Melanoma rates among minorities in Florida differ from national trends

19 July 2010

Racial and ethnic trends in the skin cancer melanoma appear different in Florida than from national estimates, with higher incidence rates among Hispanic men and non-Hispanic black women but lower rates among Hispanic women, according to a report in the July issue of *Archives of Dermatology*.

"In the past several decades, melanoma incidence has increased more rapidly than that of any other cancer," the authors write as background information in the article. An estimated one in 58 Americans will develop melanoma in their lifetime, with lighter-skinned populations more likely to develop melanoma. However, melanoma is more likely to be diagnosed at more advanced stages among Hispanic and non-Hispanic black individuals than among non-Hispanic white men and women, resulting in higher mortality rates.

Melanoma incidence also varies by region, most likely because of differences in exposure to UV radiation. "An analysis of state and national melanoma trends is critical for the identification of high-risk regions of the country," write Panta Rouhani, Ph.D., M.P.H., of the University of Miami Miller School of Medicine, and colleagues. The researchers compared melanoma incidence in the Florida Cancer Data System to national estimates from the Surveillance, Epidemiology and End Results (SEER) databases between 1992 and 2004.

A total of 109,633 patients with melanoma were evaluated, including 36,427 from Florida and 73,206
from the SEER registries. The incidence of melanoma among male Hispanics was 20 percent higher in Florida than in the SEER registries, and female non-Hispanic black individuals in Florida had a 60 percent higher incidence of the disease than the same population in the SEER registries. However, female Hispanic patients living in Florida were 30 percent less likely to develop melanoma than those in the SEER database.

"Although causation of melanoma among non-whites cannot be inferred from descriptive data, we believe that the observed trends in Florida are, in part, attributable to UV radiation exposure. The high UV index of Florida may potentially explain the higher incidence pattern in non-white Floridians compared with their non-white counterparts in the SEER catchment areas," the authors write. Migration differences between ethnic groups may contribute to differences between ethnic groups within Florida; non-Hispanic white individuals may have moved to Florida from areas with lower UV radiation indexes, whereas those immigrating from Latin American countries were likely exposed to more UV radiation at younger ages.

"In conclusion, by comparing national melanoma trends with those obtained from individual states, disparities in melanoma prevention and detection may be uncovered," the authors conclude. "We are hopeful that the analysis of ethnic disparities in melanoma will prompt public health initiatives. The development of educational campaigns on sun safety and skin cancer awareness should be tailored to the unique needs of Florida."

More information: Arch Dermatol. 2010;146[7]:741-746

Provided by JAMA and Archives Journals