Breast Cancer Screening in First Nation Communities: A Screen Test Overview

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Objectives

- Impact of Breast Cancer in Indigenous Communities
- Breast Health Overview
- Intro to Screening Mammography
- Screen Test Overview
- What You Can Do

Breast Cancer In Alberta



- Most common cancer for women
- In 2014, 2562 women diagnosed and 393 died
- Most women (88%) are now surviving breast cancer
- Screening rate in Alberta is 63.2%; Target is 70%

Burden of Breast Cancer in Indigenous Populations



Percent of total new cancer cases

Alberta First Nation Governance Centre, 2017

Breast Cancer Incidence



The incidence of breast cancer is generally no different between First Nations and non-First Nations women. Breast cancer mortality rates also show no difference between the two populations. A higher proportion of First Nations women were diagnosed with breast cancer in Stages III & IV than in the non-First Nations population, who were generally diagnosed in Stages I and II. **Barriers to Screening**

What barriers are faced by women in your community?







Solutions to screening

What can you do to address barriers?





Breast cancer info

What is breast cancer?

What is breast cancer?

- Most common type of cancer among women
- Starts when cells of the breast grow out of control
- As the cells grow, they may form lumps or tumours



Breast cancer information

Types of breast cancer





- Being a woman the estrogen link
- Getting older
- Breast cancer in your family
- Previous breast cancer
- Breast density
- Lifestyle weight, smoking, alcohol

Being a woman

The estrogen link:

- Late pregnancy (after age 30)
- Early period (before age 12)
- Late menopause (after age 55)
- Long-term hormone replacement (longer than 5 years)

Men can get breast cancer but it's very rare (less than 0.5%)





Getting older

Lifetime Probability of Developing and Dying from the Most Common Cancers, by Age Group, Alberta, 2010-2014

Age Group	Developing	Dying
0 - 20	Less than 1 in 10,000	Less than 1 in 10,000
20 - 30	1 in 1,312	Less than 1 in 10,000
30 - 40	1 in 231	1 in 3.069
40 - 50	1 in 70	1 in 771
50 - 60	1 in 43	1 in 346
60 - 70	1 in 28	1 in 191
70 - 80	1 in 26	1 in 125
80+	1 in 25	1 in 56

d by: Surveillance & Reporting, Cancer Measurement Outcomes Research and Evaluation, Alberta Health Services

Family history & Risk





How much breast cancer is from women with a family history?



Personal risk factors



Weight

Smoking

Alcohol

Risk factors

What are some ways to decrease risk?

- follow a breast health life plan know your risk
- healthy weight diet and exercise
- limit alcohol
- limit hormone replacement therapy to less than 5 years
- quit smoking
- get screened regularly



Risk Assessment Tool

← → C' n iscreeningforlife.ca/risk-assessment-tool/		ය ක			
	Assessing Community N: I Home Alberta Health S: [🖞 CPSA 🍈 ShareThis 📋 Expense 🛐 Hypothesis Test: Differe 🚯 Sharepoint 🦄 Dissemination Planning T 🦳 SurveyMonkey 🌈 Travel Booking			
	NING FE.CA	Share 🖬 🖬 🖌 🔍			
SCREENING TOOLBOX					
RISK ASSESSMENT TOOL F	ACT OR FICTION QUIZ BOOK A SCREENING				
INTRODUCTION	LIFESTYLE BREAST	CERVICAL COLORECTAL RESULTS			
		Welcome to Our Risk Assessment			
		In addition to your age and sex, there are other factors that can increase your risk and influence at what age you should be screened. To find out what's affecting you, and some of the things that you may be able to do to reduce your risk, start here by answering a short series of questions.			
		Sex: Age: Male Female			
		GET STARTED			
16					

www.screeningforlife.ca



Breast Health Life Plan: Average Risk





40-49

50-74



- Know what looks and feels normal for you
- Optional: begin annual mammography screening - referral required for first mammogram
- Screening mammogram every two years (for most women); self-refer

75 +

 Discuss need to continue screening with health care provider - mammogram every 2 years

Regularly check for:



- Unusual change in shape or size of breast
- New unusual rash or redness



- Dimpling or thickening of skin on breast
- A new lump in breast or armpit
- Discharge from nipple
- RY
- Crusting on nipple
- Nipple turned inward (if unusual)

These changes do not mean a woman has cancer, but do require investigation

Breast Cancer Screening

Early Detection is Key





Screening mammograms

- X-rays of the breast
- Low dose of radiation
- Help find cancer 2-3 years before it can be felt
- For women with no breast problems



Mammograms work!

A mammogram can help find cancer this small (1-3 mm)

About 2-3 years before the cancer can be felt (5-10 mm)





Why are screening mammograms important?

Help find breast cancer early
Mammograms can show early changes
Changes in tissue may indicate a problem



Breast Density – what you should know



- Density: Ratio of fat to glandular tissue
- Higher the density = increased risk
 - -Gland tissue can be hard to see through on a mammogram
- Younger women (40-49) generally have denser breasts, and this is why they are recommended to be screened every year.

Who can get a mammogram?

Age	Mammogram Eligibility	Screening Guidelines*
Under 40	Not Eligible	Screening mammography not recommended
40-49	OPTIONAL: Referral needed for first baseline mammogram	Annual mammogram
50-74	Self-referral	Mammogram every 2 years or as directed by radiologist
75+	Self-referral	Mammogram every 2 years or as directed by radiologist. Clients over age 75 are recommended to discuss continued screening with their health care provider and do not receive a recall letter.



Who does not need a mammogram?



Women under 40, pregnant or breastfeeding

Breast cancer patients



How is a mammogram taken?

- The technologist places your breast on a plastic plate
- A second plate is lowered to compress the breast
- Compression lasts a few seconds
- 2 x-rays of each breast
- 10 minutes



Mammogram results

- Results within 2-3 weeks
- Most women (92%) will receive a normal result
- Return for screening in
 - 1 or 2 years



What if a result is abnormal?

- See your doctor
- The doctor will book additional test(s)
- Most common tests are:
 - Clinical breast exam
 - Diagnostic mammogram
 - Ultrasound
 - Biopsy
- Most abnormalities (92%) are not cancer





Risks and benefits of screening mammography

Risks:

- Missed breast cancers (~5%)
- Being recalled for more tests (7-10%)
- Overdiagnosis

Benefits:

- Find early changes in breast tissue
- Only test shown to reduce deaths from breast cancer
- Most women (about 90%) are now surviving breast cancer

Breast Cancer Myths and Facts

Myths

- Breast cancer isn't very common, so I don't have to worry
- I have small breasts so I can't get cancer
- I don't have cancer in my family so I'm safe
- Deodorant causes breast cancer
- Mammograms cause breast cancer

Facts

- 1 in 8 Albertan women will get breast cancer in their lifetime
- Breast cancer occurs in women of all sizes
- Most (80%) cancers occur in women with no family history
- Deodorant has not been shown to cause breast cancer
- Mammograms have not been shown to cause cancer

Most women are now surviving breast cancer



The Screen Test Service

- Edmonton & Calgary clinic since 1990
- Mobile program started in 1991
- Serve over 120 communities each year



Overview: Breast Cancer Screening in Alberta



Screen Test Overview

Screen Test Service





Inside the Mobile...

Reception Area



Exam Room



Screen Test impact on Alberta Biennial Coverage for Screening Mammography: Women Age 50-74, 2014 - 2015 Percent of Women from Screen Test over Total Screened women by LGA



Screen Test Provincial Contribution

- Provincial screening rate 63.8%
- In some areas, ST provides >50% of the screening

Screen Test Work in Indigenous Communities ٠



- 26 sites;
 - 21 First Nation Communities
 - 5 Metis Settlements
- ST works with FNMI staff to:
 - raise awareness,
 - book clients and
 - help on clinic day
- Training provided to local staff - Telehealth
- Aboriginal resources are available (some translated into Cree)

Screen Test in Indigenous Communities



- Number of
 Indigenous
 Communities:
 - 24 (2016)
 - 26 (2018)
- 9 new FN sites since 2013

What can you do to to promote breast cancer screening?



Resources

- Posters, brochures, flyers, breast health wheels, magnets
- Available at no cost at: <u>www.screeningforlife.ca</u>
- Resources are available in
 English, Vietnamese, Punjabi,
 Arabic, Spanish, Chinese, and
 Cree



For more information:

① screeningforlife.ca/breast-cancer-at-a-glance/	C 90% C Q, reducing breast cancer risk factors →
🔊 Most Visited 🧕 Getting Started 🕜 Suggested Sites 📓 Screening for Life Al	🕴 CPSA CPSA 🚯 SharePoint 🎢 Travel Booking 🛞 iexpense 👩 SurveyMonkey! 🛞 Save to Mendeley
≡ MENU SCREENING FOR LIFE.CA	SHARE 🛛 🖬 🖌 🔍
BREAST CANCER	SCREENING
AT A GLANCE SCREENING & RESULTS M PROTECTED:	MAMMOGRAMS SCREEN TEST MOBILE CLINICS YOUR RISK FACTORS HOW TO BOOK A MAMMOGRAM MYTHS & FACTS RESOURCES
	Breast cancer screening. Finding it early can make all the difference.
	Just because no one in your family has had breast cancer doesn't mean you're not at risk. In fact, 80% of women who develop breast cancer have no family history at all. And you don't need to be experiencing any unusual symptoms in your breast so need a mammogram. Having routine mammograms is the best way to find breast cancer early, before symptoms develop and when treatment may work better. And when you consider that 1 in 8 women in Alberta will be diagnosed with breast cancer during her lifetime, breast cancer screening is one of the most important things you'll ever do for yourself.
	Why are mammograms so Important?
	Should you have a screening mammogram?
and the state of t	How do you get a mammogram?
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57% OF ALBERTAN WOMEN AGED 50-69 HAD A SCREENING MAMMOGRAM DURING 2013-2014.	



Thank you!

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