

Clinical Pearls: **Addressing Healthcare Disparities for African Americans**

Insights from the CME Web Series
*Bridging the Gap: Conversations with
Dr. Hall* on Pri-Med.com, hosted by
Gregory L. Hall, MD



In each episode of *Bridging the Gap: Conversations with Dr. Hall* on Pri-Med.com, **Gregory L. Hall, MD**, educates primary care clinicians on different aspects of African American health in order to help improve patient outcomes.

An expert in African American healthcare, Dr. Hall currently serves as an associate professor in both integrative medical sciences and internal medicine at Northeast Ohio Medical Center and as an assistant clinical professor in medicine at Case Western Reserve University School of Medicine. He is also the director of the Institute for African American Health in Cleveland, OH, and recently authored *Patient-Centered Clinical Care for African Americans: A Concise, Evidence-Based Guide to Important Differences and Better Outcomes*, originally published in November 2019.

Included in this review are takeaways from the first four episodes of Dr. Hall's landmark CME series on Pri-Med.com.



Gregory L. Hall, MD

Associate Professor of Integrative Medical Sciences, Northeast Ohio Medical University, Rootstown, OH

Associate Professor of Internal Medicine, Northeast Ohio Medical University, Rootstown, OH

Assistant Clinical Professor in Medicine, Case Western Reserve University School of Medicine, Cleveland, OH

Director, Center for African American Health, Research, Education & Policy, Cleveland, OH

View all *Bridging the Gap: Conversations with Dr. Hall* episodes at www.pri-med.com/bridgingthegap ►

EPISODE 1

Introduction to Patient-Centered Clinical Care for African Americans



Gregory L. Hall, MD

Recorded July 14, 2020

[View the Full CME Course ▶](#)

- ▶ **Life expectancy for African Americans** is below that of Native Americans, White Americans, Hispanic/Latino Americans, and Asian/Pacific Islander Americans
- ▶ Compared to other races and ethnicities, **African Americans exhibit worse outcomes in many diseases** (e.g., cardiovascular disease, diabetes) and cancers (e.g., lung, breast, ovarian, cervical, colon, prostate, pancreatic, liver, thyroid, and head and neck)
- ▶ Health disparities among African Americans are **due to a variety of factors**, including access to care, genetic/epigenetic, patient-related, provider/system-related, and oppression
- ▶ **Historical and cultural differences lead to mistrust** between African Americans and the medical community

EPISODE 2

Cardiovascular Disease and Patient-Centered Care for African Americans



Gregory L. Hall, MD

Recorded August 11, 2020

[View the Full CME Course ▶](#)



Across nearly every metric, African Americans have poorer overall cardiovascular health than do non-Hispanic Whites



Compared to non-Hispanic Whites, African Americans have 1.4 times the risk of hypertension, 1.5 to 2 times the risk of coronary heart disease, 2 times the risk of heart failure, and 3 to 4 times the risk for stroke



African Americans are less likely to achieve blood pressure control than are non-Hispanic Whites



ACE inhibitors and ARBs are less effective in African Americans for blood pressure control



African Americans have much lower NT-pro-BNP levels, and therefore early heart failure could exist in the presence of “normal-looking” levels



African Americans have a 41% lower risk of being diagnosed with atrial fibrillation than do non-Hispanic Whites



Warfarin-dose requirements vary across racial/ethnic groups, with African American patients requiring a higher dose than Whites to maintain a therapeutic INR



African Americans have more favorable lipid profiles than matched White Americans, including having higher HDL cholesterol levels, lower triglyceride levels, and lower LDL cholesterol levels



African Americans have a salt-sensitive gene that may make hypertension worse



75% of all African American patients with hypertension are salt sensitive, compared to 50% across all races with hypertension



African Americans showed the most pronounced blood pressure reductions in response to salt restriction, with a drop of 8 mm Hg systolic over 4 mm Hg diastolic averaged across an array of studies

EPISODE 3

Obesity & Diabetes: Patient-Centered Clinical Care of African Americans



Gregory L. Hall, MD

Recorded September 22, 2020

[View the Full CME Course ▶](#)



African Americans have a significantly increased rate of obesity, which directly correlates with an increased risk for chronic illnesses



African American women have a higher prevalence of obesity and are at a greater risk for weight management problems



African American children with obese parents are 10 times more likely to be obese



African Americans are 80% more likely to be diagnosed with diabetes type 2 than are White Americans, and are also diagnosed at an earlier age



The HbA1c value in African Americans essentially equates to a 0.4% difference (higher) for glucose-matched White patients



African American patients with sickle cell trait have lower HbA1c at any given level



HbA1c is not reliable in patients with sickle cell disease or thalassemia



African Americans should be encouraged to stop smoking, as smoking increases the risk of diabetes in this population

EPISODE 4

Cancer Screening & Hematology: Patient-Centered Clinical Care of African Americans



Gregory L. Hall, MD

Recorded October 20, 2020

[View the Full CME Course ▶](#)

- ▶ Encourage the use of pharmacotherapy in smoking cessation rather than quitting cold turkey, particularly with menthol smokers
- ▶ Perform annual lung cancer screening with low dose CT in adults aged 55 to 80 years who have a 30-pack per year smoking history and currently smoke or have quit within the past 15 years
- ▶ Begin colon cancer screening among African Americans at age 45 and avoid sigmoidoscopies due to an increased prevalence of right-sided polyps and tumors
- ▶ Screen African American men with an annual PSA and be aware that levels above 2 convey increased risk as well as accelerating increases within the normal range
- ▶ The PSA test is a better and more sensitive detector of prostate cancer in African Americans, and at any given PSA level they are at a higher risk for prostate cancer than are White Americans
- ▶ African Americans may have significantly lower values in WBC, neutrophil count, monocyte count, and platelets
- ▶ African Americans may have significantly lower values in hemoglobin (HGB), hematocrit (HCT), mean corpuscular hemoglobin (MCH), and mean corpuscular hemoglobin concentration (MCHC)
- ▶ Benign ethnic neutropenia (defined as between 1.0×10^9 cell/Liter and 1.5×10^9 cell/Liter) has increased prevalence in African American patients
- ▶ African Americans may have lower TSH levels with a range of 0.37 - 3.46 mIU/L (compared to "overall" reference interval 0.512 - 5.22 mIU/L)
- ▶ The lipid profile in African Americans is generally more favorable with a higher HDL and lower total cholesterol, LDL, and triglycerides
- ▶ Subtract 0.4 from the HbA1c in African Americans



Pri-Med has been a trusted CME/CE provider for 25+ years, offering free online courses and affordable in-person education to primary care clinicians across the U.S. We recognize it is critical that you have access to timely, reliable information, so we publish new online courses and host live virtual programs each week on Pri-Med.com to help you provide the best patient care during this time.

Explore the full *Bridging the Gap: Conversations with Dr. Hall* CME series ►

Earn CME/CE credits with Pri-Med at no cost today ►