Incidence and management of hepatocellular carcinoma among Māori and non-Māori New Zealanders

Authors: Chamberlain J et al.

Summary: To examine time trends and ethnic disparities in hepatocellular carcinoma (HCC) incidence, risk factors, comorbidity and treatment pathways, data from Jan 1 2006 to Dec 31 2008 were analysed and identified 97 Māori and 92 non-Māori patients with HCC for hospital note review. Time trends were determined from NZ population (1981–2004) cohorts linked probabilistically to cancer registry records. The incidence of liver cancer was higher in Māori across all time periods. In comparison with non-Māori, Māori males had almost a 5-fold higher rate of liver cancer (RR 4.79; 95% CI 4.14-5.54), while Māori females had a 3-fold higher rate (RR 3.02; 95% CI 2.33-3.92). Tumour characteristics and treatment of Māori and non-Māori patients with HCC did not differ. Hypertension was more common in Māori (51% vs 25%) while cirrhosis was more common in non-Māori (62% vs 41%). Hepatitis B prevalence in Māori patients was double that of non-Māori (56% vs 27%), while the HR for cancer-specific death was 1.36 (95% CI 0.96-1.92) for Māori versus non-Māori.

Comment: This is a timely reminder that hepatitis B, and resultant liver cancer, continue to be major health issues for Māori.


Abstract

Hapū Ora: Wellbeing in the early stages of life

The research report *Hapū Ora: Wellbeing in the early stages of life* was released on 8 November 2013. Hapū Ora draws on life course, epigenetic and social determinants approaches, along with Māori concepts of pregnancy and wellbeing, to identify four key priorities for future Māori maternal health research. The report was developed by Massey University’s Whāriki Research Group and jointly funded by the Ministry of Health and the Health Research Council of New Zealand.

The report is available to download from the Massey University website:

Disclaimer: This publication is not intended as a replacement for regular medical education but to assist in the process. The reviews are a summarised interpretation of the published study and reflect the opinion of the writer rather than those of the research group or scientific journal. It is suggested readers review the full trial data before forming a final conclusion on its merits.

Independent commentary by Dr Matire Harwood

Dr Matire Harwood (Ngapuhi) has worked in Hauora Māori, primary health and rehabilitation settings as clinician and researcher since graduating from Auckland Medical School in 1994. She also holds positions on a number of boards, committees and advisory groups including the Health Research Council.

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