

# Kylie's breast cancer triggered a surge of over 30 percent in breast imaging of low-risk women

June 4 2008

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Kylie's breast cancer triggered a surge of over 30 per cent in breast imaging of low risk women, says new University of Melbourne study.

Use of mammography and breast ultrasound procedures soared by over 30 per cent among women aged 25-44 in the six months following Kylie Minogue's breast cancer diagnosis, says a new study from the University of Melbourne.

There was also a sharp rise in the number of women aged 25-34 years who underwent breast biopsies – but this surge in screening activity did not lead to the detection of more cases of breast cancer.

The study, published this week in the *International Journal of Epidemiology*, is the first to use Medicare data to examine the impact of the intense publicity that surrounded this announcement on breast imaging, biopsies and operations to remove breast tumors.

Study leader Dr Margaret Kelaheer, from the University of Melbourne's Melbourne School of Population Health, and colleagues found that in the six months following Minogue's diagnosis in April 2005:

- Breast imaging in 25-34 year old women rose by 33 per cent;
- Breast biopsies in women 25-34 increased by 46 per cent;
- Breast imaging in women aged 35-44 rose by 25 per cent;

-- Biopsies in women aged 35-44 increased by 37 per cent.

However, the rates of operations to remove breast cancers did not change significantly, suggesting that the flurry of screening activity led to many "false positives".

"Raising women's awareness of the need to get screened is a generally good thing," Dr Kelaher said.

"But these findings suggest that thousands of additional imaging procedures and biopsies did not improve breast cancer detection among young women.

"It appears there has been a situation where publicity has led to many low risk women using – and probably overusing – screening services.

"We need to improve the targeting of health messages and the confidence of women and their doctors in early breast cancer detection recommendations."

Dr Kelaher said the publicity could have raised doctors' perception about breast cancer risk and increased concerns, both medical and legal, about missed diagnoses in younger women.

The researchers also suggest that the influx of low-risk women into the screening system may have damaging effects by reducing the system's capacity to deal with higher risk women.

Dr Kelaher said Kylie Minogue had been a great ambassador for breast cancer awareness, but the publicity surrounding her case highlighted the need for better efforts at "managing the message."

"The visibility of a celebrity's illness provides an opportunity to address

a huge health problem like breast cancer," she said.

"But when that celebrity is from a low risk group, it also has the potential to undercut the appropriateness and cost effectiveness of health service delivery.

"Consultation between a celebrity's PR team and public health agencies on how to shape and disseminate the information could help create a message with the best chances of furthering the quality of care and sound public health practice."

Dr Julie Miller, consultant surgeon at the Royal Melbourne Hospital and senior lecturer in the Department of Surgery at the University of Melbourne, is a co-author of the study.

"It's important that women are breast-aware, and consult their doctor if they are concerned about any changes in their breasts," Dr Miller said.

"However there is no role for routine screening of women under 40 who do not have symptoms or a strong family history.

"This study shows that all the extra worry and expense was unwarranted and that the current recommendations for breast cancer screening are appropriate."

Source: University of Melbourne

Citation: Kylie's breast cancer triggered a surge of over 30 percent in breast imaging of low-risk women (2008, June 4) retrieved 3 May 2024 from

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