Higher Education Is Associated with Lower Cancer Death Rate

Having at least some education beyond high school is associated with a decreased risk of dying from cancer among black and white men and women, according to a study published online September 11 in the *Journal of the National Cancer Institute*.

Race and socioeconomic status are well-established as predictors of cancer mortality in the U.S. Jessica Albano of the American Cancer Society in Atlanta and colleagues used data collected from death certificates and the U.S. Bureau of the Census to examine the associations between education level and mortality rates from lung, breast, prostate, and colorectal cancers. The data included 137,708 cancer deaths that occurred in 2001 among black and white men and women between the ages of 25 and 64.

Higher education levels were associated with decreased cancer mortality among black and white men and white women. The difference in mortality for all groups was greatest between those with 12 or fewer years of education and those with more than 12 years. These differences likely reflect relationships between education and other factors that are more directly associated with risks of developing and dying from cancer, such as tobacco use, cancer screening, and access to healthcare.

Cancer death rates were generally higher among blacks than among whites with the same education level, but they were nearly identical for black and white men with 0 to 8 years of education. “Higher cancer mortality among blacks compared with whites at similar levels of education likely reflects socioeconomic disparities in work, wealth, income, housing, overall standard of living, and access to medical care that are not fully captured by the single measure of [socioeconomic status] available for our analysis (i.e. years of education),” the authors write.

In an accompanying editorial, Sholom Wacholder, Ph.D., of the National Cancer Institute in Bethesda, Md., discusses why this study does not fully answer whether differences in education account for racial disparities in cancer mortality.

“Two unrealistic assumptions are required to extrapolate from the data presented by Albano [and colleagues] to a conclusion that education level explains some fraction of the difference in cancer mortality rates between blacks and whites: first, that we can estimate the effect of race on educational achievement, and second, that we can estimate the effect of increasing a child’s educational level on the child’s subsequent risk of death from cancer,” Wacholder writes.

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