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Investigating Patient Barriers in Receiving Mammography Screenings Following the COVID-19 Pandemic

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Investigating patient barriers in receiving mammography screenings following the Covid-19 Pandemic

Nicole Clarke OMS-II, Dr. Tara Pellegrino

Background:

Breast Cancer is the most common type of cancer for women in the United States¹, but unlike other cancers, we can detect its presence early using routine mammography screenings. There is evidence that the widespread use of mammograms are effective in the prevention and reduction of breast cancer mortality².

However, during the Covid-19 pandemic, rates of basic cancer screenings, including breast cancer, all declined³. In the “post-pandemic” world, the Rowan-Virtua Family Medicine Office has noticed that many female patients have not followed their recommended schedule for routine healthcare screenings; years after the height of the pandemic. This study aims to investigate the reasons why.

Purpose:

- Survey how many women have completed their annual mammograms since the Covid-19 pandemic.
- Uncover barriers affecting patients’ ability to schedule and receive their mammograms.

Methods:

IRB-approved, survey-based study (PRO-2023-149) distributed to female patients between the ages of 40-75 while attending their appointment in-person at the Rowan-Virtua SOM Family Medicine Office in Stratford, NJ. Patients were able to decline or withdraw at any time.

The survey consisted of 14 questions pertaining to patient demographics, age range, mammogram history, and personal/family breast cancer history. Qualtrics survey self-reported data was analyzed using SPSS software.

Limitations:

- Patients who fit the inclusion criteria did not show up for their appointment.
- Patients did not want to be seen by medical students.
- The office was undergoing construction and cancelled some appointments for patients who fit the inclusion criteria for the study.

Results:

- A total of 65 patients participated in the study.
- 27.69% of participants (N = 18) have a family history of breast cancer.
- 3.08% of participants (N = 2) have a personal history of breast cancer.
- 29.23% of surveyors (N = 19) have had an abnormal mammogram.
- At the time of this survey, in June 2023, 26.15% of patients (N = 17) already completed their annual mammogram.
- 16.92% of participants (N = 11) had their next mammogram scheduled.

Patients reported how different factors affected their willingness to schedule their mammogram on a rating scale from 0 to 5 (0 = no effect, 5 = major contributor).

- 81.54% rated access to transportation as having no effect. 6.15% rated access to transportation as a major contributor (5/5).
- 81.54% rated worry of contracting Covid-19 as having no effect. Only 3.08% rated worry of contracting Covid-19 as a major contributor (5/5).
- 86.15% rated location of the doctor’s office as having no effect on their scheduling ability (0/5).

Ages of Participants

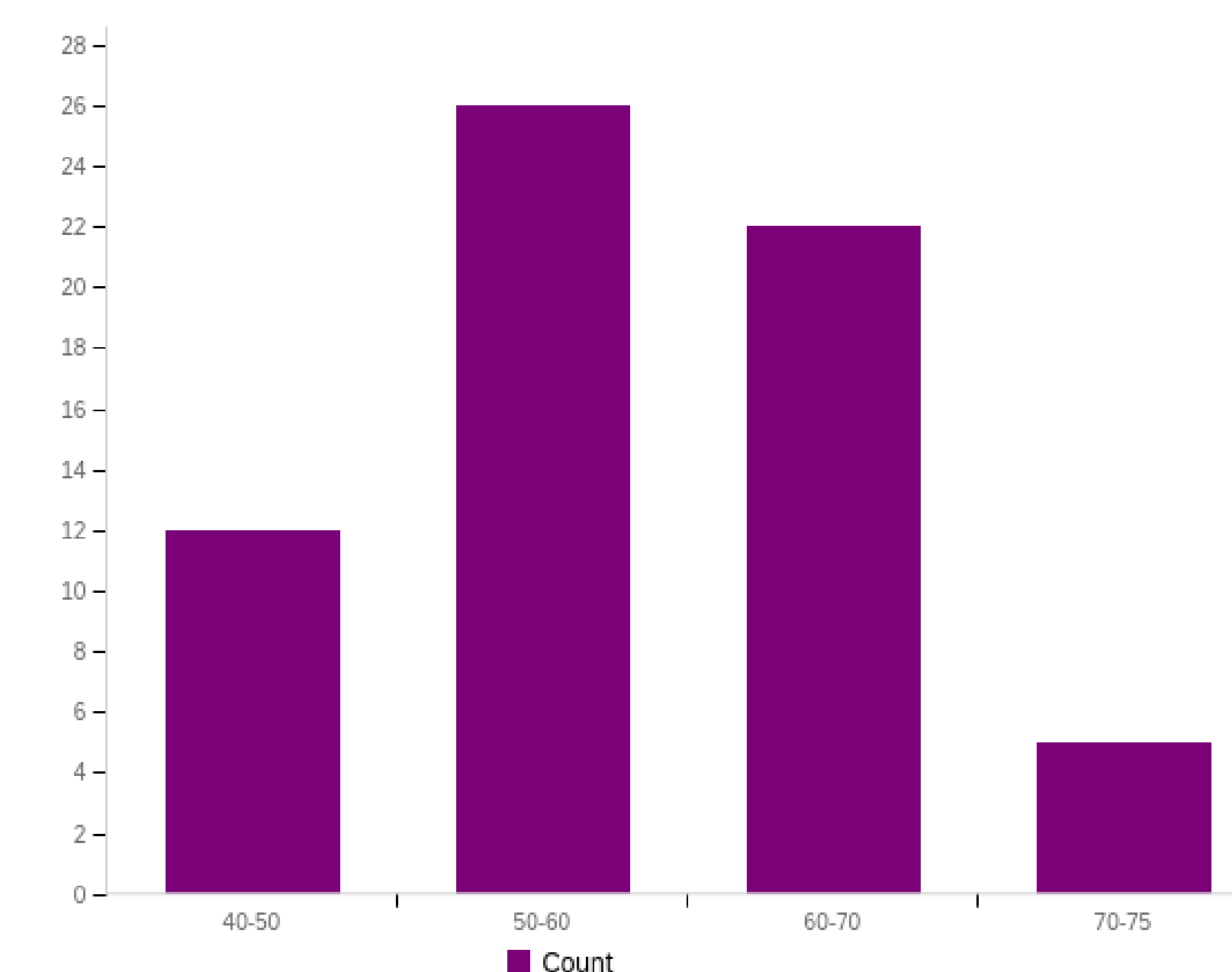


Figure 1: Age distribution of participants

Demographics	Percentage
White or Caucasian	52.31%
Black or African-American	29.23%
Hispanic or Latino	10.77%
Asian or Pacific Islander	1.54%
Other	6.16%

Figure 3: Participant demographics

When was your last mammogram?

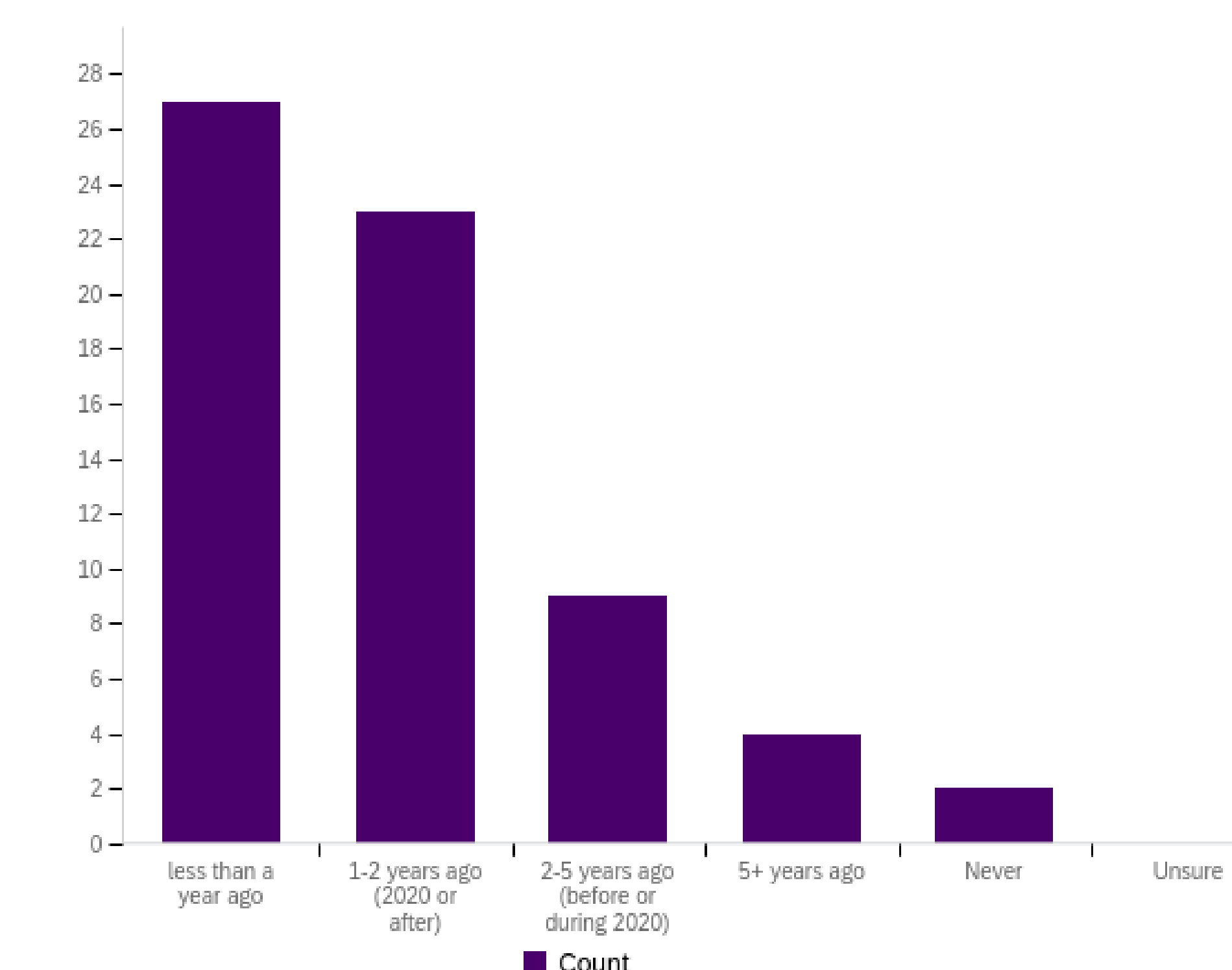


Figure 2: Survey results regarding occurrence of last mammogram

How does the time commitment of appointments keep you from scheduling your mammogram? (Scale of 0 to 5)

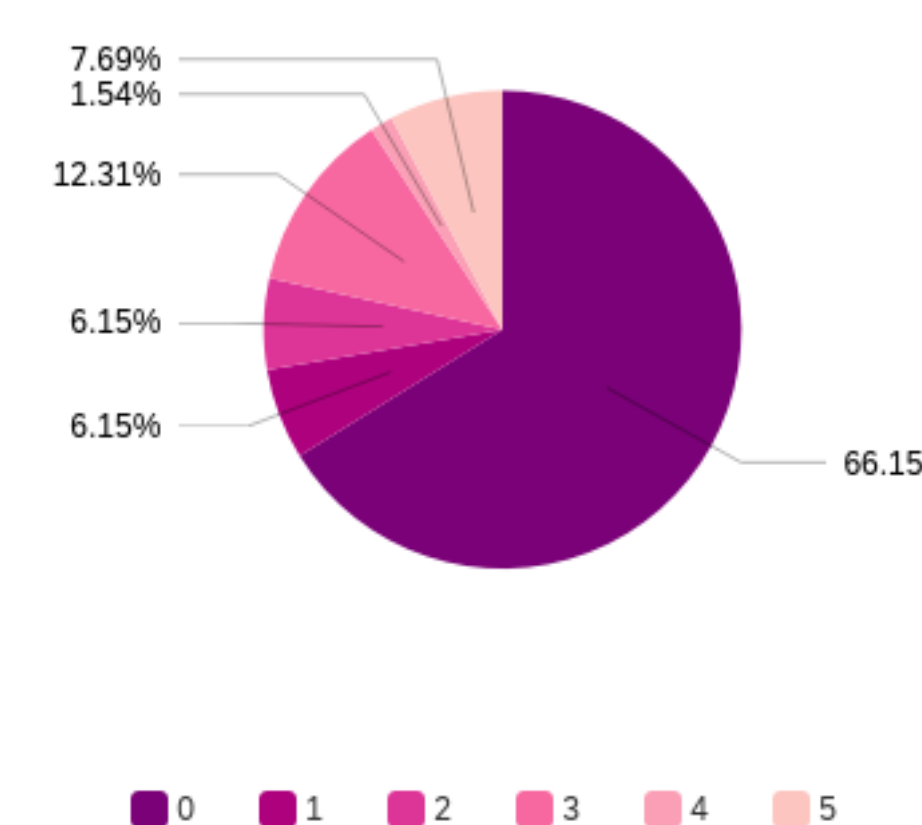


Figure 4: Survey results rating the effect of time commitment of appointments on scheduling mammograms

Conclusions:

The results show that compliance with American Cancer Society (ACS) mammogram screening guidelines⁴ was 41.54%. This is concerning since 3.08% of our patients have a personal history and 27.69% have a family history of breast cancer, while 29.23% have had abnormal mammograms in the past.

The survey revealed the widest variety of reasoning for not staying within the ACS guidelines to be due to the time commitment of mammogram appointments (Figure 4). The data showed other factors including access to transportation, location of the office, and worry of contracting Covid-19 having minimal effect on why patients have not received their mammogram.

This data gives a glimpse into the ongoing factors that are still affecting patients’ ability to receive preventative health screenings, years after the pandemic has subsided. There are still unknown factors that may be uncovered also affecting female patients’ ability to complete mammograms.

Future directions:

- Emphasize the importance of mammography screenings and early detection of breast cancer with all female patients of eligible age.
- Urge patients to follow through with their mammogram screenings.
- Future research to study how to make the timing of mammogram appointments more efficient. Share the results with radiology offices to become aware of the effect of time commitment on patient scheduling.
- Uncover further boundaries keeping patients from receiving mammograms.

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References:

