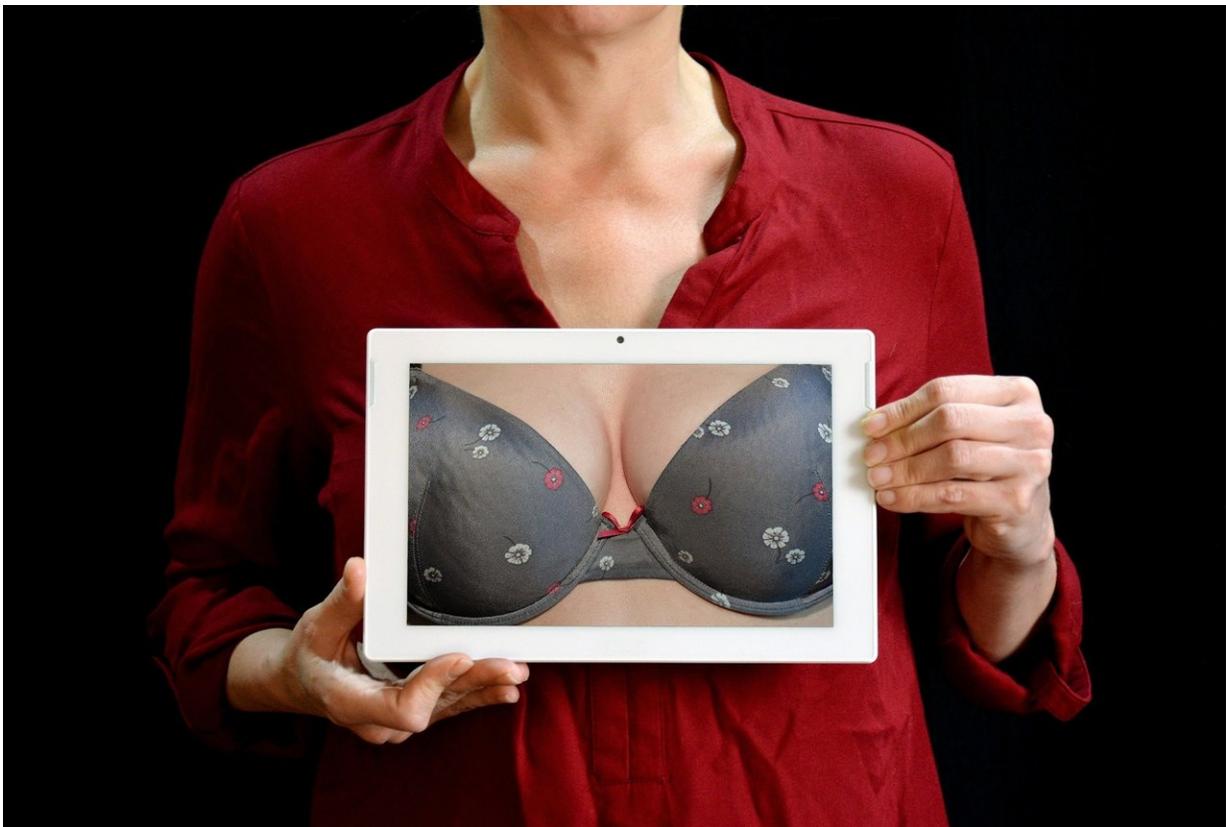


# New findings suggest that 'one size does not fit all' with regard to breast density education

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Breast density notifications aim to educate women about the risks of high breast density, defined as having more fibroglandular tissue than

fatty tissue, as visualized on a mammogram. Prompted by activists whose own breast density had obscured breast cancers on their mammograms, 38 U.S. states and Washington, DC, have enacted legislation requiring written notification of a patient's breast density (DBN) after a mammogram and language for a federal notification is forthcoming from the U.S.A. Food and Drug Administration.

Yet, these notifications were developed with limited input and without extensive testing among [women](#) in the [general population](#), and many are written at a high literacy level, often discordant with population literacy levels. Now a new study from Boston University School of Medicine (BUSM) has found women had varying preferences for learning about personal [breast](#) density, only partly associated with literacy level or race/ethnicity.

To explore women's preferences with and experiences for receiving breast density information, the researchers conducted a national telephone survey of a large, diverse sample of American women and qualitative interviews with a subset of these women.

They found most women (80 percent) preferred learning of personal breast density from providers, with higher rates among Non-Hispanic Black (85 percent) than Non-Hispanic White women (80 percent); and among Non-Hispanic White than Asian women (72 percent). Women with low literacy less often preferred receiving breast density information from providers (76 percent versus 81 percent), more often preferring written notification (21 percent versus 10 percent); women with high literacy more often preferred learning through an online portal (nine percent versus three percent).

According to the researchers, these findings have implications for how health education materials regarding breast [density](#) are delivered.

"Results show that the current [breast density](#) notifications may not meet

the needs or preferences of all women, especially those with lower literacy or women of color."

Kressin believes the findings support the importance of ensuring (through adequate elicitation of preferences and pre-testing with diverse audiences) that all populations receive [health information](#) in the way they desire and which will provide information to them in a way they can absorb, so as to inform future breast screening decisions.

These findings appear online in the journal *Patient Education and Counseling*.

**More information:** Nancy R. Kressin et al, A Letter is Not Enough: Women's Preferences for and Experiences of Receiving Breast Density Information, *Patient Education and Counseling* (2022). [DOI: 10.1016/j.pec.2022.03.014](#)

Provided by Boston University School of Medicine

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