

Women at high risk for breast cancer more likely to get MRI when informed directly

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How the recommendation for additional breast screening is communicated may influence rate of follow-through. Credit: CU Anschutz Medical Campus

A study published in the journal *Health Communications* shows that women at high risk for breast cancer who received a letter informing them of their options for additional imaging with contrast-enhanced MRI of the breast (in addition to a letter sent to their primary care physician) were more likely to return to the center for additional screening with MRI. The letter, which is included in the published paper, may help breast imaging centers navigate the complex legal, ethical and institutional landscapes in a way that increases the likelihood that women will follow through with American Cancer Society breast cancer screening recommendations for adjunct breast screening in women at elevated risk.

The project is a collaboration between Invision Sally Jobe Breast Centers, which contributed the de-identified data, and researchers from the University of Colorado Cancer Center, University of Colorado School of Medicine Department of Radiology and the Colorado School of Public Health.

"Invision Sally Jobe Breast Centers screen about 65,000 women every year for [breast cancer](#) and some of these women are at high risk. When Invision Sally Jobe Breast Centers adopted the American Cancer Society recommendations for breast cancer screening, they first only informed referring physicians. Invision Sally Jobe Breast Centers later went on to adopt the practice of informing women of these recommendations directly, in addition to the physicians. So we have a natural experiment where we can compare the two methods of communication," explains Deborah Glueck, PhD, the paper's senior author. Dr. Glueck is a CU Cancer Center investigator and associate professor of radiology and biostatistics at the Colorado School of Public Health.

The paper compares rates of follow-up MRI for women found to have greater than 20 percent risk according to the widely used Gail model risk assessment. The study was split into two periods - one in which the recommendation for additional screening was communicated via letter only to a woman's primary care physician, and one in which recommendations were communicated via letters to both the woman and to her primary care physician. When women were sent a letter informing them of the American Cancer Society additional breast screening recommendations for women at elevated lifetime risk, follow-up screening with breast MRI increased significantly.

"In an earlier study, we noticed that only a small percentage of women were coming back for MRI. This paper is the result of us wondering why," says John Brinton, PhD, assistant research professor at the Colorado School for Public Health, the paper's first author.

However, the researchers point out that their results do not necessarily prove that direct communication caused the increase in follow-up screening. Because this was an observational study, the increase in follow-up screening could have been due to unrelated factors - what the researchers call "secular trends" - such as current events or changes in culture that could have influenced attitudes about MRI screening in these high risk patients.

"We show that this kind of communication is associated with an increased rate of women returning for breast cancer screening with MRI," Glueck says. "But the thing I really care about is whether risk assessment, good communication and [breast cancer screening](#) actually save lives, or just cause harms from additional screening."

This is the central question of Glueck and Brinton's continuing line of research. Just now, with data collection pre- and post-adoption of ACS guidelines by many thousands of patients at the Invision Sally Jobe Breast Centers, and with the hope for continued research funding, the team may be able to gather the resources needed to answer Glueck's larger question.

More information: John T. Brinton et al, Informing Women and Their Physicians about Recommendations for Adjunct Breast MRI Screening: A Cohort Study, *Health Communication* (2017). [DOI: 10.1080/10410236.2016.1278499](#)

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