Study finds COVID-19 pandemic reduced breast, cervical, colorectal cancer screenings by millions in 2020
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New findings led by researchers at the American Cancer Society (ACS) show the number of women in the United States who reported having a recent (in the past year) breast cancer or cervical cancer screening dropped by 2.13 million (6%) and 4.47 million (11%) respectively in 2020 compared to 2018. The study is the first of its kind to evaluate the impact of the COVID-19 pandemic on cancer screenings nationally using population-based data. The results are published today in *JAMA Network Open*.

"COVID-19 pandemic had an immediate impact in March and April of 2020, as screenings initially dropped by close to 80%," said Dr. Ahmedin Jemal, senior vice president, surveillance & health equity science at the American Cancer Society and senior author of the study. "Many people caught up on screenings later in 2020, but overall, the COVID-19 pandemic kept screenings down over the course of the entire year. As we move forward, it's crucial to get people back into their doctor's offices to get screened."

The study also found that between 2018 and 2020 colonoscopies for colorectal cancer detection in the past year dropped by 16% for both men and women but was offset by an increase in stool testing of 7%. This showed the promise of at-home testing to maintain population-wide screening rates during a major healthcare disruption.

In other study findings:

- Hispanic and lower-income people experienced sharper drops in past-year breast and cervical cancer screening, reflecting newly emerging barriers and exacerbation of long-standing barriers to cancer screening.
- Asian/Pacific Islander women had a 27% drop in past-year breast cancer screening, the largest drop for any race.
- Hispanic women had a 17% drop in past-year cervical cancer screening.
- The drop in screening in the past year nearly doubled for non-high school graduates compared to college graduates. Non-high school graduates dropped by 11% for breast cancer screening and 17.7% for cervical cancer screening, compared to 6.1% and 9.5% respectively for college graduates.

"The impact of these drops on stage at diagnosis and survival is not yet known, but it is something we need to monitor closely," said Jemal. "It is imperative that we understand the impact of lower screening rates on cancer outcomes among people of color and people of lower socioeconomic standing and also work to improve access to health care and cancer screenings for everyone."
"Regular screening for cancer can help save lives. This important study is further evidence of how critical it is to get people back on track with their regular screening tests following COVID-19," said Dr. William Dahut, chief scientific officer at the American Cancer Society. "Screening campaigns like our Get Screened campaign continue to aim to increase cancer screening rates by raising awareness about the need for recommended screenings for breast, cervical, colorectal, prostate, and lung cancers."

Dahut adds, "Screening is safe, effective, and accessible. Facilities that offer screening services have COVID-19 safety precautions in place. Many states have low or reduced-cost screening programs to help ensure that everyone has access, even people who don't have insurance or a primary care doctor."

Other ACS authors include: Jessica Star, Dr. Priti Bandi, Adair Minihan, Dr. Xuesong Han, and Dr. Robin Yabroff. Dr. Stacey Fedewa, now at Emory University, is lead author of the study.

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