

# Demographic Effects on Access to Molecular Testing in Colorado's Patients with Non-Small Cell Lung Cancer

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## Background

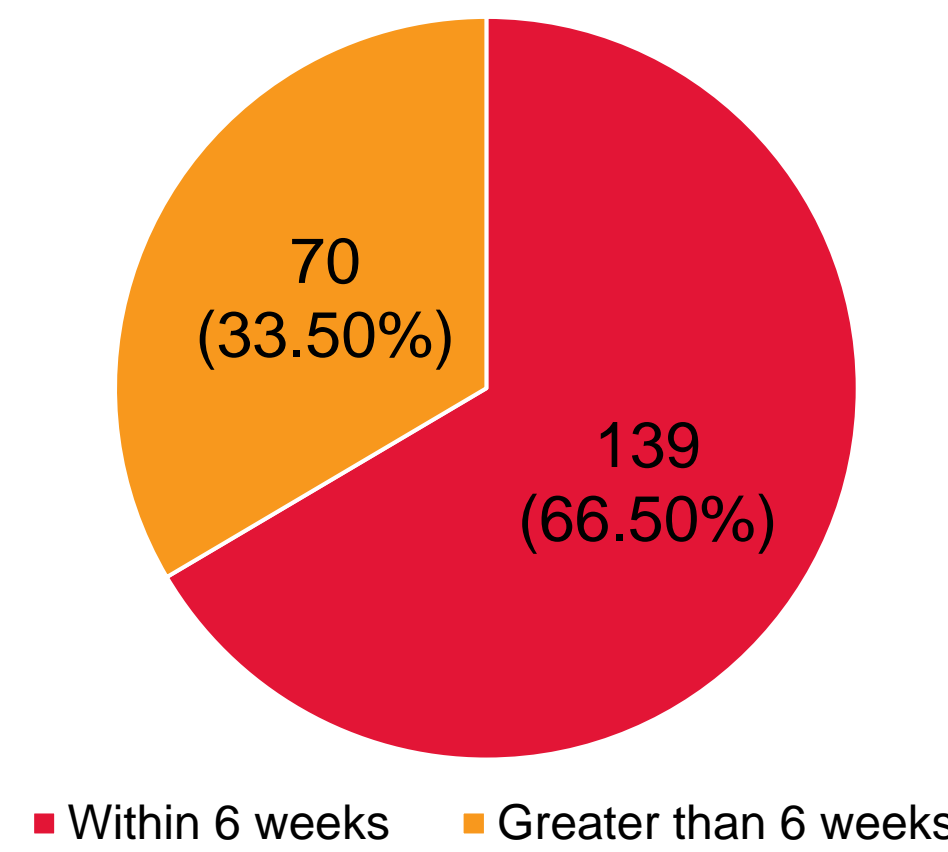
- Lung cancer is at the top of cancer mortality data, responsible for 21.3% of cancer death in 2022. Molecular testing is necessary for treatment plans.
- Populations with low SES shoulder a disproportionate burden of morbidity and mortality and may have less access to molecular testing.
- Insurance status & zip code have been shown to negatively predict testing access.
- More research is needed to describe county-level differences in testing access, which may help explain some of the disparity in lung cancer.

## Methods

- Performing chart review, we collected data from 255 patients who visited the University of Colorado cancer treatment locations.
- Preliminary assessment of variables including date of cancer diagnosis, date of molecular testing, and CCPD Disease Disparity County Index Ranking (low ranking = low disparity index).
- We identified the number of patients representing each CCPD category and compared this trend to the average time to molecular testing overall and in each group.
- A cutoff of 6 weeks was used to separate timely molecular testing from untimely testing.

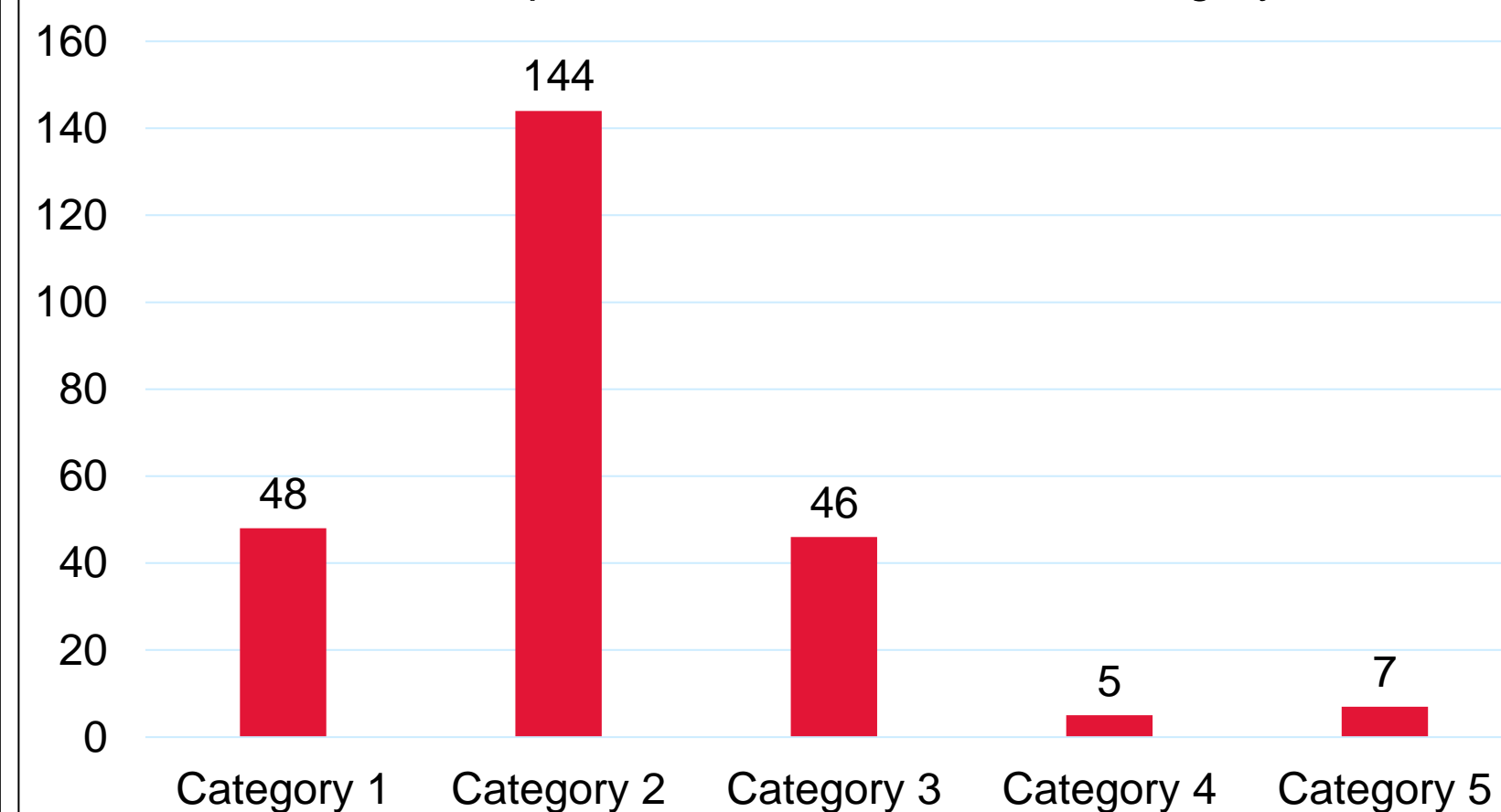
## Results

Number of patients receiving molecular testing within & beyond 6 weeks

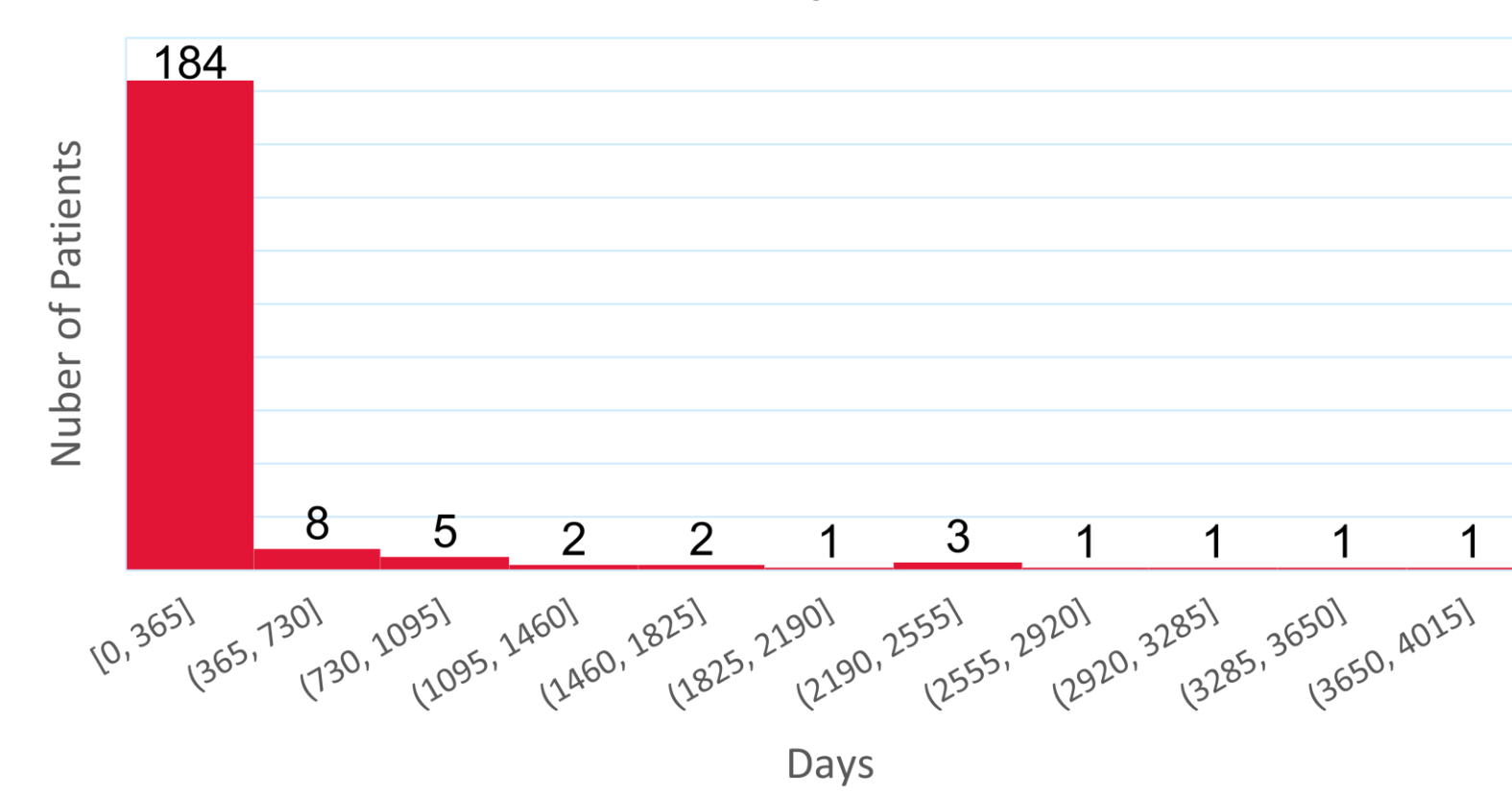


	Mean days to molecular testing
Within 6 weeks	19
Beyond 6 weeks	613
All patients	209

Number of patients from each CCPD category



Number of patients receiving molecular testing in intervals of 365 days



## Conclusions

- Many Coloradans receive untimely molecular testing, but almost all receive it within 1 year.
- More work needs to be done to assess the relationship between CCPD, RUCC, and time to molecular testing.
- Most patients represent lower disparity counties, implying weak relationship between high disparity and delay in testing.

## Implications & Future Directions

- Chart review allows access to more data points which would benefit from further investigation.
- Future studies should examine the relationship between time to molecular testing, date of first treatment, and overall survival.
- Recommendations for intervention based on results.

## Disclosures

Authors declare no conflicts of interest