

Race, insurer, and hospital location were all significantly associated with a patient's odds of receiving an IR procedure for pain or palliation in the inpatient setting.

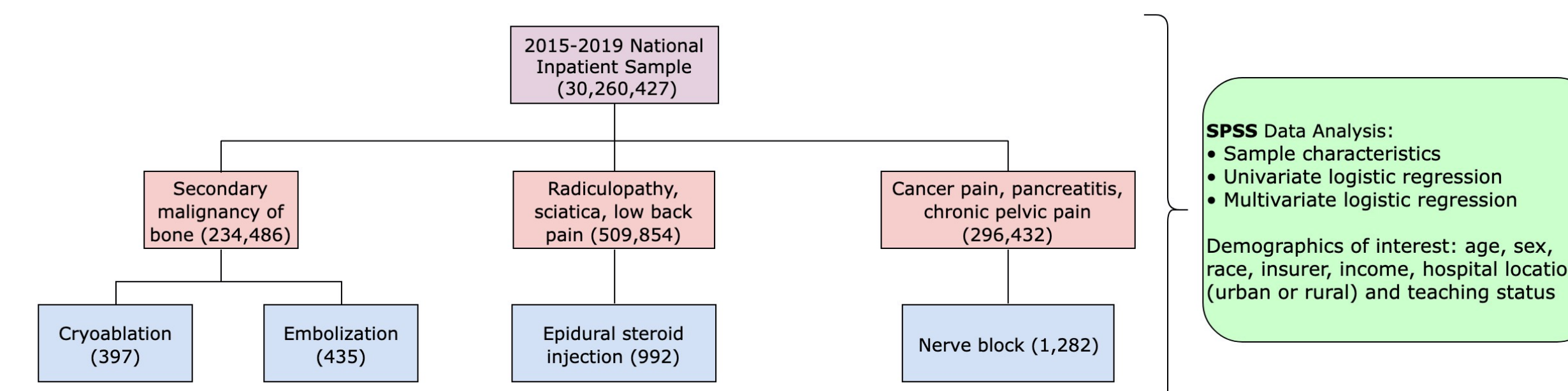
Exploring Socioeconomic Disparities in Minimally-Invasive Interventional Radiology Procedures for Pain and Palliation: A 2015 to 2019 Analysis of the National Inpatient Sample

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BACKGROUND

There exists a growing body of literature aimed at understanding the impact of sociodemographic factors on care and outcomes in the inpatient setting. There is a paucity of research exploring the association between these factors and the provision of interventional radiology (IR) procedures for pain and palliation.

METHODS



RESULTS

- For 3 of 4 procedures, Black patients had between 22-33% lower odds of undergoing the intervention when compared to White patients.
- Patients receiving care at an urban teaching hospital had at least 2 times higher odds of undergoing an indicated procedure compared to patients receiving care at a rural hospital.

DISCUSSION

Our study results show that Black patients have lower odds of receiving an indicated IR procedure for pain or palliation in the inpatient setting compared to White patients. Privately-insured and self-pay patients and those receiving care in urban hospitals had higher odds compared to government-insured patients and patients in rural hospitals, respectively. These results are consistent with those found in the literature. However, further studies will be needed to explore the potential impact on care outcomes.

ACKNOWLEDGEMENTS

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