion of patients who underwent colorectal cancer surgery was estimated for 242 indigenous and 23,925 non-indigenous Queensland residents diagnosed with colorectal cancer between 2001 and 2010. The relative likelihood of surgery in the two groups was compared through a modified Poisson regression model with robust error variance controlling for age, sex, cancer primary site, metastatic disease, and comorbidities.

Results

Compared to non-indigenous patients, indigenous colorectal cancer patients were younger (median age 60 yrs vs 70 yrs) and had higher proportion of females (51% vs 45%), cancers of the rectum (42% vs 32%), and patients with comorbidities (45% vs 32%).

Overall colorectal cancer surgery rates were 87% and 91% for indigenous and non-indigenous patients respectively. When adjusted for demographic and clinical characteristics, the relative likelihood (risk ratio) of cancer surgery in indigenous patients was 0.95 (95% confidence interval: 0.91-1.00, $p=0.041$) compared to non-indigenous patients.

Conclusion

Colorectal cancer surgery rates are only marginally lower in indigenous compared to non-indigenous patients. Other measures of health care access and quality of care should be investigated to account for poorer cancer outcomes among indigenous people.

Likelihood of colorectal cancer surgery
Incidence rate ratios with 95% confidence intervals
(N = 25,852)



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