Colonoscopy Utilization and Access to Care – Rural Disparities in the Carolinas, 2001-2010

Colorectal cancer is the third most common cancer in the US for men and women combined. In South Carolina, approximately 2,113 people are diagnosed and 816 will die from colorectal cancer each year. North Carolina experiences ~4,129 new cases of colorectal cancer per year and 1,507 deaths. The American Cancer Society has stated that colorectal cancer screening has the ability to prevent 65% of all colorectal cancer cases; however, only 59% of eligible individuals are up to date with their screening. The objective of this study was to identify disparities in colonoscopy utilization and access to care across urban-rural populations in the Carolinas.

Key Findings:

• In 2010, there were 93 and 158 hospitals and ambulatory care centers providing colonoscopy services in SC and NC, respectively. About one-third of colonoscopy centers were located in rural counties in both states.

• In rural SC counties in 2010, 69% of colonoscopy providers were non-gastroenterologists (i.e., general surgeons, internal medicine, family practice or other), as compared to 44% in urban counties.

• Over the years 2001-2010, only 49% of rural residents aged 50-74 received a colonoscopy as compared to 59% of their urban counterparts.

• SC rural residents utilized a facility in their county only 56% of the time, a facility in another rural county 11% of the time and an urban facility 33% of the time.

• Patterns of care-seeking in North Carolina were similar, although slightly fewer rural residents sought or were able to obtain a colonoscopy in their own county (47% in NC vs. 56% in SC).

• Although the majority of SC’s rural counties had a colonoscopy provider available, twice as many rural than urban residents bypassed an in-county provider for one out-of-county, often bypassing local care that did not have a gastroenterologist for an out-of-county provider with a practicing gastroenterologist.