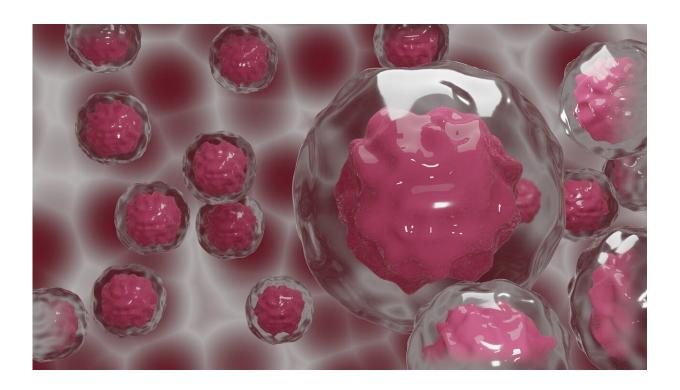


Study identifies and addresses US cancer screening deficits due to the COVID-19 pandemic

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Deaths from cancer are expected to increase over the next decade as a result of screening deficits due to the COVID-19 pandemic. New research published by Wiley online in *Cancer*, a peer-reviewed journal of the American Cancer Society, reveals the extent of screening deficits



in breast, colorectal, lung, and cervical cancers across the United States and describes the efforts that clinics are making to address missed screenings.

In the study, which was initiated by the American College of Surgeons Cancer Programs and the American Cancer Society, 748 accredited cancer programs in the United States were enrolled from April 2021 through June 2021. Most facilities reported monthly screening deficits: the percentages reporting deficits for colorectal, cervical, breast, and lung cancer screening were 80.6%, 69.0%, 55.3%, and 44.6%, respectively. Geographic differences were not observed based on where the cancer programs were located across the United States.

Using these results, the participating accredited cancer programs initiated a total of 814 quality improvement projects to address various barriers to screening. The effects of these interventions on screening rates through 2021 are being assessed, but the estimated numbers of potential additional monthly screening tests if all participating facilities reach their target goals are 57,141 for breast cancer, 6,079 for colorectal cancer, 4,280 for cervical cancer, and 1,744 for lung cancer.

"From the perspective of people's health, we are hopeful that this collaborative effort between the American College of Surgeons Cancer Programs and the American Cancer Society may have saved many patients from unnecessary suffering and death from cancer," said corresponding author Heidi Nelson, MD, FACS, Medical Director of Cancer Programs at the American College of Surgeons. "From the perspective of what this means about our programs, we now know that we can turn to our accredited programs in times of crisis to help address large-scale cancer problems. Knowing how enthusiastic these accredited programs are for working collaboratively on national level problems, we expect to release one or two quality improvement projects each year going forward."



The study is especially timely given that the American Cancer Society's National Consortium for Cancer Screening and Care recently <u>announced</u> nine consensus recommendations to accelerate recovery from the pandemic and improve the nation's ability to provide quality cancer <u>screening</u> and care for all.

March is Colorectal Cancer Awareness Month. The American Cancer Society recommends <u>colorectal screening</u> beginning at age 45 for individuals at average risk for the disease.

More information: "A national quality improvement study identifying and addressing cancer screening deficits due to the COVID-19 pandemic." Rachel H. Joung, Heidi Nelson, Timothy W. Mullett, Scott H. Kurtzman, Sarah Shafir, James B. Harris, Katharine A. Yao, Brian C. Brajcich, Karl Y. Bilimoria, and William G. Cance. *Cancer*; Published Online: March 21, 2022. DOI: 10.1002/cncr.34157

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