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#### Ethnic and Demographic Differences in Colectomy Rates and Timing for Ulcerative Colitis: 2007-2014

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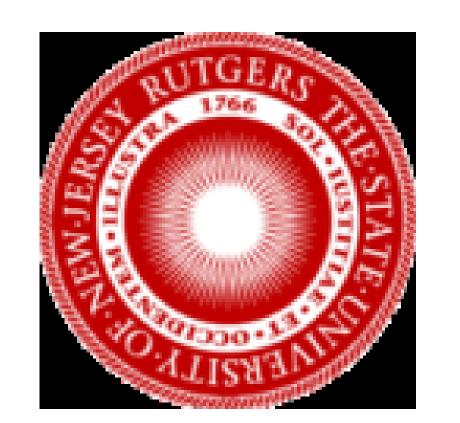
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# Ethnic and Demographic Differences in Colectomy Rates and Timing for Ulcerative Colitis: 2007-2014

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## Introduction

Ulcerative Colitis (UC) is a chronic inflammatory disease of the bowel, with one third of patients requiring a colectomy for fulminant disease and tissue dysplasia. In 2007, infliximab was approved for induction and maintenance of remission in UC, with some evidence to suggest a potential reduction in colectomies. The aim of this study is to examine relative colectomy rates for UC among different ethnicities from 2007 to 2014 in order to evaluate for development of new trends or disparities.

Methods

The data source was the NIS database, from 2007 to 2014. Patients aged 5 years and older with a primary diagnosis of UC were used. Additional variables included race, age, gender, insurance coverage, region, hospital teaching status, hospital size, elective admission status, and zip code income quartile. Odds ratios for colectomy were calculated via logistic regression. Negative binomial regression modeling was used to observe associations between variables and time to colectomy.

Table 1. Number of Colectomies by Variable.

	Variable	Colectomy (Weighted Count)	No Colectomy (Weighted Count)
Race		-	
	White	2864	180769
	Black	151	28700
	Hispanic	228	26858
	Asian/Pacific Islander	23	4571
	Native American	14	1110
Female		2035	150428
Male		2789	133623
iviaie		2109	133023
Age			
	5 -17 years old	299	20433
	18 - 35 years old	1360	86375
	36 - 50 years old	1218	64141
	51 - 64 years old	1151	53224
	65 - 79 years old	684	40923
	80 years and older	126	19418
∐oolth Ir	surance		
пеашт	Medicare	822	683369
		265	
	Medicaid		36140
	Private Insurance	3324	143312
	Self-Pay	132	20577
	No Charge	22	2494
Region			
	Northeast	963	64338
	Midwest	1153	63525
	South	1579	101028
	West	1143	55623
Zip Code	Income Quartile		
- F 3340	1st (Lowest)	734	63210
	2nd	1106	69104
	3rd	1252	71375
	4th	1622	74287
	g Hospital	3747	88783
Non-tead	ching Hospital	1091	83432
Hospital	Bed Size		
2250	Small	351	34414
	Medium	735	70791
	Large	3752	178041
Flective	Admission	3219	47385
	ctive Admission	1614	236425

**Table 2. Colectomy Odds Ratios.** 

		Colcoloniy		<b>.</b>	
	Variable	D.Valore	Odds	95% Confidence Interval	
	Variable	P Value	Ratio	Lower	Upper
Race					
	White		Refe	rence	
	Black	< 0.01	0.630	0.530	0.749
	Hispanic	< 0.01	0.729	0.630	0.844
	Asian/Pacific Islander	< 0.01	0.332	0.219	0.504
	Native American	0.512	0.832	0.480	1.442
Female		< 0.01	0.704	0.655	0.757
Age					
	5 -17 years old		Refe	rence	
	18 - 35 years old	< 0.01	1.317	1.131	1.534
	36 - 50 years old	< 0.01	1.495	1.279	1.747
	51 - 64 years old	< 0.01	1.643	1.403	1.924
	65 - 79 years old	< 0.01	2.102	1.706	2.589
	80 years and older	0.01	1.461	1.095	1.951
Health In	surance				
	Medicare		Refe	rence	
	Medicaid	0.216	1.141	0.926	1.406
	Private Insurance	< 0.01	1.545	1.325	1.802
	Self-Pay	0.068	0.772	0.585	1.020
	No Charge	0.999	1.000	0.535	1.867
Region					
	Northeast		Reference		
	Midwest	< 0.01	0.734	0.653	0.825
	South	< 0.01	0.799	0.724	0.882
	West	< 0.01	1.680	1.523	1.853
Zip Code	Income Quartile	< 0.01	1.085	1.048	1.124
Teaching	Hospital	< 0.01	2.086	1.916	2.272
Hospital I	Bed Size				
	Small		Refe	rence	
	Medium	< 0.01	0.770	0.665	0.891
	Large	0.014	1.168	1.032	1.322
Elective A	Admission	< 0.01	8.144	7.532	8.806

Table 3. Negative Binomial Regression Analysis for Time to Colectomy.

Variable		P Value	Incidence Rate Ratio	95% Confidence Interval	
				Lower	Upper
Race					
	White		Refer	ence	
	Black	< 0.01	2.024	1.614	2.537
	Hispanic	< 0.01	1.295	1.078	1.557
	Asian/Pacific Islander	< 0.01	4.293	2.632	7.002
	Native American	0.256	0.545	0.192	1.551
Female		0.000	1.141	1.036	1.257
Age					
	5 -17 years old		Reference		
	18 - 35 years old	< 0.01	0.525	0.429	0.644
	36 - 50 years old	< 0.01	0.520	0.422	0.641
	51 - 64 years old	< 0.01	0.359	0.290	0.445
	65 - 79 years old	< 0.01	0.682	0.517	0.900
	80 years and older	< 0.01	0.400	0.276	0.581
Health In	surance				
	Medicare		Refer	ence	
	Medicaid	< 0.01	1.690	1.285	2.223
	Private Insurance	0.117	0.847	0.688	1.042
	Self-Pay	< 0.01	1.897	1.343	2.678
	No Charge	0.109	1.843	0.872	3.896
Region					
	Northeast		Refer	ence	
	Midwest	0.368	1.078	0.915	1.270
	South	< 0.01	1.384	1.213	1.578
	West	< 0.01	0.702	0.613	0.804
Zip Code	Income Quartile				
	1st (Lowest)		Refer	ence	
	2nd	< 0.01	0.564	0.481	0.662
	3rd	< 0.01	0.456	0.389	0.535
	4th	< 0.01	0.571	0.492	0.663
Teaching	Hospital	< 0.01	0.760	0.679	0.850
Hospital	Bed Size				
1.6.)	Small		Refer	ence	
	Medium	< 0.01	0.589	0.482	0.719
	Large	< 0.01	0.392	0.330	0.466

## Results

Compared to Whites, the odds ratios of colectomy for Blacks (0.63, 95% C.I. 0.53-0.749, p<0.01), Hispanics (0.729, 95% C.I. 0.630-0.844, p< 0.01), and Asians (0.332, 95% C.I. 0.219-0.504, p< 0.01) were all significantly lower. However, Black (2.024, 95% C.I. 1.614-2.537, p< 0.01), Hispanic (1.295, 95% C.I. 1.078- 1.557, p< 0.01), and Asian ethnicity (4.293, 95% C.I. 2.632-7.002, p< 0.01) were associated with increasing time until receipt of colectomy. Private insurance was associated with higher colectomy rates (1.545, 95% C.I. 1.325-1.802, p< 0.01), as was increasing hospital zip code income quartile (1.085, 95% C.I. 1.048-1.124, p< 0.01).

### Discussion

Discrepancies in colectomy rates and timing are seen in our models which mirror closely findings in a prior study from 1999-2003<sup>1</sup>. The consistency between our findings suggests that the availability of infliximab has not altered the relative differences in surgical management of inpatients of different ethnicities with UC flares. Closer study of utilization and response to UC therapy across ethnic and demographic lines is needed to better elucidate whether such practices are based on true phenotypic differences in disease or bias, as it appears white, wealthier patients continue to more readily and rapidly receive colectomies.

# Reference

1. Nguyen GC, et al. Racial and Geographic Variations in Colectomy Rates Among Hospitalized Ulcerative Colitis Patients. Clinical Gastroenterology and Hepatology 2006; 4: 1507-1513.e1.