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Food desert residential status and its association with gynecologic cancer survival

Food deserts are defined by the U.S. Department of Agriculture (USDA) as low-income census tracts that lack access to affordable fresh fruits, vegetables, whole grains, low-fat milk, and other foods associated with a healthy diet. We investigated the association between food deserts and gynecologic cancer disease-specific survival. Methods: The 2013-2019 California Cancer Registry (CCR) data set was queried for adult female patients with endometrial, ovarian, or cervical cancers at all stages of disease. Patient 2010 residential census tract at time of diagnosis was linked to food desert census tracts identified by the 2015 USDA Food Access Research data set. Comorbidity status was obtained from patients' hospital discharge data. Five-year overall survival was analyzed by multivariable Cox proportional hazards analysis. Results: Of 40,340 gynecologic cancer cases identified 24,388 (60.5%) had endometrial cancer; 9,777 (24.2%) had ovarian cancer; and 6,175 (15.3%) had cervical cancers. The average age was 59.4 years, 48.0% was White, 50.3% was privately insured. Patients who lived in food deserts had worse 5-year survival compared with those who did not, controlling for race, stage of disease, and treatment received: Endometrial cancer HR 1.43 ($p < 0.001$, 95% CI 1.22-1.68); Ovarian cancer HR 1.47 ($p < 0.001$, 95% CI 1.27-1.69); Cervical cancer HR 1.24 ($p = 0.04$, 95% CI 1.01-1.54). Conclusion: Living in a food desert appears to adversley affect survival time for patients with gynecologic cancers.

Keywords
food deserts, gynecological cancer, cancer survival

Biography: Philip H. G. Ituarte, City of Hope National Medical Center, United States, Philip H. G. Ituarte is affiliated with the City of Hope National Medical Center in the United States, where he contributes to advancing clinical research, academic collaboration, and patient-centered healthcare. His professional work reflects a strong commitment to improving medical outcomes through evidence-based practice, multidisciplinary cooperation, and innovative approaches to patient care.

At City of Hope—a global leader in cancer research and treatment—he plays an active role in supporting clinical programs, research initiatives, and institutional development. His interests include healthcare quality, clinical data analysis, and the integration of research insights into real-world clinical practice. Through his ongoing involvement in academic and clinical activities, he aims to support advancements in medical science and contribute to improved standards of care within the broader healthcare community.