

Although more older women receive breast-conserving therapy, gaps in treatment exist

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According to a new study published in the October issue of the *Journal of the American College of Surgeons*, although breast-conserving surgery (BCS), commonly known as lumpectomy, is increasingly being used to treat older women with nonmetastatic invasive breast cancer, there are still significant socioeconomic and geographic disparities in the use of this type of therapy. For example, women in the Northeast and Pacific West are significantly more likely to receive BCS than those in the South and parts of the Midwest.

In BCS, only a part of the affected breast is removed, whereas a mastectomy involves removing all of the breast tissue, sometimes along with other nearby tissues. Combined with radiotherapy, BCS is as effective as a mastectomy for treatment of early invasive [breast cancer](#). Yet despite the large body of evidence supporting the efficacy of BCS, studies conducted in the last two decades reported that less than half of all surgically treated patients with nonmetastatic invasive disease received BCS.

"Treatment of nonmetastatic invasive breast cancer has improved significantly over the past several decades, but we continue to fall short of the goal to treat every woman with the highest quality care," said Grace L. Smith, MD, PhD, Postdoctoral Fellow, Department of [Radiation Oncology](#), The University of Texas M. D. Anderson Cancer Center. "Our study suggests that barriers exist that may prevent many women with breast cancer - especially those in poorer areas, areas with low education levels, rural communities and counties with few radiation

oncologists - from being offered every treatment option that should be available to them."

Using a national Medicare database, researchers identified women age 65 years and older who were surgically treated in 2003 for invasive breast cancer. Claims codes identified demographic, treatment and geographic region covariates. The 2003 Area Resource File provided socioeconomic data.

Of 56,725 women in the database, 59 percent were treated with BCS versus 41 percent with [mastectomy](#). BCS was more widely used in women who were younger than 70 years (odds ratio [OR], 1.37; p

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