RACIAL DISPARITIES IN CHRONIC MYELOID LEUKEMIA OUTCOMES

C. UGWU[1], U. OKERE [2], E. OBOMANU[1], C. JONES[1], S. KING [1], A. TANEJA[3]
1. Jefferson Einstein Hospital Philadelphia, PA;
2. University of Texas Health Houston, TX;
3. Sidney Kimmel Comprehensive Cancer Center, Jefferson Einstein, Philadelphia, PA

Introduction

Tyrosine kinase inhibitors (TKIs) have transformed the prognosis of CML, yet disparities may persist.
This real-world study compared 3- and 5-year comorbidities and healthcare utilization between Non-Hispanic Black (NHB) and Non-Hispanic White (NHW) patients.

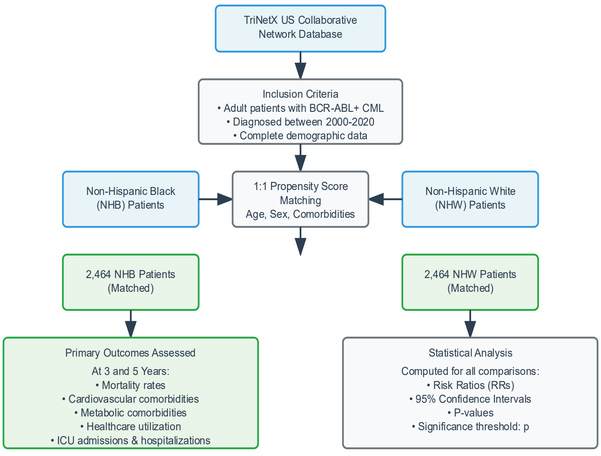
Aim

To investigate racial disparities in long-term outcomes among patients with chronic myeloid leukemia.

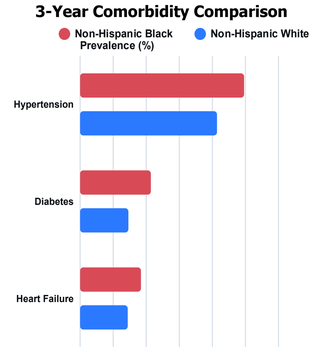
Objectives

To compare 3- and 5-year clinical outcomes between Non-Hispanic Black and Non-Hispanic White patients using real-world data.

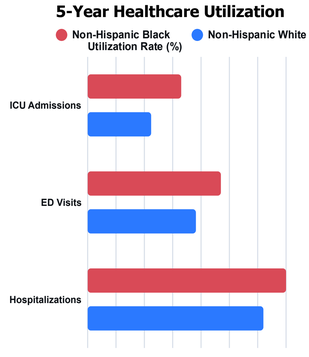
Methods



Results



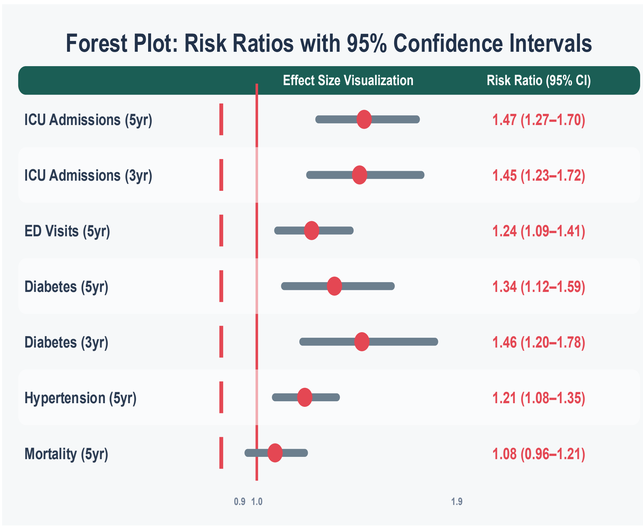
At 3 years, NHB patients showed higher rates of hypertension (25.2% vs 20.8%), diabetes (10.6% vs 7.3%), heart failure (9.1% vs 7.3%), ICU admissions (13.2% vs 9.1%), and hospitalizations (28.3% vs 24.5%).

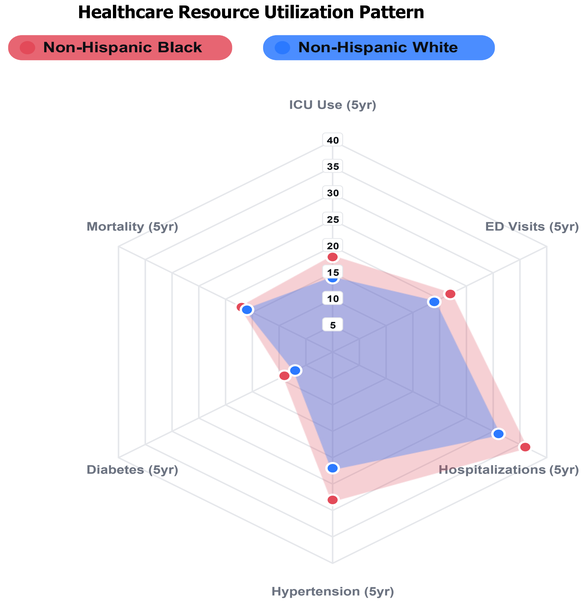


By 5 years, disparities persisted with elevated ICU use (16.6% vs 11.3%), ED visits (23.6% vs 19.1%), and hospitalizations (35.0% vs 30.8%); mortality differences were not significant.

Risk ratio analysis corroborated these trends, with most outcomes favoring the NHW cohort.

Results





Discussion

Non-Hispanic Black patients with CML had consistently higher ICU admissions, hospitalizations, and cardiometabolic complications compared with Non-Hispanic White patients.

These findings underscore the urgent need for targeted strategies to achieve equity in CML care and survivorship.

Summary

4,928 Total Matched Patients	**1.47×** Higher ICU Risk (5yr)	**31.0%** Hypertension Rate (NHB)
75.6% 5 Year Survival (NHB)	**77.9%** 5 Year Survival (NHW)	**p=0.079** Survival Difference (NS)

SOHO2025