Community Outreach and Awareness and its Potential for Mortality Reduction, with a Focus on Breast Education

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Disclosures

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The authors have nothing to disclose.
Presentation Outline

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Background

• The lifetime probability of being diagnosed with invasive breast cancer is 12.3% (1 in 8) women, and it is the second-leading cause of cancer deaths in women in the United States [1,2].

• Combined results from randomized controlled screening trials suggest that mammography reduces the risk of dying from breast cancer by about 20% [1].

• Breast cancer survival is lower among women with more advanced stage at diagnosis, and thus utilization and adherence to mammography screening guidelines should be increased in order to reduce morbidity and mortality due to breast cancer [1,2].
Background

- The effectiveness of mammography in detecting breast cancer at an early stage depends on adherence of women to mammography screening guidelines [1].

- Poverty, less education, and lack of health insurance are associated with lower breast cancer survival [2].

- Breast cancer patients living in low-income areas have lower 5-year survival rates than those in higher-income areas at every stage of diagnosis [2].

- One intervention that has been reported to overcome barriers and improve mammography screening rates, thus reducing morbidity and mortality, is the use of mobile mammography [2].
Introduction

• Rutgers University Hospital primarily serves a population for which access to healthcare may be limited, secondary to language barriers, income, immigration status etc.

• The New Jersey Early detection screening program (NJCEED) provides comprehensive screening services for breast, cervical, prostate and colorectal cancer.

• As part of this project, the Rutgers University Hospital S.A.V.E. (Screening Access of Value to Essex women and men of Essex county, NJ brings education, screening, and follow up to patients who may not otherwise have access to adequate healthcare.)
Introduction

• Services include routine cancer screenings, examinations done on site, evaluation of symptoms, mammography and PAP smear tests performed in a mobile van unit, follow-up testing and treatment for abnormal results at various community locations or at University Hospital.

• Immediately prior to receiving testing, patients attend brief educational sessions given by SAVE staff members which include life-sized models of the breast and cervix, and reinforce the importance of screenings.

• This study is focused on mammography screenings.
Purpose

Demonstrate the benefit of having a community outreach program for mammography screening with a focus on education, outreach and access to an underserved population.

Mobile mammography screening unit utilized by the SAVE program.
Methods

In order to qualify for free breast screening and/or free diagnostic examinations and follow-up from the SAVE program, breast cancer screening patients met the following eligibility criteria:

- Women Age > 40, age< 40 with strong family history or symptoms
- Resident of Essex county
- Limited or no health insurance
- Income eligible according to federal poverty guidelines
Methods

- In order to determine the usefulness of a community outreach program, we retrospectively obtained the number of invasive breast cancer diagnoses by using data directly collected by the SAVE program.

- Data pertaining to the number of invasive breast cancers diagnosed at Rutgers University hospital was then obtained from our institutional cancer registry for comparison.
**Results**

- Total number of patients that received breast screening at Rutgers University Hospital from 1/1/2006 to 1/1/2016: (N=49,798)
- Total number of patients diagnosed with invasive breast cancer at Rutgers University Hospital: (N=576 or 1.1%)
- Number of patients who received screenings through the SAVE program: (N=13,302 or 26.7%)
- Patients diagnosed with invasive breast cancer through the SAVE program: (N=133 or 23%)
Conclusion

- Community outreach programs such as SAVE are particularly beneficial in regions of low socioeconomic status or in populations with limited access to adequate medical care.

- A significant proportion of patients diagnosed with invasive breast cancer over a 10 year time period at our institution were diagnosed through the Rutgers University Hospital SAVE program, potentially reducing patient mortality in this underserved population.
Thank you!

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References