

Biennial versus Annual Screening Mammography: What Do Women Prefer?

Monday 12:15-12:45 PM | BR222-SD-MOA2 | BR Community, Learning Center Station #2

PURPOSE

To determine whether women prefer annual vs. biennial screening and investigate whether or not reported “harms” of mammography influence this preference.

METHOD AND MATERIALS

This study was approved by the Institutional Review Board (IRB). From December 2016 to February 2017, patients presenting for a screening or diagnostic mammogram were recruited at the time of their scheduled mammogram and asked to complete an anonymous voluntary one-time survey. The survey queried patients about whether an abnormal mammogram or breast biopsy causes emotional harm, whether a biennial screening mammogram is associated with less or more anxiety and whether women prefer to have a screening mammogram every other year instead of every year. Additional variables such as patient’s age and race, personal or family history of breast cancer, prior breast biopsy, prior abnormal mammogram, and underlying anxiety disorder were also included. The first 20 collected surveys were used to pilot the study to assure adequacy of the questionnaire. Subsequently, an additional 711 surveys were collected and statistical analysis were performed using an Independent T-test and Fishers exact test

RESULTS

71% of those surveyed preferred annual instead of biennial screening mammography (95% confidence interval [CI]= .68-.75). Participants overwhelmingly preferred annual screening despite how they answered the additional survey questions. A family history of breast cancer (risk difference [RD]= -0.11; P=0.002) and a prior breast biopsy (RD -0.09; P=0.01) were the only two variables to have an additional positive influence on annual screening mammogram preference. Only 17% of participants felt having biennial screening would cause less anxiety. Of the patients who reported a prior abnormal mammogram, 13% believe biennial screening would cause less anxiety (P=0.0001).

CONCLUSION

Despite the “harm” that an abnormal mammogram or breast biopsy may cause, women believe that a biennial screening mammogram is associated with more anxiety and therefore, prefer annual screening mammography.

CLINICAL RELEVANCE/APPLICATION

The US Preventive Services Task Force (USPSTF) recommendation for screening mammography intervals is in part, based on the “harms” of mammography. Our study shows that women acknowledge these “harms” but prefer to be screened for breast cancer on a yearly basis.