

Women with severe, chronic health issues are screened for breast cancer less often

August 22 2014

Women with severe disabilities and multiple chronic conditions are screened for breast cancer less often than women with no disabilities or no chronic conditions, a new study has found.

They are also screened less often than women with moderate <u>disabilities</u> or women with only one chronic condition, according to Dr. Sara Guilcher, an affiliate scientist with the Li Ka Shing Knowledge Institute of St. Michael's Hospital.

Dr. Guilcher said women with disabilities often have other measures of social vulnerability, such as low income and low education levels.

Her research, published in the journal *Preventive Medicine*, is consistent with other studies showing that low income and education were also associated with lower <u>breast cancer screening</u> rates. Previous research has also shown that having a certain level of disability is associated with higher breast cancer screening rates, perhaps because those women have more frequent contact with the <u>health</u> care system.

However, in contrast to previous research, this study identified higher screening rates for women with moderate disabilities compared to those with severe disabilities – who also have greater contact with physicians than other women with no disabilities.

"Despite the presence of a universal health insurance system in Ontario, our research highlights the persistence of significant health disparities in



breast cancer screening, particularly for women who are more vulnerable due to severe disability, multiple chronic conditions, low income and lower education," said Dr. Guilcher, who has a PhD in Clinical Epidemiology at the Institute of Health Policy, Management and Evaluation, University of Toronto.

The highest rate of screening was 75 per cent, which was among women with moderate level of disability and one <u>chronic condition</u>. Women with severe disability, across levels of chronic conditions, had the lowest rate of breast <u>cancer screening</u> at 61 per cent. Women with two or more chronic conditions were screened particularly less often.

"Women who are at a lower socioeconomic position may be less likely to be assertive and to be strong advocates for their health care management," said Dr. Guilcher.

Dr. Guilcher noted that in Ontario, women can refer themselves to the Ontario Breast Screening Program, which sends them reminders of when they are due for mammograms and can provide results at the same time the test is done. Further research could explore the demographics of the women who enrol in this program, she said.

Dr. Guilcher said that worldwide, <u>breast cancer</u> is the most prevalent cancer among women and the second leading cause of cancer-related deaths. Deaths have significantly dropped due to advances in prevention and treatment. In Ontario, mortality rates fell 37 per cent for women between the ages of 50 and 74 between 1990 and 2009.

Her study was done in conjunction with the Institute for Clinical Evaluative Studies (ICES), based on health records of 10,363 <u>women</u> in Ontario ages 50-69 whose health records are stored in databases at ICES.



Provided by St. Michael's Hospital

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