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NEWS RELEASE

For Immediate Release

Local Ovarian Cancer Group Underwrites Grant to Study Geographic Disparities in Cancer Care

LOUISVILLE, Ky. (Sept. 19, 2007): When faced with a gynecologic cancer diagnosis, do women in rural Kentucky have access to the same quality of health care as those in Louisville or Lexington? Researchers at the University of Louisville want to know. Thanks to a grant from Ovarian Awareness of Kentucky (O.A.K), an advocacy and education support group for ovarian cancer patients and families, possible disparities will be studied and steps will be taken to ensure all Kentucky women receive quality care when diagnosed with gynecologic cancer.

Studies suggest women diagnosed with gynecologic cancer at a late stage receive better treatment and have higher survival rates when under the care of a specialist in gynecologic oncology. In Kentucky, gynecologic oncologists practice only in Louisville and Lexington. Mary Gordinier, M.D., and Carol Hanchette, Ph.D., researchers at the University of Louisville, Division of Gynecologic Oncology and Department of Geography, respectively, believe access to these doctors is critical to a woman's survival.

With a generous grant from O.A.K. to underwrite their entire study, Dr. Gordinier and Hanchette will study survival rates, stage of diagnoses and physical distance from a cancer center, then determine if lower survival rates correlate with lower socioeconomic status and degree of rurality.

The researchers hope to identify specific areas in Kentucky where increased screening or improved access to sub-specialists are needed and will use that data to focus their outreach efforts. As part of its mission, O.A.K. is dedicated to educating women and the community as a whole about the early warning signs of ovarian and other gynecologic cancers.

Jill Doimer, co-founder of O.A.K., said that finding these geographic disparities and then targeting educational efforts in these rural areas (by O.A.K. and others) will make big strides in saving Kentucky women from gynecologic cancer.

Dr. Gordinier and Hanchette's research also may point to the need for further study to better understand a patient's decision-making strategy in seeking cancer care. Long-term, they hope their findings will lead to better cancer interventions in areas with poor access to care to improve treatment outcomes for those at greatest need of gynecologic oncology services.

"Every woman in Kentucky should receive the best care and treatment when faced with a cancer diagnosis," Doimer said. "This study and O.A.K.'s educational efforts are the first steps in ensuring that happens."

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