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Survey Finds Ethnic Californians Lag Behind in Cancer-Screening – Ethnic Physicians and the Ethnic Media Team Up to Raise Awareness

Latinos, Asians and Native Americans consistently lag behind other groups in rates of cancer screening, according to a multilingual survey released in November 2003 by the UCLA Center for Health Policy Research. In an unusual coalition, the Latino, Asian and Native American press are working together with ethnic physicians to raise awareness about the effectiveness of getting screened for cancer.

Cancer screening and prevention is necessary for the health of all California's families. "Cancer is not a one person problem," says Dr. Tin Tin Hla, a San Jose physician and past President of the U.S. Burmese Medical Association, Northern California. "It involves the loved ones around you. Get to know more about cancer screening and prevention for the sake of you and your family."

Cancer is the second leading cause of death in California and the nation, surpassed only by heart disease. Cancer screening tests are crucial to preventing cancer by detecting it early when it is most treatable, and, in many cases, curable.

Regular screenings should be done in the absence of any symptoms—something many Californians don't know. One of the most common reasons reported for not having a recent cancer screening is that the patient "hasn't had any problems." This misconception is particularly prevalent among the ethnic and racial groups least likely to get tested.

American Indians are less likely to have been recently screened for breast or prostate cancer than whites, and Native Hawaiians and other Pacific Islanders consistently report some of the lowest screening rates in the state.

In California, Asians report lower rates of screening than whites for the four main cancers that are screened for: Pap test for cervical cancer; mammography for breast cancer; stool blood test, colonoscopy or sigmoidoscopy for colon cancer; and the prostate specific antigen (PSA) test for prostate cancer.

“Cancer is one of the major causes of death for Asian Americans,” notes Edward A. Chow, M.D., Executive Director of the Chinese Community Health Care Association in San Francisco. “Unfortunately, the diagnosis is often made late in the course of the disease. Using proven cancer detecting tests can reduce mortality rates by diagnosing it early.”

Less than 70 percent of Chinese, Vietnamese, and Korean women report having a Pap test in the last three years—a disturbing statistic since Vietnamese women are five times more likely than white women to have cervical cancer.

“Some Asian women may be reluctant to ask their physicians, especially if the physician is male, for a Pap smear or mammogram because of cultural issues regarding modesty,” explains Dr. Quyen Ngo-Metzger, a U.C. Irvine physician. “Many Asian men and women are not aware that they need special screening tests for cancer. Many patients that I have encountered assume that the doctor has ordered all the needed tests. We need to educate the public to ask for these tests.”

Cervical cancer is also high among Latina women, with rates double that of white women. And Latinos report lower screening rates than whites for breast, colon and prostate cancer. Only 37 percent of Latinos report having been screened recently for colon cancer, for example, compared to 56 percent of whites. Latina women are at particular risk—only one in three (33 percent) reports having a recent colon cancer screening test.

“I stress with my patients the need to get preventive health

check-ups and encourage them to get cervical and breast cancer screenings,” says Dr. Margaret Juarez, an OB-GYN practicing in Los Angeles and President of the California Latino Medical Association. “The earlier that a diagnosis is made, the better the outcome. Cancer screening saves lives.”

Cancer screening rates are lower for low-income Californians, and those with limited English proficiency, according to the study. Uninsured adults are much less likely to get regular cancer screenings, and adults covered by Medi-Cal, which covers cancer screenings, are screened at lower rates than those with employment-based insurance.

“This joint effort of New California Media and the Network of Ethnic Physician Organizations—a collaboration of more than 40 community physician associations in the State—brings together physicians and the media to raise awareness of the benefits of early, regular screening for cancer,” notes Ernie Tai, the California Medical Association (CMA) Foundation director of the project. “Getting screened is a low or no cost preventive health measure, which can dramatically improve the quality of life of our communities.”

The 2001 California Health Interview Survey was conducted in English, Spanish, Cantonese, Mandarin, Korean, Vietnamese and Khmer, with additional interviews with Japanese, Vietnamese, Koreans, South Asians and Cambodians.

New California Media, in collaboration with the California Medical Association Foundation, is launching a campaign in six languages to promote cancer screening among ethnic communities. For more information, go to: ethnicphysicians.org, cancer.org, dhs.ca.gov/cancerdetection, and iccnetwork.org.