

Racial Disparities of Survival in Lobular Breast Cancer: A SEER Analysis

LAY ABSTRACT

Purpose: Our study aimed to uncover how survival rates in lobular breast cancer differ among racial groups. Methods: Using the SEER database, we examined data from 22,656 women diagnosed with invasive lobular breast cancer from 1998-2019. We looked at demographic factors, clinical factors such as race, age, cancer characteristics, and treatment. We compared these factors between different racial groups using chi-square analyses and plotted survival curves. We performed a Cox regression model to determine predictors of survival. Results: Among all patients, Black women had higher rates of advanced cancer stages. Comparatively, Asian women were younger, and had higher rates of receiving chemotherapy. Notably, Black patients had worse 5-year survival rates. Radiation was associated with improved survival and interestingly, chemotherapy showed no significant impact. Conclusion: Our data provides important insights into the complex interactions of race, clinical characteristics, and survival outcomes in lobular breast cancer.

INTRODUCTION

Invasive lobular carcinoma (ILC) is the 2nd most common type of invasive breast cancer, accounting for approximately 10-15% of all invasive breast cancer cases. ILC originates in the lobules of the mammary glands and has the propensity to metastasize to unusual sites. Its unique growth pattern, due to the loss of the E-cadherin cell adhesion protein, presents distinct clinical management challenges.

There is limited research on racial disparities and survival in women diagnosed with ILC. Racial disparities in breast cancer outcomes remains a public health concern with the unequal burden it imposes across different racial and ethnic groups, highlighting the importance of further investigations.

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The primary research objective was to examine and identify the **racial/ethnic determinants** of survival in women with lobular breast cancer.

Using the SEER database, we performed a retrospective cohort study of women diagnosed with ILC between 1998 and 2019.

We collected demographic data on race, age at diagnosis, year of diagnosis, marital status, and income. Clinical data included tumour grade, size, laterality, clinical stage, T and N stage, ER/PR/HER2 receptor status, surgery type, chemotherapy, radiation, and cause of death.

Differences between racial groups were assessed using Chi-square tests or one-way ANOVA. Breast cancer specific survival was compared between the racial groups using the Kaplan-Meier method. To identify predictors of survival, Cox-proportional hazard models were constructed.

Statistical analyses were performed using SAS® and P values < 0.05 were considered significant.

Table 1.0 Mean Age of Diagnosis By Race

	n (%)	Mean Age of Diagnosis (SD)
Asian	1476 (6.51)	59.3 (10.81)
Black	1400 (6.18)	59.9 (10.49)
White	19081 (84.22)	58.4 (10.66)
Other/Unknown	699 (3.09)	61.5 (10.40)

OBJECTIVE

METHODS

RESULTS

Total number of individuals in cohort: 22,656

Table 2.0 Demographic and Clinical Data

	White	Black	Asian	Other	P value		White	Black	Asian	Other	P value
Age of diagnosis 30-39 40-49 50-59 60-69 70-79 Marital status	272 (1.43) 2620 (13.73) 4897 (25.66) 6217 (32.58) 5075 (26.60)	31 (2.21) 238 (17.00) 393 (28.07) 427(30.50) 311 (22.21)	34 (2.30) 298 (20.19) 406 (27.51) 413 (27.98) 325 (22.02)	22 (3.15) 139 (19.89) 204 (29.18) 217 (31.04) 117 (16.74)	<0.0001	Income 35,000 – 39,999 40,000 – 44,999 45,000 – 49,999 50,000 – 54,999 55,000 – 59,999 60,000 – 64,999 65,000 – 69,999	63 (0.33) 192 (1.01) 356 (1.87) 908 (4.76) 1143 (5.99) 3734 (19.57) 3117 (16.34)	2 (0.14) 9 (0.64) 24 (1.71) 25 (1.79) 72 (5.14) 432 (30.86) 282 (20.14)	0 (0.00) 1 (0.07) 0 (0.00) 4 (0.27) 18 (1.22) 296 (20.05) 176 (11.92)	4 (0.57) 5 (0.72) 4 (0.57) 16 (2.29) 18 (2.58) 118 (16.88) 84 (12.02)	<0.0001
Divorced Married Never Married Unknown Widowed	2241 (11.74) 11818 (61.94) 2360 (12.37) 650 (3.41) 2012 (10.54)	261(18.64) 522 (37.29) 366 (26.14) 63 (4.50) 188 (13.43)	123 (8.33) 1019 (69.04) 157 (10.64) 46 (3.12) 131 (8.88)	78 (11.16) 410 (58.66) 85 (12.16) 49 (7.01) 77 (11.02)	<0.0001	70,000 – 74,999 75,000+ <35,000 Unknown	1991 (10.43) 7522 (39.42) 50 (0.26) 5 (0.03)	100 (7.14) 447 (31.93) 7 (0.50) 0 (0.00)	30 (2.03) 950 (64.36) 1 (0.07) 0 (0.00)	41 (5.87) 405 (57.94) 4 (0.57) 0 (0.00)	
Cancer grade 1 2 3 Unknown	5185 (27.17) 10002 (52.42) 1554 (8.14) 2340 (12.26)	373 (26.64) 733 (52.36) 151 (10.79) 143 (10.21)	374 (25.34) 837 (56.71) 129 (8.74) 136 (9.21)	169 (24.18) 408 (58.37) 66 (9.44) 56 (8.01)	<0.0001	ER/PR Status ER+/PR+ ER+/PR- ER-/PR+ ER-/PR- HER2	15110 (83.64) 2502 (13.85) 84 (0.46) 369 (2.04)	1071 (81.01) 211 (15.96) 5 (0.38) 35 (2.65)	1125 (79.51) 233 (16.47) 6 (0.42) 51 (3.60)	557 (82.27) 98 (14.48) 5 (0.74) 17 (2.51)	0.0003
Cancer laterality Left Right	9693 (50.80) 9388 (49.20)	721 (51.50) 679 (48.50)	136 (9.21) 741 (50.20) 735 (49.80)	56 (8.01) 369 (52.79) 330 (47.21)	0.6700	Positive Negative Unknown NA	407 (2.13) 8525 (44.68) 222 (1.16) 9927 (52.03)	32 (2.29) 735 (52.50) 25 (1.79) 608 (43.43)	40 (2.71) 775 (52.51) 19 (1.29) 642 (43.50)	20 (2.86) 400 (57.22) 14 (2.00) 265 (37.91)	<0.0001
Cancer size 1 – 1.9cm 2 – 2.9 cm 3 – 4.9 cm	7035 (36.87) 3978 (20.85) 2818 (14.77)	531 (37.93) 296 (21.14) 223 (15.93)	500 (33.88) 357 (24.19) 233 (15.79)	244 (34.91) 150 (21.46) 133 (19.03)	0.0006	Surgery Lumpectomy Unilateral mast Bilateral mast	12178 (63.82) 5259 (27.56) 1644 (8.62)	940 (67.14) 371 (26.50) 89 (6.36)	835 (56.57) 553 (37.47) 88 (5.96)	414 (59.23) 228 (32.62) 57 (8.15)	<0.0001
5 – 9.9 cm <1cm	2084 (10.92) 3166 (16.59)	154 (11.00) 196 (14.00)	143 (9.69) 243 (16.46)	82 (11.73) 90 (12.88)		Chemotherapy Yes No/Unknown	6099 (31.96) 12982 (68.04)	469 (33.50) 931 (66.50)	527 (35.70) 949 (64.30)	247 (35.34) 452 (64.66)	0.0057
Cancer Stage Stage I Stage II Stage III	9974 (52.27) 7204 (37.75) 1903 (9.97)	704 (50.29) 537 (38.36) 159 (11.36)	740 (50.14) 602 (40.79) 134 (9.08)	336 (48.07) 286 (40.92) 77 (11.02)	0.0361	Radiation Yes No Unknown	12046 (63.13) 6673 (34.97) 362 (1.90)	856 (61.14) 497 (35.50) 47 (3.36)	886 (60.03) 568 (38.48) 22 (1.49)	412 (58.94) 271 (38.77) 16 (2.29)	0.0001

Table 3.0 Multivariable Analysis Results

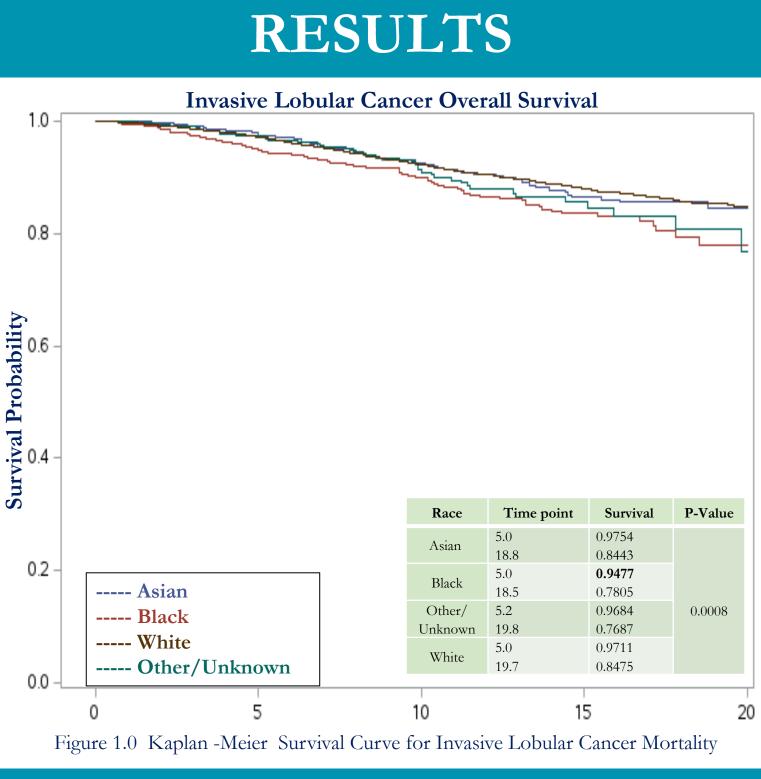
Variables	Final Multivariate	Variables	
	HR (95% CI)	P Value	
Age			Cancer Grade
50-59	1.00		Grade 1
30-39	1.363 (1.005 – 1.848)	0.0463	Grade 2
30-39	1.303 (1.003 – 1.646)	0.0403	Grade 3
40-49	0.984 (0.839 – 1.155)	0.8468	Unknown
			Cancer Size
60-69	1.147 (0.999 – 1.316)	0.0520	<1cm
			1 – 1.9 cm
70-79	1.477 (1.267 – 1.721)	< 0.0001	2 - 2.9 cm
			3 – 4.9 cm
Race			5 – 9.9 cm
White	1.00		
			ER/PR Status
Asian	1.001 (0.804 – 1.246)	0.9928	ER+/PR+
			ER+/PR-
Black	1.361 (1.122 – 1.650)	0.0018	ER-/PR+
		0.50.40	ER-/PR-
Other/ Unknown	1.087 (0.805 – 1.469)	0.5849	NTA
			NA



RESULTS

Final Multivariate Analyses				
HR (95% CI)	P Value			
1.00	-0.0001			
1.370 (1.187 – 1.580)	< 0.0001			
1.728 (1.443 – 2.068)	< 0.0001			
1.362 (1.147 – 1.616)	0.0004			
1.00				
1.808 (1.382 – 2.365)	< 0.0001			
2.735 (2.083 – 3.591)	< 0.0001			
3.809 (2.890 - 5.020)	< 0.0001			
3.798 (2.847 – 5.067)	< 0.0001			
1.00				
1.630 (1.428 – 1.860)	< 0.0001			
1.191 (0.700 – 2.025)	0.5186			
2.196 (1.756 – 2.747)	< 0.0001			
1.082 (0.892 – 1.311)	0.4230			

Variables	Final Multivariate Analyses				
	HR (95% CI)	P Value			
Cancer Surgery					
impectomy	1.00				
lateral mastectomy	0.881 (0.718 – 1.081)	0.2239			
nilateral astectomy	1.042 (0.915 – 1.186)	0.5321			
Chemotherapy					
0	1.00				
25	0.998 (0.879 – 1.132)	0.9733			
Radiation					
0	1.00				
nknown	0.725 (0.495 – 1.064)	0.1001			
2S	0.842 (0.749 – 0.948)	0.0043			



There are differences in clinical presentation of invasive lobular breast cancer according to race. Black women presented with more high-grade, advanced clinical stage, T/N stage, ER+ disease, and had lower rates of unilateral mastectomy than women of other race. Asian women were comparatively younger, had more ER-/PR- ILC, and more likely to receive chemotherapy. Radiation receipt was associated with improved survival while receiving chemotherapy did not affect survival. In women with invasive lobular carcinoma, overall survival for Black woman was significantly lower compared to other racial groups.

Our data provides insight into the complex interactions of race, clinical characteristics, and survival outcomes in lobular breast cancer.

CONCLUSIONS

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