Assessing and improving patient’s awareness of breast & cervical cancer screening recommendations

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Site Placement: Central Mississippi Health Services, Jackson, MS
Introduction

- Initial focus on nutrition and pregnancy
- Upon arrival at CMHS, changed focus to female patients and gynecological needs
- Identified health literacy as an issue
- Updates to breast and cervical cancer screening recommendations
- Organizations produced conflicting recommendations
- → Evaluate knowledge of screening recommendations
- → Assess current screening practices
- → Educate about screening recommendations
Background

- Breast and cervical cancer screening can prevent morbidity and mortality
  - Screening includes: mammograms, clinical breast exams, and pap smears
- Need in Mississippi
  - Mississippi breast cancer incidence rates are less than national rates, but death rates are greater.
  - Mississippi cervical cancer incidence and death rates are greater than national rates.
  - There is also a racial disparity between rates
Methodology

• Surveyed patients’ knowledge of screening recommendations and their relevant health history & current screening practices
• Provided information to patients on breast & cervical cancer recommendations.
• Discussed with patients when they felt they should be screening in the future based on the recommendations and their personal health history
• Used clinic data to evaluate clinic’s effectiveness in adhering to recommendations
Results

• During the 3 week survey period I talked with 34 female patients
• Patients’ understanding of recommendations was limited, but many women were receiving screenings according to recommendation.
  • 5% of respondents knew to start pap smears at age 21, 18% knew to start mammograms at age 40.
  • Across all screening methods, most women thought screening should be done on an annual basis.
  • 63% of women age 40-75 had received a mammogram within the past year. 88% of women age 21-65 had received a pap smear within the past 3 years.

Figure 3. "In general, how often do you think a woman should have a ______?"
Discussion

• Respondents were reflective of CMHS patient population
• Knowledge of screening was limited
• Actual screening practices were closer to recommendations
• Patients were receptive to learning about recommendations
• Many respondents were unaware of available free screening
• CMHS should increase mammogram screening
  • Currently not screening all eligible patients
  • Pap smear data inconclusive
Recommendations

• Providers should continue to remind patients when they are due for a screening
  • Explain why and what tests are being used for
  • Collect a thorough health history, including relevant risk factors (family history of breast cancer, hysterectomy, sexual activity))
  • Refer patients to resources
• Use brochures and community resources to promote regular screening
  • Mississippi Breast and Cervical Cancer Early Detection Program
• Recommendations for future scholar projects
  • Resources of community assistance funds for preventive screening
  • Health education posters for patient rooms
Conclusion

- Knowledge is limited, yet screening practices are closer to recommendations
- Improving patients awareness of screening tools is important
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