

Researchers find that most Medicare patients wait weeks before breast cancer surgery

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Although patients may feel anxious waiting weeks from the time of their first doctor visit to evaluate their breast until they have breast cancer surgery, new findings from Fox Chase Cancer Center show that these waits are typical in the United States. Results were published on Monday, November 19 in the *Journal of Clinical Oncology*.

Looking at data collected from more than 72,000 [Medicare patients](#) diagnosed with non-[metastatic breast cancer](#), researchers—led by Richard J. Bleicher, M.D., attending surgeon and director of the Breast Fellowship Program at Fox Chase—found that, in 2005, half of the [breast cancer patients](#) underwent [breast cancer surgery](#) at least 32 days after first consulting their doctor about their breast problem. This is an increase from 1992, when half of the patients waited no more than 21 days.

"For many [Medicare](#) patients, it can take a month or more from the time they first see their doctor to evaluate their breast concern, make a diagnosis, and get them to the [operating room](#)," says Bleicher. "So if a woman learns that her surgery date is weeks after her evaluation, where she was found to have a breast cancer, she should know this length of time is typical, and should not be concerned."

"Although this interval may sound alarming at first, it does not appear to have a detrimental effect on outcomes. We don't have the outcomes data for this group of patients yet, but we have seen improvements in survival over the past few decades in breast cancer overall." Bleicher adds.

Before this study, Bleicher explains, it was unclear how long people were actually waiting for surgery and how the surgery type and workup affected that wait. Experts had data from individual institutions, but nothing that captured [waiting times](#) nationwide. So when patients got anxious hearing their surgery was weeks away, doctors were unable to tell them whether such [wait times](#) were longer than the norm, and thus potentially dangerous.

"It's not clear why people are waiting longer for surgery," says Bleicher. Now that patients have access to more information about cancer, they may take longer to make decisions about surgery; alternatively, a larger patient population could be filling operating rooms, making it harder to schedule surgeries. Indeed, patients undergoing more complicated procedures—such as mastectomy with breast reconstruction—waited longer than average.

Longer delays were also seen in patients who received certain types of biopsies and imaging. This suggests that part of the increase in wait time may stem from greater use of a wider variety of current tools to detect and image the tumors before surgery, says Bleicher. This may also explain why patients may be living longer, even though the time from presentation to their doctor until surgery steadily increased from 1992 to 2005.

"Patients should be aware that even though [breast cancer](#) feels like an emergency needing to be addressed tomorrow, it doesn't have to be dealt with in a matter of days," says Bleicher. "These results should reassure women that, if they are not in the operating room tomorrow, that's typical."

He adds that the findings apply only to patients receiving Medicare, and wait times may differ for those with private insurance or no insurance at all.

Even within the Medicare population, there was some variation – wait times were longer for women (29 days, versus 24 days for men), younger patients (29 days), blacks and Hispanics (37 days each), people living in large metropolitan areas and the northeast (32 and 33 days, respectively).

"Although these results suggest that doctors and [patients](#) shouldn't be concerned about small delays in getting to surgery, we need to continue to monitor how long people are waiting," says Bleicher. "Researchers must ensure that this time interval doesn't increase dramatically or start to affect outcomes in certain patient groups, particularly those who already wait longer than the average."

Provided by Fox Chase Cancer Center

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