

# Real-time mammography reading cuts disparities in diagnostic imaging

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(HealthDay)—An immediate-read screening mammography program

reduces racial and ethnic disparities in same-day diagnostic imaging after abnormal screening mammograms, according to a study published online Sept. 8 in the *American Journal of Roentgenology*.

Brian N. Dontchos, M.D., from Massachusetts General Hospital in Boston, and colleagues assessed the impact of an immediate-read [screening program](#) on disparities in same-day [diagnostic imaging](#) after abnormal screening mammograms. The analysis included 8,222 pre-implementation and 7,235 postimplementation screening examinations.

The researchers found that 521 [patients](#) in the pre-implementation period and 359 patients in the postimplementation period had abnormal screening examinations, with 14.8 and 60.7 percent of patients, respectively, having same-day diagnostic imaging after abnormal screening mammograms. Compared with White patients during pre-implementation, patients of other races had significantly lower odds of same-day diagnostic imaging after abnormal screening examinations (adjusted odds ratio, 0.30; 95 percent confidence interval, 0.10 to 0.86  $P = 0.03$ ), while postimplementation, the odds of same-day diagnostic imaging were not significantly different between races (adjusted odds ratio, 0.92; 95 percent confidence interval, 0.50 to 1.71;  $P = 0.80$ ). While the abnormal interpretation rate was significantly lower postimplementation than pre-implementation, there was no significant difference in cancer detection.

"An immediate-read screening program provides a new paradigm for improved [screening](#) mammography workflow that allows more rapid diagnostic workup with reduced care disparities," the authors write.

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