

Breast density varies in racial/ethnic groups after BMI adjustment

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After adjustment for body mass index (BMI), clinically important

differences in the prevalence of dense breasts persist across racial/ethnic groups, according to a study published online June 7 in *Cancer Epidemiology, Biomarkers & Prevention*.

Karla Kerlikowske, M.D., from the University of California, San Francisco, and colleagues examined whether differences in BMI account for differences in dense breast prevalence by race/ethnicity. The prevalence of dense breasts was estimated from 2,667,207 mammography examinations among 866,033 women in the Breast Cancer Surveillance Consortium from January 2005 through April 2021. Prevalence ratios for dense breasts relative to overall prevalence by race/ethnicity were estimated.

The researchers found that dense breasts were most prevalent among Asian women (66.0 percent) followed by non-Hispanic/Latina White (45.5 percent), Hispanic/Latina (45.3 percent), and non-Hispanic/Latina Black women (37.0 percent). The prevalence of obesity was highest in Black women (58.4 percent) followed by Hispanic/Latina (39.3 percent), non-Hispanic/Latina White (30.6 percent), and Asian women (8.5 percent). Relative to the overall prevalence, the adjusted prevalence of dense breasts was higher in Asian women (prevalence ratio, 1.19; 95 percent confidence interval [CI], 1.19 to 1.20) and Black women (prevalence ratio, 1.08; 95 percent CI, 1.07 to 1.08), the same in Hispanic/Latina women (prevalence ratio, 1.00; 95 percent CI, 0.99 to 1.01), and lower in non-Hispanic/Latina White women (prevalence ratio, 0.96; 95 percent CI, 0.96 to 0.97).

"We found that incorporating breast density and BMI would better identify women with high breast density at risk of a missed or advanced cancer rather than using [breast density](#) alone," Kerlikowske said in a statement.

More information: Karla Kerlikowske et al, Impact of BMI on

Prevalence of Dense Breasts by Race and Ethnicity, *Cancer Epidemiology, Biomarkers & Prevention* (2023). DOI: [10.1158/1055-9965.EPI-23-0049](https://doi.org/10.1158/1055-9965.EPI-23-0049)

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