

**For Immediate Release:**  
**January 27, 2015**

**Media Contact:**  
**Katie Kiley Brown, NCCN**  
**215.690.0238**  
**brown@nccn.org**

## Access to High-Quality Cancer Care Eliminates Racial Disparities in Survival, Study Finds

---

*A recent Stanford Cancer Institute study shows that adherence to the NCCN Guidelines® for Colon Cancer in an integrated health care setting improves outcomes in all patients, including minorities.*

---

FORT WASHINGTON, PA — African-American people diagnosed with colon cancer have consistently lower survival rates compared with white patients, despite a nationwide decline in colon cancer deaths overall<sup>1</sup>. According to a new study published on January 26, 2015 by *Journal of Clinical Oncology*, this gap in survival rates can be decreased with the delivery of evidence-based care within an integrated health care system, which includes hospital-based care, outpatient services, and rehabilitation.

In this study, investigators from the Stanford University School of Medicine evaluated the records of more than 30,000 patients diagnosed with and treated for colon cancer and compared rates of delivery of care as recommended by the [National Comprehensive Cancer Network® \(NCCN®\)](#) within the [NCCN Clinical Practice Guidelines in Oncology \(NCCN Guidelines®\) for Colon Cancer](#) for patients within integrated and non-integrated health care systems. The study found that all patients, including minorities, treated within integrated health systems received higher rates of evidence-based care and had better overall survival rates.

“For 20 years, the NCCN Guidelines have been recognized as the standard of cancer care in the United States. NCCN combines evidence, experience, and choice so that multidisciplinary cancer treatment teams—including patients—are empowered to make informed decisions about cancer care. NCCN applauds the Stanford researchers for taking a critical look at cancer care from the health care system perspective and recognizing the significance of transparent, evidence-based care,” said Robert W. Carlson, MD, Chief Executive Officer, NCCN.

---

<sup>1</sup> *Cancer Facts & Figures for African Americans*. American Cancer Society, Web. Last Accessed 27 Jan. 2015. <<http://www.cancer.org/acs/groups/content/@epidemiologysurveillance/documents/document/acspc-036921.pdf>>.

## Access to High-Quality Cancer Care Eliminates Racial Disparities in Survival, Study Finds

Available to physicians and patients free of charge at NCCN.org, the NCCN Guidelines® are a comprehensive set of evidence-based treatment recommendations detailing the sequential management decisions and interventions that currently apply to 97 percent of cancers affecting people in the United States. Written by experts from the 25 [NCCN Member Institutions](#), the NCCN Guidelines are continuously updated and revised to reflect new data and clinical information. The intent of the NCCN Guidelines is to assist in decision-making process of individuals involved in cancer care—including physicians, nurses, pharmacists, payers, patients, and their caregivers and families—with the ultimate goal of advancing care so patients can live better lives.

“The big takeaway in this paper is that...following evidence-based guidelines gives all patients the best chance for survival. Our work also suggests a real opportunity to equalize these racial differences,” lead author Kim Rhoads, MD, MPH, Assistant Professor of Surgery and a member of the [Stanford Cancer Institute](#), said in a [news release](#) about the study.

“As a network of 25 of the world’s leading integrated cancer centers, NCCN understands the value of comprehensive cancer care,” said Dr. Carlson. “The high caliber of patient care at these treatment centers is mirrored in the research performed by their investigators, together leading to superior care and outcomes.”

NCCN also publishes a free library of patient-friendly translations of the NCCN Guidelines—NCCN Guidelines for Patients®. Available for 14 cancer types, including colon cancer, the NCCN Guidelines for Patients provide state-of-the-art cancer information in easy-to-understand language so that people with cancer are empowered to discuss treatment options with their care team. The NCCN Guidelines for Patients are available at [NCCN.org/patients](#).

Stanford Cancer Institute is one of the 25 NCCN Member Institutions.

For more information about NCCN, the NCCN Guidelines, and NCCN Patient and Caregiver resources, visit [NCCN.org](#).

###

### About the National Comprehensive Cancer Network

The National Comprehensive Cancer Network® (NCCN®), a not-for-profit alliance of 25 of the world’s leading cancer centers devoted to patient care, research, and education, is dedicated to improving the quality, effectiveness, and efficiency of cancer care so that patients can live better

## Access to High-Quality Cancer Care Eliminates Racial Disparities in Survival, Study Finds

lives. Through the leadership and expertise of clinical professionals at NCCN Member Institutions, NCCN develops resources that present valuable information to the numerous stakeholders in the health care delivery system. As the arbiter of high-quality cancer care, NCCN promotes the importance of continuous quality improvement and recognizes the significance of creating clinical practice guidelines appropriate for use by patients, clinicians, and other health care decision-makers.

The NCCN Member Institutions are: Fred and Pamela Buffett Cancer Center, Omaha, NE; City of Hope Comprehensive Cancer Center, Los Angeles, CA; Dana-Farber/Brigham and Women's Cancer Center | Massachusetts General Hospital Cancer Center, Boston, MA; Duke Cancer Institute, Durham, NC; Fox Chase Cancer Center, Philadelphia, PA; Huntsman Cancer Institute at the University of Utah, Salt Lake City, UT; Fred Hutchinson Cancer Research Center/Seattle Cancer Care Alliance, Seattle, WA; The Sidney Kimmel Comprehensive Cancer Center at Johns Hopkins, Baltimore, MD; Robert H. Lurie Comprehensive Cancer Center of Northwestern University, Chicago, IL; Mayo Clinic Cancer Center, Phoenix/Scottsdale, AZ, Jacksonville, FL, and Rochester, MN; Memorial Sloan Kettering Cancer Center, New York, NY; Moffitt Cancer Center, Tampa, FL; The Ohio State University Comprehensive Cancer Center - James Cancer Hospital and Solove Research Institute, Columbus, OH; Roswell Park Cancer Institute, Buffalo, NY; Siteman Cancer Center at Barnes-Jewish Hospital and Washington University School of Medicine, St. Louis, MO; St. Jude Children's Research Hospital/The University of Tennessee Health Science Center, Memphis, TN; Stanford Cancer Institute, Stanford, CA; University of Alabama at Birmingham Comprehensive Cancer Center, Birmingham, AL; UC San Diego Moores Cancer Center, La Jolla, CA; UCSF Helen Diller Family Comprehensive Cancer Center, San Francisco, CA; University of Colorado Cancer Center, Aurora, CO; University of Michigan Comprehensive Cancer Center, Ann Arbor, MI; The University of Texas MD Anderson Cancer Center, Houston, TX; Vanderbilt-Ingram Cancer Center, Nashville, TN; and Yale Cancer Center/Smilow Cancer Hospital, New Haven, CT.

Clinicians, visit [NCCN.org](http://NCCN.org). Patients and caregivers, visit [NCCN.org/patients](http://NCCN.org/patients).