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### **Colon cancer patients in the Military Health System have significantly better survival, compared to general population**

**Bethesda, Md.** – Bethesda, Md. - Colon cancer patients in the U.S. military's universal health care system, in which care is provided with little to no financial barriers, have significantly better survival compared to the general population, which does not have the same universal access to care, according to a study published June 23 by researchers at the Uniformed Services University's (USU) Murtha Cancer Center Research Program (MCCRP). The improved survival also appeared to benefit black more than white patients, suggesting the importance of reducing financial barriers to care for colon cancer, especially among black cancer patients.

Generally, access to health care has been associated with better health care outcomes. However, little research has looked at whether universal care could translate into longer survival rates for colon cancer in particular – the third most commonly diagnosed cancer. Therefore, USU researchers sought to better understand whether there might be a correlation in their new study, "Comparison of Survival among Colon Cancer Patients in the U.S. Military Health System and Patients in the Surveillance, Epidemiology, and End Results (SEER) Program," published in the American Association for Cancer Research's journal, in *Cancer Epidemiology, Biomarkers & Prevention*.

The researchers examined data from more than 30,000 patients in the Military Health System (MHS) and those in the general population from 1987 to 2013. They used the Department of Defense's Automated Central Tumor Registry (ACTUR) to assess colon cancer patient data in the MHS population, and the National Cancer Institute's Surveillance, Epidemiology, and End Results (SEER) program, to assess the general U.S. population.

"We also looked at the stage at diagnoses, and how that differed between the two populations, to help determine the difference in survival," explained Dr. Craig Shriver, MCC/MCCRP Director and one of the study's authors.

After a medium follow-up time of 56 months for patients in the MHS and 49 months for patients in the general population, the researchers found that MHS patients with colon cancer had an 18 percent lower risk of death, compared to patients in the general population. The lower risk of death was consistent throughout age groups, gender, race, and year of diagnoses. In the MHS population, patients were also 10 percent less likely to be diagnosed in a later phase of the disease (Stages I and II), compared to the general population.

The better survival rates were also more evident among black patients, who typically have poorer colon cancer survival, than white patients. Black patients in the MHS were 26 percent less likely to die of colon cancer than those in the general population. Among white patients, the survival benefit for MHS patients was the same as in the overall study population. They were also 18 percent less likely to die of colon cancer, compared to the general population.

“This study shows that not only are our survival outcomes equivalent to civilian, in this instance of colon cancer, they are better,” Shriver said. “It’s also important to look into this data because disparities in access to medical care influence the survival outcome of cancer patients. We hope that our findings can help address the significance of universal health care, and ultimately lead to better outcomes for this disease.”

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