



Breast cancer screenings decrease

Doctors call for advocating for a reversal

By Cindy Schrauben

Since the COVID-19 pandemic began, fewer people across the United States have sought medical care. According to the Centers for Disease Control and Prevention, **40% of people surveyed said they'd delayed urgent or routine healthcare because of the pandemic.**

The study found that 36% of women delayed routine care during the pandemic.

Unfortunately, this trend is reflected in the number of women seeking care through the Tree of Love program. In 2021, the Ascension Borgess Foundation funded 428 procedures for 87 women through Tree of Love, down from 670 procedures for 125 women in 2020.

These trends need to be reversed, says Dr. Jennifer Frink, Medical Director for Ascension Michigan Women's Health Service Line.

"To nobody's surprise, there was an impact on people's healthcare and health outcomes based on that delay," says Dr. Frink. "There was a Harvard study that surveyed patients in their region, and 20% of people in their study delayed care. But of that 20%, over half of them felt that

they had a negative health impact because of that delay." Dr. Frink says there is hope. "We've seen some numbers (of patients seeking medical care) bounce back. But not to where it was before the pandemic."

Why, now that COVID vaccinations are readily available and the crisis has eased, are patients not seeking healthcare in the numbers they were pre-pandemic? It's complicated, Dr. Frink says, and possibly tied up in concerns about COVID and financial anxiety.

"Delaying care or not delaying care is a complex decision. The perceived risk versus benefits are what patients use to make those decisions," she says. "But the reality is that before the pandemic started, there were financial drivers. Those financial pressures are still there. In fact, they have grown.

"Put that on top of the perceived risk of going into a healthcare environment," where women are weighing their risk for breast cancer against other potential risks such as exposure to the COVID virus at their appointment.

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"Women ask: 'What's the bigger risk for me?'"

While the answer is different for every woman, Dr. Iman Mohamed, Medical Director for the Ascension Borgess Cancer Center, says every woman is at risk for breast cancer. Dr. Mohamed says that some women know they are at higher risk for breast cancer due to family history, but that is a small percentage of breast cancer cases.

"Only seven to 10% of breast cancers are genetic," says Dr. Mohamed, a medical oncologist with a special interest in breast cancer. "Most women do not have a genetic risk for breast cancer, so all women must get screened. No one is immune."

The number one risk factor for breast cancer is simply being a woman, Dr. Mohamed says, and the second is age. Breast cancer is "a disease driven by estrogen, which women have much more of than men. White women, in general, have a one-in-eight lifetime risk of getting breast cancer, and that risk is age dependent. Black women have a lower lifetime risk but a higher incidence of early and more aggressive biology of cancers when they develop.

"Breast cancer is a disease of older women," Dr. Mohamed continues. "There are more cancers as people get older because cancer is a 'mistake' in cell division that fails to get corrected or for the resulting faulty cell to get destroyed." These mistakes in cell division happen more often as we age.

While breast cancer occurs in older women more often than younger women, it is vital that all women begin annual breast cancer screening, including mammograms, by age 50. **Dr. Mohamed urges women to begin yearly mammograms at 40 if their health insurance covers it.**

"Screening through mammography picks up tumors that are less than a centimeter, which is more difficult to detect through clinical exams. These tumors can be deep in the breast," Dr. Mohamed says. "When breast cancer tumors are found and smaller than one centimeter and haven't spread to lymph nodes, the survival rate with treatment approaches 90%, at least in most patients."

When a woman has a family history of breast cancer, Dr. Mohamed says, she should begin getting mammograms and breast MRIs when she is five years younger than the youngest person in the family diagnosed with breast cancer.

"If a family member is 40 at the time of diagnosis, then it's kind of silly to wait until you're 40 for initial screening", Dr. Mohamed says. "Breast cancer takes time to develop, and generally, it can be anywhere from two to five years (before it is detected). So, you want to start screening at 35."

Help spread the word

As Dr. Jennifer Frink points out, there are many reasons the number of breast cancer screenings is down from pre-pandemic levels. Because it is a complex situation, the solution to how to bring more women in for mammograms is also multifaceted. However, **advocating for women to get mammograms is vital.**

"We need all providers, not just OB-GYNs, asking patients if they've had their mammogram," Dr. Frink says. "If a patient is uninsured or underinsured, doctors must make them aware of Tree of Love."

Advocacy must go beyond medical providers, she says. **"We need to advocate in the community** that these services are important and available. Advocate in whatever community you are in – church, school, wherever you interact with people regularly."

"Spread the word! If finances are a challenge, don't let that be a barrier," Dr. Frink says, noting that Tree of Love is there to help women pay for breast cancer screening and care. "Through the generosity of donors, we have more resources now than we've had in the past."

Thank you for investing in women's healthcare!

Together we raised **\$106,719** for lifesaving mammograms and breast health services.

You are making a direct impact on women and families right here in your community.

The Tree of Love program at Ascension Borgess Hospital, Ascension Borgess-Pipp Hospital, Ascension Borgess-Lee Hospital and Ascension Borgess Allegan Hospital is directly impacting women and families in Allegan, Berrien, Barry, Calhoun, Cass, Kalamazoo, Ottawa, St. Joseph, and Van Buren counties.

Thank you for supporting the Tree of Love. You joined more than 550 donors in southwest Michigan who have raised over \$550,000 since the inaugural launch in 1985.

Contact Tree of Love

Uninsured or underinsured patients in southwest Michigan with a family income of less than 250% of the poverty level may qualify for free breast health services through Ascension Borgess Tree of Love. Call 269-226-6999 to see if you are eligible and to schedule a free mammogram.



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Your safety is our top priority. All 2022 Tree of Love events will follow the most up-to-date CDC guidelines and regulations on in-person events.

To make a donation or become a sponsor
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Donation Levels

When you donate to the Tree of Love campaign, you have the opportunity to honor or remember a loved one with a light on the tree.

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