



Poster 10: Disparities in breast cancer screening adherence among Hispanic women who receive cervical cancer screening

Grace R. Ge – McGovern Medical School at UTHealth Houston

Topic: Financial Toxicity and Disparities

Objectives

Both breast and cervical cancer are highly preventable through screening and early detection, but Hispanic women in the U.S. remain at significant risk for both diseases due to low screening rates. The Houston PAP Project provides no-cost cervical cancer screening to predominantly underserved, urban, Hispanic women, and no-cost mammogram referrals are made to those eligible. This study aimed to identify socioeconomic and demographic risk factors and common social determinant of health (SDoH) barriers for women who present for cervical cancer screening but then do not pursue breast cancer screening.

Methods

This retrospective cohort study included patients who presented for cervical cancer screening at our no-cost clinic between March 2022 and March 2023 and were eligible for breast cancer screening by history and age. Demographic information and a completed SDoH questionnaire were obtained. Mammogram results were faxed to the clinic upon completion. Associations between demographic factors, SDoH, and receipt of mammogram were completed using Chi-squared and Fisher's Exact tests with a significance level of 0.05.

Results

Among 211 patients eligible for breast cancer screening, almost 70% did not complete breast cancer screening after referral (Table 1). There were no significant differences in demographic information between those who completed screening and those who did not. Similarly, there were no significant differences in SDoH screening results, but 80% of all patients who completed the SDoH questionnaire screened positive for intervention. Notably, patients who previously had a mammogram and were due for another were significantly more likely to complete screening again compared to those who had never been screened (76.6 vs 48.3%, $p < 0.001$).

Conclusions

This study demonstrates that urban, underserved Hispanic women who have never had breast cancer screening were significantly less likely to complete mammograms, despite demonstrating interest in healthy behaviors by presenting for cervical cancer screening. This identifies a highly targetable population in which more detailed counseling on the importance of breast cancer screening should be performed. More research is needed to identify the specific barriers that exist for this vulnerable group, so they can be overcome.

Abstract Table or Graph

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