



The effect of socioeconomic status on treatment of cancer in India

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Abstract

Healthcare is an essential element in the lives of all humans, yet it is controlled by so many factors that determine how it can be delivered. The difference in the social class and economic status of individuals contribute to the disparity in the treatment of some conditions mostly because of the costs incurred and processes required. As for the case of India and its population, the significant factors hindering cancer treatment include late diagnosis of the condition affected by various social beliefs and cultures. On the other hand, while cancer centers do exist, the infrastructure in some regions deters most patients from accessing the services provided. It is also observed that the high numbers of cancer patients exceed that of the oncologists giving them a hard time to manage each as required and expected. Despite the information and rate of literacy among Indian women, breast cancer is prevailing making it a concern to all involved stakeholders. The research conducted on what causes cancer and the reasons it is on the rise has helped healthcare practitioners to come up with relevant solutions that ease treatment and allocation of information. The goal of all cancer centers is to inform individuals of all the cancer causes for them to play a role in prevention. On the other hand, more oncologists are needed, so training as many individuals as possible will help curb the patient: doctor ratio disparity.

Keywords: cancer, India, socioeconomic

Introduction

Cancer has for a long time been considered a fatal disease which renders its victims hopeless. Moreover, assumptions identify the illness as one that only affected the wealthy. Contrary to these, the transformation and advancements taking place in the healthcare system have ensured that diseases like cancer can be managed and treated if diagnosed at an early stage (Reddy 2012) [8]. It is through the extensive and analytical research, technology, and screening that have aided in the efficiency of cancer management and treatment. On the other hand, while the factors that contribute to cancer development have increased, the condition is not limited to a particular group of individuals. India has a significant population hence the socioeconomic status of its people varies from region to region. As reckoned by Singh, Sharma, and Nagesh (2017), a nation's health relies on its citizen's socioeconomic status.

Literature Review

Bhawa Sirohi (2014), indicate that close to one million people are diagnosed with cancer annually in India. The numbers of late diagnosis are higher in rural places and contribute to increased mortality and morbidity. On the other hand, despite the level of literacy in urban dwellers, their busy lives are contributors to late diagnosis of the disease. Fletcher-Brown (2017) affirms this with the rate of breast cancer in Indian women who dwell in urban areas and have emulated western ways of life that have dictated their ability to forgo, Indian culture and engage in a modernized lifestyle. Moreover, Mallath *et al.* (2014) [5], highlights the fact the health

infrastructure in well-developed and has high standards hence can provide quality services to individuals worldwide. On the contrary, the Indian citizens in rural areas have difficulty in accessing the established cancer centers making it difficult for the condition to be treated in time (Kulkarni, Ramesh Masthi & Gangaboraiah, 2013) [3].

Methods

In identifying the relationship between the socioeconomic status of the Indians and the treatment of cancer, various research reports were analyzed to compile the result found. Moreover, interviews were conducted in the cancer centers and society in India to get more information concerning the disparities, challenges and the strengths in of the cancer doctors. The research was also purposed to analyze the most common cancer conditions that keep arising annually, the causes and efforts made to manage it.

Results

The rates of cancer case in India are immense. Reports record close to one million diagnoses of cancer annually. Karim *et al.* (2016) confirm that with the high numbers of cancer patients, the ratio of oncologists to that of the patients is 1:2000. Despite the advancement in cancer treatment, management and availability of expertise, the rate of the patients is still very high making it difficult for physicians to adequately give individualized care. The distribution of the condition is spread in different regions and unequally between the genders. The conventional cancer conditions are lung, stomach, cancer, and

colorectal cancer (Quriesh *et al.*, 2016) [6]. Patients in rural and those with a low income per capita succumb to the disease due to the cost of treatment and their inability to cater.

Discussion

The high rate of stomach cancer is majorly caused by the change in diet especially in individuals living in the urban areas with busy lives that can only have very little time for a

proper meal. Hence, they'd rather have fast foods and snacks (Dey, 2014) [1]. On the other hand, spicy foods are the catalyst to the stomach cancer development. Breast cancer is influenced by the strict culture that hinders Indian women from openly going for check-ups which hinders early detection of the illness and the immense hormonal changes (Rangarajan *et al.*, 2016) [7].

	Cervical cancer	Breast cancer	Oral cancer	Rectal cancer	Colon cancer	Non-Hodgkin lymphoma
Barshi 1993-2000; followed up to 2003	35.1%	55.3%	23.6%	13.0%	NA	25.4%
Bhopal 1991-95; followed up to 2000	30.8%	25.3%	33.9%	4.0%	3.2%	8.8%
Chennai 1990-99; followed up to 2001	60.2%	47.1%	35.6%	NA	NA	21.5%
Karunagapalli 1991-97; followed up to 1999	54.8%	44.8%	42.3%	43.6%	NA	36.0%
Mumbai 1992-94, followed up to 1999; and 1995-99, followed up to 2003	48.2%	43.8%	35.0%	26.1%	25.4%	34.2%

Data taken from Sankaranarayanan and Swaminathan.¹⁴ NA=not available.

Table 1: Age-standardised relative survivals at 5 years for five of the most common treatable cancers in different regional populations of India, with case detection period

Fig 1

Findings

The illness is distributed to all regions despite the socioeconomic status of each household. While there are specialists who are trained and qualified to handle the arising

cancer cases, the number of patients out-weighs the oncologists. The lifestyle change has contributed profoundly to the increase in the cases diagnosed. The condition can be treated when detected early.

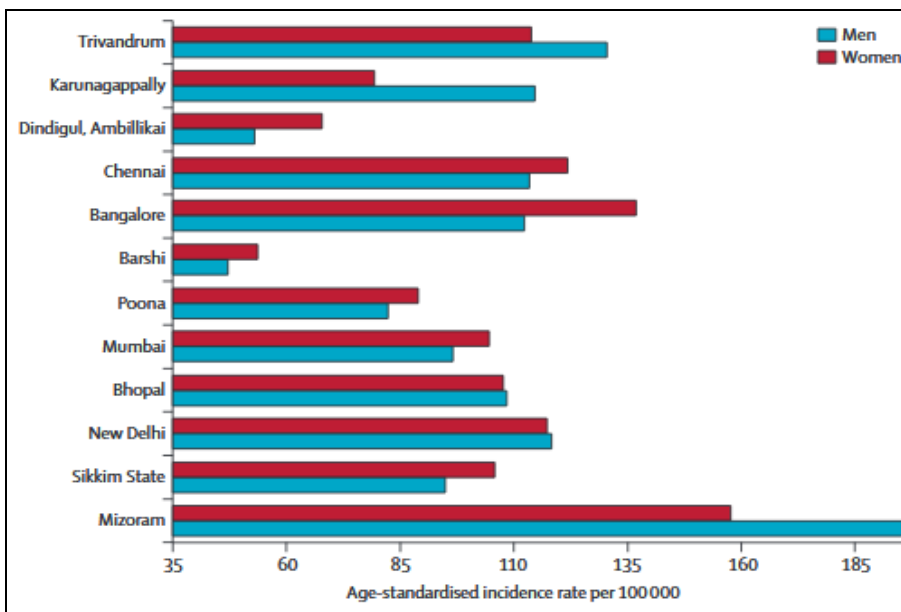


Fig 2

Conclusion

Cancer is a condition that has menaced both its victims and their loved ones. With the transformation taking place in the healthcare system, care for cancer patients and treatment has

been advanced and made efficiently. Despite the social class differences, the later the diagnosis of the condition the harder its treatment becomes.

Acknowledgements

It is with gratitude that I recognize all the specialists who took their time to conduct researches on cancer and made their findings available in books, journals, and web pages.

For all the cancer center personnel who took their time to offer relevant information that has made the research paper a success.

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