

**REPORT OF THE
VIRGINIA DEPARTMENT OF HEALTH**

**Promote and Emphasize Yearly
Screening Mammograms
(HJR 133, 2010)**

**TO THE GOVERNOR AND
THE GENERAL ASSEMBLY OF VIRGINIA**



HOUSE DOCUMENT NO. 5

**COMMONWEALTH OF VIRGINIA
RICHMOND 2011**

TABLE OF CONTENTS

I.	Authority.....	1
II.	Executive Summary.....	1
III.	Background.....	1
IV.	Conclusion.....	2

I. Authority

House Joint Resolution No. 133, introduced by Delegates McQuinn, Herring, McClellan and Ward and adopted by the General Assembly in March 2010, authorizes the State Health Commissioner to “. . .promote and emphasize yearly screening mammograms as an effective tool in the early detection of breast cancer. . .”, and report on progress in meeting this resolution no later than the first day of the 2011 Regular Session of the General Assembly.

II. Executive Summary

House Joint Resolution 133 was unanimously passed by the Virginia General Assembly in March 2010. The Resolution directed the Department, specifically the State Health Commissioner, to emphasize and promote yearly screening mammograms to women and report its progress to the 2011 General Assembly. In response to the Resolution, the Virginia Department of Health (VDH), in conjunction with partner organizations, has developed a preliminary list of initiatives that highlight the importance of early detection and annual screenings to both the professional audience and the general public. The Department will finalize plans, with additional input from the medical and public health communities, this spring and initiate them during Breast Cancer Awareness Month in October 2011. A final report summarizing the outcome of the activities will be presented to the 2012 General Assembly.

III. Background

Breast cancer is the second most commonly diagnosed cancer for women (following skin cancer) and the second leading cause of death (after lung cancer) among women in the United States. In Virginia, over 25,000 women were diagnosed with breast cancer between 2003 and 2007, and more than 5,300 women died from the disease. Breast cancer has a five-year survival rate of 98 percent if diagnosed in its earliest (local) stage when it is most curable, and only a 27 percent survival rate if diagnosed at a late stage. According to 2008 health behavior survey data, 78 percent of Virginia women 40 years and older reported having had a mammogram in the previous two years (U.S. average = 76%). Mammography screening rates are lower among women who are less educated, lower income, and uninsured. Access to screening mammograms can reduce morbidity and mortality.

VDH supports breast cancer screening for low income women through its Every Women’s Life Program (EWL). Virginia is one of 68 state, territorial and tribal organizations that receive funding from the Centers for Disease Prevention and Control (CDC) to implement a comprehensive breast and cervical cancer detection program. To be eligible, women must be between the ages of 40 – 64, meet federal income guidelines, and be uninsured or underinsured. Additional funds earmarked by the Virginia General Assembly allow EWL clinicians to provide diagnostic testing to eligible women between

the ages of 18-39 who are symptomatic for breast or cervical cancer. During FY10, EWL screened over 7,000 women and detected 126 cases of breast cancer. In addition to providing screenings, EWL provides outreach, patient education and works closely with medical providers, partner agencies and professional organizations to promote the importance of breast cancer screening.

However, barriers to obtaining breast cancer screening are not always economic. Lack of awareness plays a part as well. Addressing awareness and identifying efforts to promote appropriate annual screening is VDH's response to the charge in House Joint Resolution 133.

In September 2010, VDH convened a preliminary task force comprised of Virginia community leaders in breast cancer care and advocacy to assess perceptions regarding screening and the impact of the changes in the U.S. Preventive Services Task Force (USPSTF) guideline, and suggestions for potential activities to promote and emphasize the importance of annual breast cancer screening. The Department will conduct an additional meeting with an expanded task force that includes clinicians who provide care to at risk women, routinely interpret the screening guidelines and diagnose and treat breast cancer. The expanded panel will add primary care providers (including those serving populations with low rates of mammography screening and/or high rates of breast cancer), breast health specialists, and community representatives. The Task Force results expands the understanding of current practice using guidance, recommendations and data regarding breast cancer screening, diagnosis and treatment that will assist in finalizing a program to promote and emphasize yearly screening mammograms by April 15, 2011. Implementation will be set to coincide with "Breast Cancer Awareness" month in October with the intervening months to encompass outreach, education and training.

V. Conclusion

The Virginia General Assembly unanimously passed House Joint Resolution 133 in March 2010, which directed the State Health Commissioner to promote and emphasize yearly screening mammograms. In response to this legislation, the Department assessed community and advocate perceptions regarding screening breast cancer screening, current efforts directed toward screening and will assess implementation of the screening and treatment guidelines by the professional community. Results of these formal assessments will yield action steps to promote yearly screening mammograms. A final report summarizing the outcome of the planned activities will be presented to the 2012 General Assembly.

