326 (PB-121) - Mammography screening among women living in Reunion Island (South Indian Ocean)
Rajae Touzani, Marc Karim Bendiane, Emmanuel Chirpaz, Anne-Déborah Bouhnik, Léa Bruneau, Julien Mancini, Laetitia Huiart

To cite this version:

HAL Id: inserm-02083742
https://inserm.hal.science/inserm-02083742
Submitted on 29 Mar 2019

HAL is a multi-disciplinary open access archive for the deposit and dissemination of scientific research documents, whether they are published or not. The documents may come from teaching and research institutions in France or abroad, or from public or private research centers.

L’archive ouverte pluridisciplinaire HAL, est destinée au dépôt et à la diffusion de documents scientifiques de niveau recherche, publiés ou non, émanant des établissements d’enseignement et de recherche français ou étrangers, des laboratoires publics ou privés.
Breast cancer is the most frequent cancer among women, accounting for almost 1.4 million worldwide. The incidence in Tunisia is approximately 35.1/100,000 according to the Northern-Tunisian Cancer Registry 2007–2009. However, early breast cancer (ECB) remains a rare entity in developing countries. The aim of this study was to describe the epidemiological, clinical, pathological and therapeutic characteristics of ECB among the Tunisian population as well as the outcomes of its management.

Materials and Methods: This retrospective study involved 61 women treated for ECB in the medical oncology department of the Military Hospital of Tunis over a period of 38 months between June 2013 and July 2016.

Results: The average age was 55 years and 11.5% were younger than 40 years. Mammography was performed in all cases. Screening was inaugural in 20.7%. Invasive ductal carcinoma was the most common histological type accounting for 83.6%. The tumor had grade II SBR in 56%. Lymph node invasion was observed in 64% of cases. Radical mastectomy (RM) was achieved in 73.8% of patients while breast-conservative surgery (CS) in only 26.2%. Radiotherapy and chemotherapy was performed in 90% and 93.4%, respectively. For a median follow up of 20 months, the overall survival (OS) was 100% for 1 year and 91.9% for 2 years. Disease-free survival (DFS) was respectively 96.2% and 93.8%. In our study, OS was significantly correlated with SBR grade but not with others known prognostic factors. Furthermore, patients treated with CS had a 2-year OS better than those treated with RM (100% versus 83.3%), but DFS was similar in both subgroups when we adopted minimal or maximalist attitude in the follow-up.

Conclusion: Prognosis of EBC is excellent. Screening mammography is highly recommended. It should be generalized in developing countries in order to reduce breast cancer mortality and morbidity. Treatment should be multidisciplinary and follow-up minimalist. Future trials may define the optimal management strategies for these tumors with the least cost.

Mammography screening among women living in Reunion Island (South Indian Ocean)

T. Rajase1, M.K. Berdiane2, E. Chirpaz3, A.D. Boughn1, L. Brunet4, J. Mancini1, L. Huiart3.

Materiel and methods: A cross sectional survey has been conducted by phone questionnaire to 1000 women aged 25–65. Question on use of screening mammography was asked to all respondents. Univariate and multivariate statistical analyses have been performed to identify the associated factors with mammography use during the two previous years.

Results: Among women included in the survey, 33.9% have done a mammography during the past two years, 20.9% have done a mammography more than two years ago and 45.2% have never done a mammography. Among the 417 women aged from 50 to 65 years (i.e. those concerned by the organized breast cancer screening every two years), when comparing those who have done a mammography during the past two years (63.9%) to the others (36.1%), associated factors found were: reporting a low income, and/or a low literacy level, reporting a regular gynecologic follow-up, and having done a vaginal smear in the past two years (as recommended by medical authorities).

Conclusions: Social inequalities are major in Reunion Island and directly affect health behavior such as breast cancer screening by mammography. Public Policy have to be implemented in Reunion Island to promote specific action toward low income women, especially health education to increase health literacy.

Cost of breast cancer opportunistic screening and trends in mammography coverage within the Brazilian National Health Service between 2008 and 2016

R. De Freitas Junior1, D.G. Netto-Rodrigues1, R.M. Rahal1, R.S. Correa2, P.A. Gouveia1, E. Martins1, J.E. Peixoto3.

Purpose: To evaluate breast cancer screening costs and coverage within the Brazilian National Health System (SUS) in the country’s regions, states and Federal District during 2008–2016.

Methods: An ecological time series analyzing breast cancer screening within the SUS in women aged 50–69 years. Coverage was calculated from the ratio of the number of mammograms conducted and the expected number for the target population. Joinpoint regression analysis was used to calculate annual percent changes (APC) in coverage.

Results: Around 19 million mammograms were performed in 50–69-year-old women within the SUS during 2008–2016 at an approximate cost of US $260 million. Coverage increased nationwide in 2008–2012, remaining stable thereafter. Regionally, only in the northeast did coverage increase throughout the entire study period, while in the south coverage initially increased, then fell, and in the north, southeast and Midwest, coverage increased, then stabilized. Coverage increased significantly in 8/26 states (31%) during the period and stabilized in 5 (19%). In 12 states (46%), an initial increase preceded stabilization in 11 (82%) and a reduction in coverage in 1 (0.8%). In another state coverage initially stabilized, increasing thereafter. In the Federal District, the APC initially stabilized, then decreased.

Conclusion: Time-trend analysis showed that mammography coverage within the Brazilian SUS doubled, possibly indicating that public policies were effective albeit insufficient for the organized screening recommended by the World Health Organization. Growth differed between regions and states, with a tendency for this situation to worsen, as highlighted by the APC for the final 4-year period, showing stabilization.

Impact of special subpopulations of breast cancer on survival in Egyptian patients: Breast Gynaecology International Cancer Society (BGICS) study

H. Elghazaly1,2, M. Kamal1, A. Nagy3, S. Zak1, G. Elisahraeny1, N. Elwasly1, A. Gaballah1, M. Han1, Z. Eidaly1, S. Nigm1, A. Elkholy1, Y. Abougabal1.