

A scoping review of the association of ethnicity and cancer care pathways within Europe

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Introduction

- A recent Lancet commission was released describing ethnicity as a structural determinant of health.
- Despite knowing that ethnicity is strongly associated with health disparities, relatively little is known about this in the context of cancer within continental Europe, with most existing studies coming from the United Kingdom and United States.

Methods

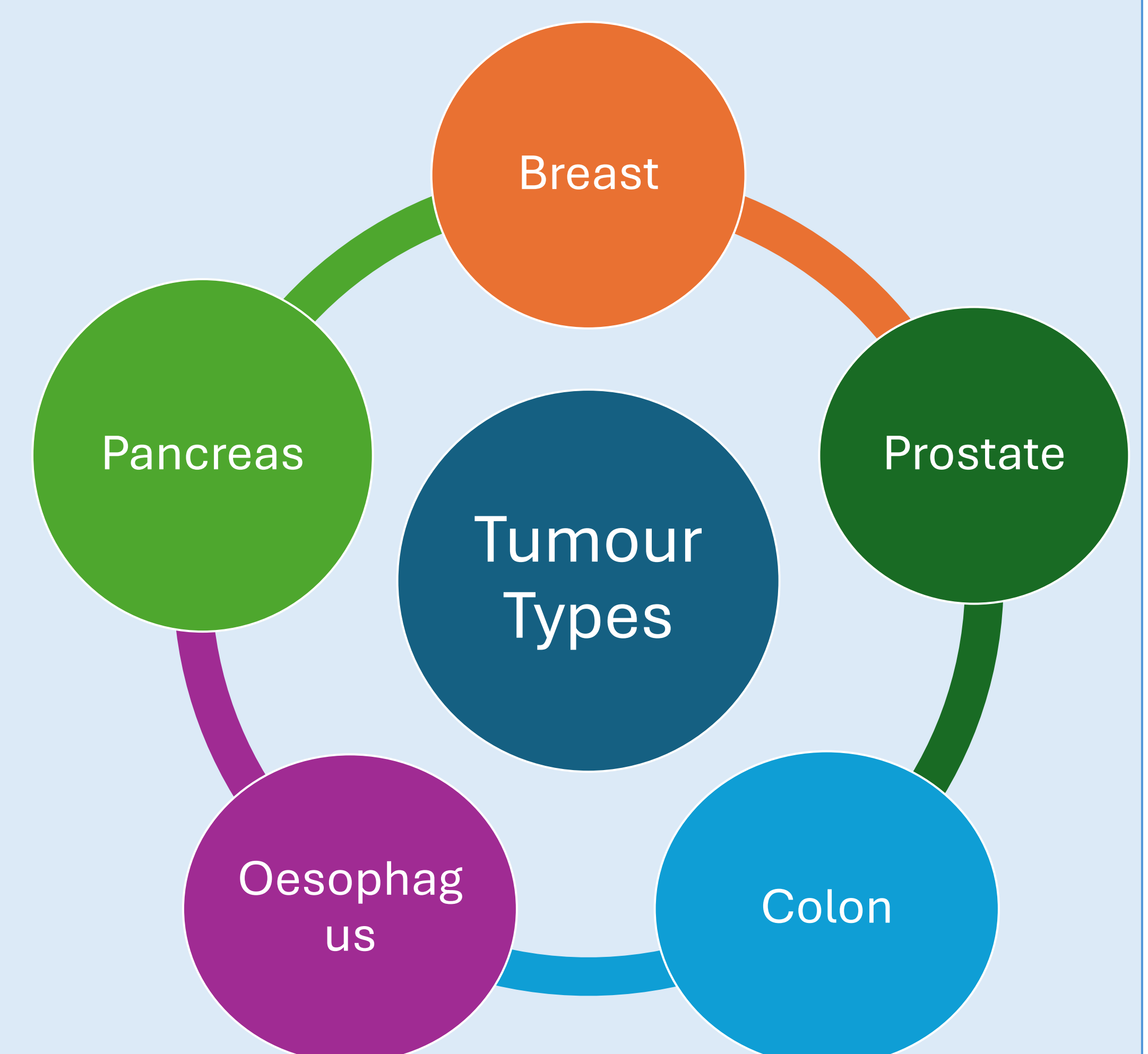
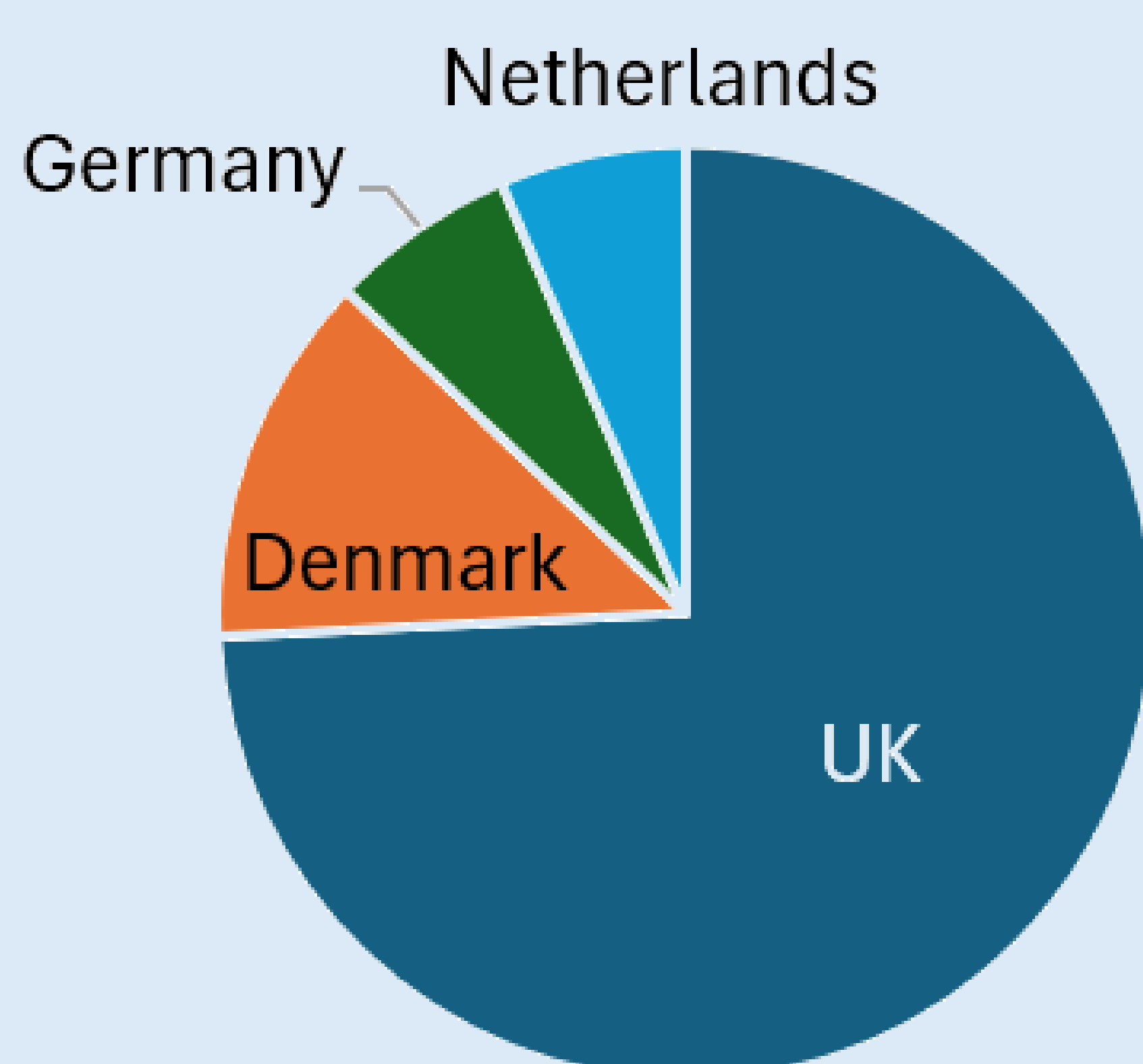
- Embase and Medline were searched using a pre-defined search strategy for all studies published between date of database inception and September 2024.
- Europe was limited to the EU27 countries plus the United Kingdom. Titles, abstracts and full texts were screened and from those deemed suitable for inclusion, data was extracted on the country and the topic of study.

Aim

The primary aim of this scoping review is to better understand the landscape of the studies investigating the association between ethnicity and cancer care from each country in Europe before the formal process of a systematic review is carried out.

Results

- 31 studies were identified
- The majority of studies investigated access to treatments and/or subsequent cancer outcomes (e.g. survival) and how they varied among different ethnicities.
- The next largest group of studies looked at screening uptake (mainly breast screening) with all but one of the studies taking place in the United Kingdom.
- Seven studies (all UK based) looked at patient experience.
- One looked at guideline adherence and one at treatment adherence of patients.



Conclusions

- There is a clear paucity of studies examining the association between ethnicity and cancer care from mainland Europe.
- A systematic review looking at **access**, **treatment/oncological outcomes** and **patient experience**, will highlight specific gaps to help orient where research is needed and ultimately enable policy makers to develop mitigation strategies to address disparities in cancer care leading to health inequalities.

