

Research Addressing Racial Health Disparities in Cardiothoracic Surgery Represents Only a Small Fraction of Total Major Meeting Peer-reviewed Content

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INTRODUCTION

African Americans and Latinos face significant health disparities and institutional racism. Heart and lung disease are leading factors affecting morbidity and mortality in these groups. Notably, lung cancer is the number one killer of African Americans and number two killer of Latinos^{1,2}. African Americans are also less likely to receive surgery for lung cancer than other groups³. As such, cardiothoracic surgeons are uniquely positioned to positively affect these health outcomes, mitigate racial health disparities, and contribute to the efforts towards health equity.

AIM

We sought to determine how often topics related to health disparities and systemic inequities are presented at the most relevant United States annual cardiothoracic surgery meetings.

METHODS

- Specialty-specific annual meeting abstract books were queried between 2015 and 2019.
- We included The Society of Thoracic Surgeons (STS), American Association for Thoracic Surgery (AATS), Western Thoracic Surgical Association (WTSA), and the Southern Thoracic Surgical Association (STSA).
- Abstract titles and content were searched for the following keywords and phrases: “health disparities”, “institutional racism”, “race”, “racial bias”, “racial health disparities” and “racism”.
- If an abstract included a keyword or phrase, it was counted as a racial health disparity abstract.
- The proportion of racial health disparity abstracts was calculated as well as the proportion of abstracts that resulted in manuscript publication.

RESULTS

- A total of 2,992 abstracts were presented at the reviewed cardiothoracic surgery annual meetings between 2015 and 2019 (Table 1).

	Years	Abstracts with Keywords	Total Abstracts Presented	Percent of Total Abstracts
Society of Thoracic Surgeons	2015-2019	11	1,273	0.86%
American Association for Thoracic Surgery	2015-2019	3	1,032	0.29%
Western Thoracic Surgical Association	2015-2019	1	241	0.41%
Southern Thoracic Surgical Association	2015-2019	1	446	0.22%
Overall Totals	2015-2019	16	2,992	0.53%

Table 1: Number of Abstracts with Keywords Presented at STS, AATS, WTSA, and STSA from 2015-2019

- Of these abstracts, the percentage that went on to publication as manuscripts in the meeting-associated journal were: STS 72% (8/11), AATS 66% (2/3), WTSA 100% (1/1) and the STSA 0%.
- Published racial health disparity manuscripts represent 0.36% (11/2,992) of the total number of abstracts presented (Table 2).

Category	Accepted Abstract	Published Manuscript
Adult Cardiovascular	3	2
General Thoracic	8	5
Congenital	1	1
Transplant	1	1
Education	0	N/A
Other (Perioperative Care, Quality Improvement, Economics)	3	2
Total	16	11

Table 2: Category Distribution for each of the Abstracts with Keywords Presented at STS, AATS, WTSA, and STSA and Subsequently Published from 2015-2019

CONCLUSIONS

- Abstracts on racial health disparities in CT surgery represent a very small fraction of total meeting peer-reviewed content, across disciplines.
- There is a significant gap in research to identify and develop best practice strategies to address these disparities and mitigate structural racism within the care of underserved patients with cardiothoracic diseases.
- The lack of disparities research reflected in the cardiothoracic surgical societies’ annual meetings is a missed opportunity to disseminate disparity science and foster innovation within the cardiothoracic surgical community.
- As pivotal players in the leading factors affecting morbidity and mortality for African Americans and Latinos, cardiothoracic surgical societies should implement measures to incentivize submission of disparity work to their annual meetings.

REFERENCES

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