

New Study Identifies Cancer-Specific Racial Inequities in Pain Management

Health Equity

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A new [study](#) of breast, pancreatic, and prostate cancer patients published in May found that clinically meaningful racial differences in time to pain medication initiation and strong opioid prescribing were observed for breast and prostate cancer. Black and Asian patients experienced delays in pain management, and Asian patients consistently received fewer strong opioid prescriptions. The findings highlight that inequities in pain management vary across the type of cancer and categories of pain medication. Moreover, they demonstrate the need for cancer interventions to be more culturally informed to promote equitable symptom management.