

Female Spanish-only speakers get screening mammograms less often than other women

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Limited English-language proficiency (LEP) is a risk factor for getting potentially lifesaving screening mammograms less often, according to new study results using national data. These findings, from women aged 40 and older living in the United States, are presented at the American College of Surgeons (ACS) Clinical Congress 2020.

"Spanish-only speakers appear to have a 27 percent less likelihood of having a [screening mammogram](#) than English speakers," said lead study investigator Jose L. Cataneo, MD, a general surgery resident at the University of Illinois at Chicago (UIC)/Metropolitan Group Hospitals.

"The impact of language barriers on [screening mammography](#) was previously unknown from a national database," Dr. Cataneo said. "It is important because approximately 67 million people in the United States speak a language other than English, and 41 million of those speak Spanish." He cited recent U.S. Census Bureau estimates.

Mammograms have well-known benefits, the study's senior investigator, Celeste Cruz, MD, a [breast surgeon](#) at Advocate Illinois Masonic Medical Center in Chicago, said.

"Mammography [screening](#) overall really reduces the rate of advanced and fatal [breast](#) cancers by finding cancers when they are at earlier stages and highly treatable," Dr. Cruz said.

Limited English proficiency common

The researchers defined LEP as speaking only or mostly a language besides English. For their study, they used a nationally representative database, the National Health Interview Survey, which is an annual survey of U.S. civilian, noninstitutionalized

residents. Using the 2015 survey data, the research team included [women](#) between 40 and 75 years old—the age range usually recommended for screening mammography—who answered which language they primarily speak.

Among 9,653 women included in the study, 1,040 had LEP, according to the most recent study data reported at the Clinical Congress. Most of those women (756) spoke only Spanish, Dr. Cataneo said.

In 936 LEP group members who provided mammogram information, the overall rate of screening [mammograms](#) was reportedly 12 percent less than for proficient English speakers: 78 versus 90 percent.

Women with LEP who reported never having received a screening mammogram numbered 209. When Dr. Cataneo extrapolated that number, using statistical software, to the entire U.S. female population in the age range of 40 to 75, he estimated it would equal 450,000 women in the country who are eligible for a screening mammogram but may not have had one.

Because U.S. mammography screening guidelines vary by age, the researchers examined participants in different age groups: 40 to 50, 45 to 75, and 50 to 75.

"In all three groups, we found that those with limited English proficiency had less frequency of getting a screening mammogram," he said.

The American Cancer Society recommends that women at average risk of breast [cancer](#) begin getting yearly mammograms at age 45, with the option to get one beginning at age 40. The U.S. Preventive Services Task Force recommends that

most women get screening mammograms every other year from ages 50 to 74, and women in their 40s may choose to get a mammogram every two years.

To standardize the LEP and English-speaking groups, the researchers used a statistical method of matching them by age, race-ethnicity, insurance status, family income, and other factors. After this propensity score matching, speaking only Spanish predicted a significantly lower probability of getting a screening mammogram, with an odds ratio of 0.73, Dr. Cataneo stated. Thus, for every 100 English-speaking women who get a screening mammogram in the United States, 73 Spanish-only speakers will get one.

Interventions needed

Many reasons probably exist why low English proficiency is linked to reduced mammography screening rates, Dr. Cruz said. In their study, women with LEP were more likely than others to be poor and lack health insurance.

These women also may have fears surrounding mammography, she suggested. Dr. Cruz said health care providers must dispel myths and focus on the importance of early detection of breast cancer.

Although breast cancer occurs in Hispanics at lower rates than non-Hispanic whites, it remains the leading cause of cancer-related death for Hispanic women, the American Cancer Society reports.

Regardless of ethnicity or language proficiency, many women mistakenly believe they are not at risk of breast cancer because they have no family history of the disease, Dr. Cruz said. In fact, only 5 to 10 percent of breast cancers are hereditary.

To address the language-based disparity in mammography screening rates, she said her hospital is increasing educational efforts about breast health, the importance of screening, and advances in breast cancer treatment. Now being done virtually because of the coronavirus pandemic, this education includes seminars in Spanish for community members. Dr. Cruz also

lectures through community organizations for [health care providers](#) and employers that seek to promote breast health and screening.

Additionally, she said the hospital is working to make online mammography scheduling available in languages other than English.

More information: Disparities in Screening for Breast Cancer Based on Limited Language Proficiency. A Retrospective Cohort Propensity Score Matched Study. Scientific Forum, American College of Surgeons Clinical Congress 2020, October 3-7, 2020.

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