

# Concerning decline in annual screening for breast cancer survivors identified

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New research in the April 2022 issue of *JNCCN—Journal of the National Comprehensive Cancer Network* found the rate of mammography screenings by breast cancer survivors has been steadily declining since 2009, particularly among younger survivors. The researchers reviewed a nationwide commercial claims database to review annual mammography rates in patients aged 40 to 64 years with a personal history of breast cancer diagnosis.

For survivors between ages 50 and 64, they found approximately 74% were getting annual mammograms from 2004-2009, but the rate slipped to 67% by 2016. For the 40- to 49-year-old group, annual [mammography](#) rates held steady at 70% from 2004-2009 before dropping to 57% by 2016.

According to the results, annual mammography rates declined by approximately 1.5% per year from 2009-2016 overall, but that rate of decline jumped to 2.8% for survivors 40 to 49 years old. The study authors note this is particularly concerning given that younger patients are more likely to develop aggressive tumors and also have a longer remaining life expectancy.

"Most people do quite well after completing their treatment for breast cancer; however, some will have a recurrence of their prior cancer or develop a new breast cancer. Mammography is an important tool for detecting these cancers earlier, when they are smaller and more easily treated," said lead researcher Kathryn P. Lowry, MD, Assistant Professor of Radiology at the University of Washington School of Medicine. "I was surprised that we saw declines in mammography use among patients who were continuing to see their cancer specialists. It suggests we are seeing less frequent mammography participation even among those who are otherwise engaged in their [cancer care](#). Our findings suggest we need to reinforce the importance of annual mammograms with our patients who have had breast cancer. We also

need additional studies to better understand the barriers that are leading to fewer mammograms."

The results were examined by recency of surgery or primary care visit, neighborhood racial and socioeconomic demographics, geographic region, and deductible costs. The data were not conclusive on which specific factors are driving the decline.

"More research—through qualitative interviews—is needed to further define the barriers to care and optimal strategies for improved mammography retention in survivorship," commented Amy M. Sitapati, MD, UC San Diego Moores Cancer Center, who was not involved in this research.

Dr. Sitapati, a member of the NCCN Clinical Practice Guidelines in Oncology Panel for Breast Cancer, continued, "This important study highlights the critical role of longitudinal tracking of [breast cancer](#) survivors, including mammographic screening. In today's systems and informatics-based records, we are not strategically prioritizing and reaching out to survivors using standardized and highly reliable processes. The [downward trend](#) in adherence to annual mammography in survivorship should serve as a call to action for new processes that identify and engage [breast cancer survivors](#). Electronic Medical Records-based registries could serve a pivotal role for long-term follow-up with survivors."

The study time period concludes before the start of the COVID-19 pandemic, which researchers agree has been detrimental to cancer screening in general.

**More information:** Kathryn P. Lowry et al, Trends in Annual Surveillance Mammography Participation Among Breast Cancer Survivors From 2004 to 2016, *Journal of the National Comprehensive*

*Cancer Network* (2022). [DOI: 10.6004/jnccn.2021.7081](https://doi.org/10.6004/jnccn.2021.7081)

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