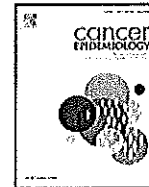




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## Letter to the Editor

### In response to the letter by Dr. Karen Freund

We thank Dr. Freund for her excellent letter [1] in response to our recent article describing the racial disparities in breast cancer mortality in the 25 biggest cities in the United States [2]. We agree with her entirely that any biological notion of "race" could not possibly explain the widely diverse array of racial disparities across these cities. For example, are the genes of black women in Chicago different from those in New York City? Also, as we have noted in a previous publication, this racial disparity has just manifested itself rather recently, in the early to mid 1990s [3]. Is there a hypothesis that a genetic shift took place about then?

No, clearly this disparity is a function of social and structural factors like racism and poverty, what Link and Phelan refer to as "fundamental causes" [4].

Despite what should be clarity on this matter, we still find any number of papers asserting that it is nonetheless some notion of biological race that is responsible [5-7], often relying, as pointed out by Kaufman and his colleagues, on bogus notions explained instead by residual confounding [8]. As Cooper and his colleagues have so eloquently pointed out, "The correlation between the use of unsupported genetic inferences and the social standing of a group is glaring evidence of bias and demonstrates how race is used both to categorize and rank order subpopulations" [9]. Sankar and her group make a similar point [10].

Biological race has been cited as the cause of racial disparities in everything from diabetes to hypertension to breast cancer. In fact, this type of attribution was responsible for the infamous Tuskegee "syphilis experiment" which had as its foundation the belief that syphilis was physically different in black people than white people [11].

So we make this simple proposal. Instead of turning to biological race as an explanation let's first assure equal access to mammography, quality treatment and social support and then examine racial disparities in breast cancer mortality.

### Conflict of interest

None declared.

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