



PHOTO BY JOHN RENNISON, THE HAMILTON SPECTATOR

THE PRICE OF POVERTY

The Spectator's stunning new investigation shows people living in the poorer parts of Hamilton are DYING OF CANCER AT SIGNIFICANTLY HIGHER RATES than people living in the richer parts of the city.

Bill McArthur, 71, has inoperable non-small cell lung cancer. 'You can cry all you want but it ain't going to take it away.' One in six survive a year after diagnosis; he's pushed past that marker.

Disparities continued from // BA4

"I don't care what the cancer's got on its mind, I know what I've got on my mind."

HAMILTON'S cancer problem extends beyond the shocking disparities in mortality rates across the city. There's also the problem of who is getting cancer in the first place.

The Spectator's analysis of cancer data also shows there are significant differences within Hamilton when it comes to the incidence of cancer.

Between 2000 and 2009, the overall incidence of cancer was 14 per cent higher in the lower part of the former City of Hamilton versus the five suburbs averaged together. The overall mortality rate, by comparison, was 44 per cent higher in lower Hamilton than the suburbs.

For colorectal cancer, the incidence rate was 18 per cent higher in the lower city than the suburbs while the death rate was 26 per cent higher.

And when it comes to lung cancer, the incidence rate in the lower city was 80 per cent higher than the suburbs while the death rate was 84 per cent higher.

There's a clear pattern in the numbers.

In every case — men, women, breast cancer, lung cancer, prostate cancer, colorectal cancer — the rates of people dying from cancer are worse than the rates of people getting cancer when the former City of Hamilton is compared to the suburbs. This is particularly so when it's the lower city versus the suburbs.

The discrepancies in cancer rates between the lower part of the former City of Hamilton, which suffers from persistently high pockets of poverty, and the city's five richer suburbs are strikingly evident when Hamilton is compared to Canada as a whole.

The rate of cancer deaths in Hamilton's inner-city core was 40 per cent higher than the Canadian death rate. Compare that to Hamilton's suburbs, where the cancer death rate was about 8 per cent less than the Canadian rate.

The story for men is even more lopsided. In Hamilton's inner-city core, the cancer death rate was 44 per cent higher for men than the Canadian rate but it was nearly 10 per cent lower in the suburbs than the Canadian rate.

With colorectal cancer, the death rate is nearly 21 per cent higher in the lower city than the rest of Canada while the breast cancer death rate in the lower city is about 15 per cent higher than the comparable Canadian rate.

But once again, it's the huge variation in lung cancer rates



PHOTO BY GARY KOKOXAMA, THE HAMILTON SPECTATOR

'When you look at data like this, the first question that comes to mind is equity.'

DR. PETER ELLIS
LUNG CANCER SPECIALIST, JURAVINSKI CANCER CENTRE

that's most frightening, pointing to the heavy burden on health caused by high rates of smoking in the city's poorer neighbourhoods. The issue of smoking in Hamilton will be explored in detail next Saturday in the concluding segment.

The lung cancer death rate was 68 per cent higher in the inner city than the rest of Canada, yet 22 per cent lower in the suburbs than the Canadian rate.

"When you look at data like this, the first question that comes to mind is equity," said Dr. Peter Ellis, a lung cancer specialist at the Juravinski centre. "Is there equity in access to health care? There's no reason to believe there's not equal access to care.

"Is there equal desire for care? Are there other explanations that could contribute to the geographic differences?"

"How do you concentrate, for instance, smoking cessation programs and get them to the people who most need them?" Ellis asked. "I think you always have to understand your population of interest."

IT'S AUG. 19, Janice McFadyen's 45th birthday.

So many friends and family have shown up to celebrate that the party has tumbled out into

the lounge at the hospice. There are flowers, balloons and a birthday cake. Janice is showing off a couple of bracelets she was given.

"I made it to another one," she said with a grin.

It was almost exactly a year earlier she'd been told that her breast cancer had not only returned but had started spreading through her body.

Daughter Rachel was with her when she got the news.

"I knew there was nothing they could do at that point," Rachel said. "As soon as I heard how many cancers there were and how severe it was, I knew it wasn't like the breast cancer before.

"It's pretty final, but I don't think about the time left," she added. "I think about the time we can be doing things and keeping her mind in a positive state, so that's pretty much all I do."

The first time her mother was diagnosed with cancer, Rachel was in Grade 5 and too young to really comprehend what it meant.

"It was kind of like, 'Oh mom's sick, she'll get better,'" Rachel said. "It didn't really hit me back then.

"I didn't really have a clue, actually. Cancer was just a word."

Genetic continues // BA6

WOMEN CANCER DEATHS 2000-2009

