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Does breast screening make symptomatic breast clinics more efficient?

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INTRODUCTION

The Cochrane review¹ estimated a 15% reduction in mortality but a 30% rate of over-diagnosis/treatment with breast cancer screening. There may, however, be hidden benefits.

BreastScreen Aotearoa was established in 1998. ² Breast Screening Counties Manukau (BSCM) was established at CMDHB in 2003 and by 2005 was offering full screening for women aged 45-69. Prior to 2004, only women aged 50-69 were screened.²

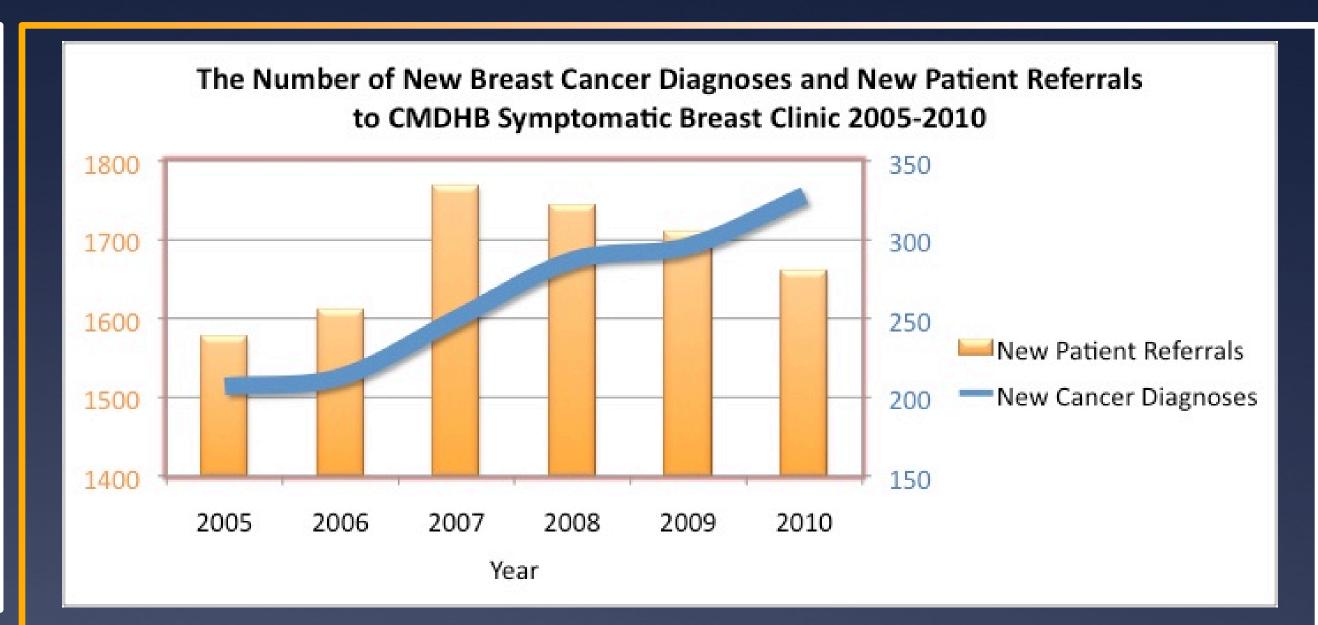
We propose that BSCM contributes to the efficient running of CMDHB symptomatic breast clinics.

METHODOLOGY

The number of new breast cancer diagnoses per annum was collected prospectively from 2005 to 2010.

The number of new patient referrals to symptomatic breast clinic were collected retrospectively from 2005 to 2010.

The relationship between the number of new breast cancer diagnoses and new patient referrals was examined. The values for 2005 and 2010 were compared using Chi-square test.



RESULTS

All new patient referrals received an appointment for potential triple assessment. All data is depicted in the graph.

In 2005, there were 207 (13%) new cancer diagnoses in 1576 new patients. In 2010, there were 328 (20%) new cancer diagnoses in 1660 new patients (p<0.0001).

Therefore, 1 in 5 new patients at clinic had breast cancer in 2010 compared to 1 in 8 in 2005.

CONCLUSION

- CMDHB breast clinic is seeing an increasing number of new breast cancer diagnoses per year.
- The number of new patient referrals has not significantly increased.
- This may be explained by the community using normal screening mammography results to reassure women about minor breast symptoms.

REFERENCES

- 1. Gøtzsche PC, Nielsen M. Screening for breast cancer with mammography. Cochrane Database of Systematic Reviews 2011, Issue 1. Art. No.: CD001877. DOI: 10.1002/14651858.CD001877.pub4.
- 2. http://www.nsu.govt.nz/health-professionals/3177.aspx