

Breast Cancer Screening Rates Improving from Pandemic Lows, But Recovery Remains Unequal for Certain Minority Groups

New Study Shows Mammography Resumed Among White Women, But Others Lag, Exacerbating Existing Screening Disparities

WASHINGTON, DC, UNITED STATES, March 14, 2022 /EINPresswire.com/ -- As Women's History Month is being commemorated, there's new evidence to continue writing a sad chapter about women's health and American health disparities: that the COVID-19 pandemic has exacerbated breast cancer screening disparities among most minority populations in the U.S., and recovery remains stubbornly unequal.

In a new study, released online ahead of the April issue of the American Journal of Managed Care's (AJMC)

Evidence-Based Oncology, researchers examined rates of mammograms in 2019 and 2020 and found that use of the lifesaving diagnostic procedure dropped precipitously during the pandemic, particularly among people of color, and did not bounce back as much as it did among white women.

• [Read the full study in AJMC's Evidence-Based Oncology.](#)

The study, conducted for the non-profit Community Oncology Alliance (COA) by Avalere Health, found that mammogram use plunged in the five ethnic groups it studied (White; Black/African American; Hispanic/Latino; Asian/Native Hawaiian/Pacific Islander; and American Indian/Alaskan Native).

Breast cancer screening disparities also persisted along socioeconomic lines, with less-well off women receiving fewer breast cancer screenings. The study found that patients who had





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commercial insurance had higher screening rates than those covered under Medicare Fee-For-Service (FFS) and Managed Medicaid plans. Analyses from the U.S. Census Bureau have shown that those with health insurance are more likely to have higher incomes. Medicaid beneficiaries had the lowest screening rates, compared with individuals covered by commercial and Medicare FFS policies.

The study utilized a multi-payer database to compare screening rates for 14,281,102 patient records between March 1 to September 30, 2019, and March 1 to September 30, 2020.

While the mean monthly screening rates among white Medicare FFS patients dropped to .6% of eligible beneficiaries at the peak of the first COVID-19 wave in April 2020, the rate recovered to 6.5% by June 2020, which is just above pre-pandemic levels of approximately 6.1%.

The disparity became apparent when researchers examined screening rates for the four minority groups.

American Indian/Alaska Native patients showed the most acute disparities in screening, with the study finding that screening rates in June 2020 remained at less than half that of their white equivalents. Breast cancer screening rates for American Indian/Alaska Natives dropped to an average low of .5% at the peak of the first COVID-19 wave in April 2020, and only recovered to 3.1% in June 2020, which is below pre-pandemic levels of approximately 4%.

Pre-pandemic disparities in mammogram utilization remained in September 2020 among other minority groups examined, including Black/African American (6.2%), Hispanic/Latino (4.3%), and Asian, Native Hawaiian, and Other Pacific Islander women (4.5%), but they have recovered from the dramatic drop in the early months of COVID-19 and are now close to the pre-pandemic levels seen in 2019.

Among American Indian/Alaskan Native women the rate has slightly exceeded pre-pandemic levels but remains far below those of White women.

“What’s worrisome is that the combined two-year lag in screenings we are reporting will translate into not only more and more severe breast cancer cases, but that the cancer health disparities we already knew existed have remained stubbornly unmoved,” says the lead author of the study, Dr. Debra Patt, MD, PhD, MBA, executive vice president at Texas Oncology and secretary of COA.

“Achieving cancer health equity must be a priority for our health care system, particularly as we emerge from the COVID-19 pandemic that has made disparities so much worse. There is no quick fix, which is why we the need support of every stakeholder, from the federal government

to the frontline providers to the manufacturers,” said Ted Okon, MBA, executive director of COA.

The U.S. Preventive Services Task Force (USPSTF), an independent regulatory panel that provides evidence-based guidelines for clinical preventive services, recommends mammograms once every 24 months for high-risk individuals over the age of 50. The task force recently updated its research plan and is poised to issue updated draft breast cancer screening recommendations for stakeholder feedback. Among the issues that USPSTF is reviewing is a focus on health disparities.

A dramatic drop in cancer screenings was first reported by COA and Avalere [research released in 2020](#), prompting COA to partner with CancerCare to launch a major public health campaign called [Time to Screen](#) seeking to encourage all Americans to resume their regular screenings. With data showing ongoing disparities in the COVID-19 pandemic, the campaign has focused on reaching underserved communities included culturally appropriate targeted outreach and advertising in five languages across the country.

The study is published in the April issue of Evidence-Based Oncology and titled “Considerations to Increase Rates of Breast Cancer Screening Across Populations,” by Debra Patt, MD, PhD, MBA; Lucio Gordan, MD; Kashyap Patel, MD; Ted Okon, MBA; Nicolas Ferreyros, BA; Nathan Markward, PhD, MPH; Milena Sullivan, MA; Blair Burnett, BA; Brook Getachew, BA; Crystal Harris, MPH.

Read the full study in AJMC’s Evidence-Based Oncology at <https://www.ajmc.com/view/considerations-to-increase-rates-of-breast-cancer-screening-across-populations>.

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About the Community Oncology Alliance: COA is a non-profit organization dedicated to advocating for community oncology practices and, most importantly, the patients they serve. COA is the only organization dedicated solely to community oncology where the majority of Americans with cancer are treated. The mission of COA is to ensure that patients with cancer receive quality, affordable, and accessible cancer care in their own communities. More than 5,000 people in the United States are diagnosed with cancer every day and deaths from the disease have been steadily declining due to earlier detection, diagnosis, and treatment. Learn more at www.CommunityOncology.org. Follow COA on Twitter at www.twitter.com/oncologyCOA or on Facebook at www.facebook.com/CommunityOncologyAlliance.

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