

Breast Cancer Screening Practices: Colorado Women Aged 50 and Older, 1995-1997

An update from the Survey Research Unit

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BRIEF

Breast cancer is the most commonly diagnosed cancer among women in the United States. Nationwide, an estimated 178,700 new cases will be diagnosed in 1998 and 43,500 women will die from the disease¹. In Colorado, 2,294 breast cancer cases were diagnosed in 1995 and 483 women died². From 1990 to 1994, the breast cancer mortality rate in Colorado, 23.8 per 100,000 population, was ranked 45th in the US². In 1997, the breast cancer mortality rate was 19.9 per 100,000 population in Colorado and 457 women died from the disease. Recent declines in breast cancer mortality suggest that improvements in the early detection and treatment of breast cancer are having a beneficial effect. However, disparities in the rate among racial and ethnic groups suggest differences in access to screening, early detection, treatment, follow-up and supportive care³.

What are the known risk factors for breast cancer?

Age- The risk of breast cancer increases as a woman gets older. In the United States, about 80 percent of breast cancers occur in women aged 50 and older. Women ages 20-29 account for only 0.3 percent of diagnosed breast cancers.

Family history- The risk of getting breast cancer increases for a woman whose mother, sister, daughter, or two or more close relatives, such as cousins, have had the disease.

Personal history- Women who have had breast cancer may develop it again. Women with a history of certain types of breast disease (not cancer, but a condition that may predispose them to cancer) are also at increased risk.

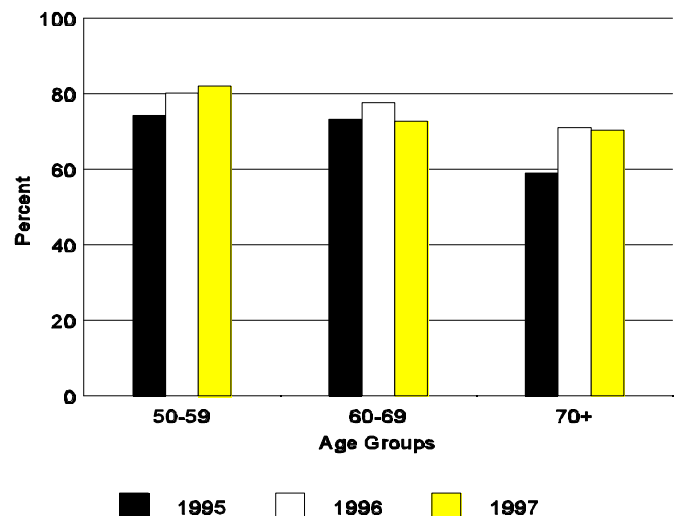
Other risk factors- Women who experience early menarche, late menopause, have a first child after 30, or never have children may have an increased risk of developing breast cancer. Current research is investigating the roles of hormone replacement therapy, diet, and alcohol use⁴.

Surveillance and Mammogram Practices

The Colorado Behavioral Risk Factor Surveillance System is an ongoing, statewide survey of noninstitutionalized adult Coloradans regarding their health behaviors, preventive health practices, and health

care coverage. Using random digit dialing techniques, about 1800 Colorado residents age 18 and older are interviewed each year. Questions regarding breast cancer screening practices (mammography and clinical breast exams) are asked of all women who complete the interview. In Colorado, the proportion of women aged 50 and older who receive mammograms tends to vary by age group. A larger proportion of women aged 50-59 receive mammograms, as compared to their older counterparts. (see Figure 1).

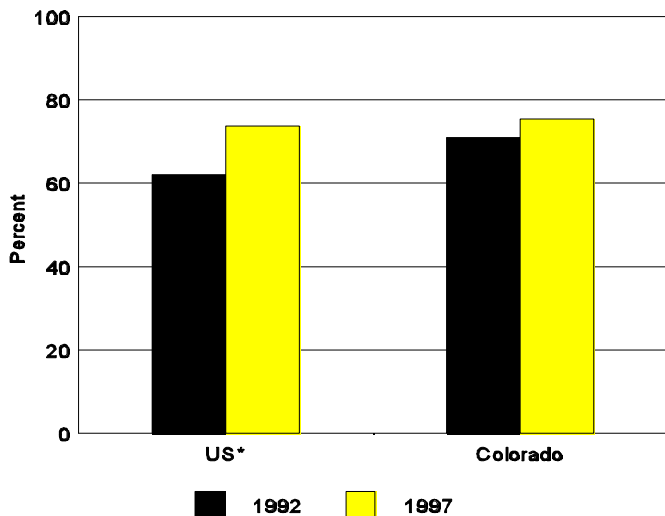
Figure 1. Percent of Colorado women aged 50+ who had a mammogram in the past two years by age group: Colorado BRFSS, 1995-1997



How many women get mammograms?

Between 1992 and 1997, the proportion of Colorado women aged 50 and older who had a mammogram in the past two years increased from 70.9 percent to 75.4 percent. In the US, the proportion increased from 62.0 percent to 73.7 percent (see Figure 2).

Figure 2. Percent of women aged 50+ who had a mammogram in the past two years: United States and Colorado BRFSS, 1992 and 1997

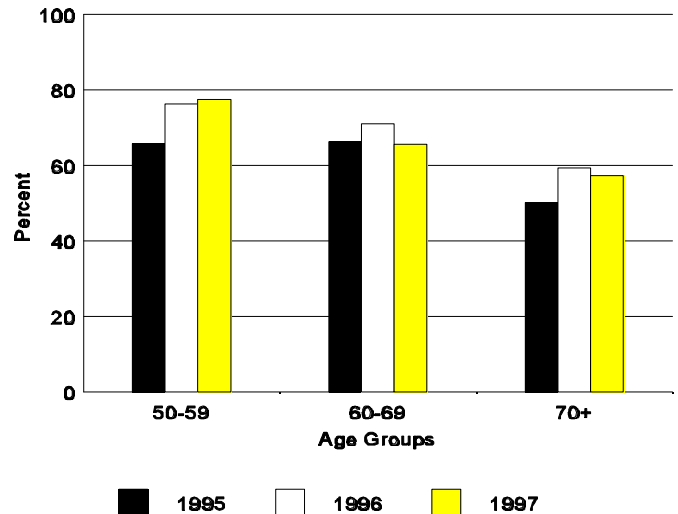


*median percent based on data from all states

Routine Screening Recommendations

The National Cancer Institute recommends that mammography screening begin at age 40 and be repeated every one to two years. Women should discuss their individual pattern of screening with their physician. In addition to regular mammograms, women should have a regular clinical breast examination by a health care provider to search for abnormalities in the breast⁵. In Colorado, the proportion of women over the age of 18 who have ever received a clinical breast exam has remained higher than 90 percent since 1990. However, that proportion tends to decrease with age (see Figure 3).

Figure 3. Percent of Colorado women aged 50+ who had a mammogram and clinical breast exam in the past two years by age group: Colorado BRFSS, 1995-1997



National Breast and Cervical Cancer Early Detection Program

The Breast and Cervical Cancer Mortality Prevention Act of 1990 authorized the Centers for Disease Control and Prevention (CDC) to implement a national program to ensure that every woman for whom it is deemed appropriate receives regular screening for breast and cervical cancers, prompt follow-up if necessary, and assurance that the tests are performed in accordance with current recommendations for quality assurance.

In fiscal year 1998, CDC entered into the eighth year of the National Breast and Cervical Cancer Early Detection Program (NBCCEDP), a landmark program that brings critical breast and cervical cancer screening services to underserved women, including older women, women with low income, and women of racial and ethnic minority groups.

Fiscal year 1998 appropriations of \$145 million enable CDC to establish greater access to screening and follow-up services, increase education and outreach programs for women and health care providers, and improve quality assurance measures for mammography and cervical cytology.

Fifty states, five territories, the District of Columbia, and 13 American Indian/Alaska Native organizations now participate in the NBCCEDP. CDC provides national program leadership in collaboration with other federal agencies and professional, national, voluntary, and consumer organizations ⁶.

Colorado Cancer Control and Prevention

Colorado's participation in the National Breast and Cervical Cancer Early Detection Program is conducted through the Colorado Women's Cancer Control Initiative (CWCCI). The goal of the CWCCI is to reduce morbidity and mortality associated with breast and cervical cancer in Colorado. The CWCCI provides breast and cervical cancer screening exams and diagnostic services at 120 sites through the cooperative efforts of 45 providers.

Exams are provided at no cost to uninsured or underinsured, low income women, with emphasis

placed on reaching women aged 50 to 64. The program also conducts public education and outreach activities to recruit eligible women into screening and to provide up-to-date breast and cervical cancer information to professionals.

The Colorado Mammography Advocacy Project (CMAP) is a tracking system for mammography. Information on breast cancer risk factors, screening and diagnostic mammograms, and breast cancer is maintained by CMAP. CMAP provides facilities with assistance in reminding women of the need for regular mammograms and, when needed, information on the need for follow-up after abnormal mammograms. CMAP services are available to women, mammography facilities, and radiologists in Colorado. At the present time, CMAP is limited to the front range area of the state. In the future, it is planned that CMAP will represent women in all areas of Colorado.

References

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5. Eastman, P. NCI Adopts New Mammography Screening Guidelines. *JNCI*, 89: 538-9, 1997.
6. Centers for Disease Control and Prevention. National Breast and Cervical Cancer Early Detection Program, <http://www.cdc.gov/nccdphp/dcpc/nbccedp>.

Mammography and clinical breast exam utilization data are from the Behavioral Risk Factor Surveillance System, a continuous telephone survey of the adult population in Colorado supported in part by CDC and administered by the Colorado Department of Public Health and Environment. Data analysis was provided by the Behavioral Surveillance Branch, National Center for Chronic Disease Prevention and Health Promotion, CDC. Editorial support for this report is provided through a cooperative agreement with the Council of State and Territorial Epidemiologists.

- ◆ For more information about breast cancer and breast cancer screening, contact the Cancer Prevention and Control Program, Colorado Department of Public Health and Environment at 303-692-2520.
- ◆ For more information about the Colorado BRFSS, contact the Health Statistics Section, Colorado Department of Public Health and Environment at 303-692-2160.

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