



Title	Mammography Screening in the County of Funen 1993–1997. An HTA Report
Agency	DACEHTA, Danish Centre for Evaluation and Health Technology Assessment National Board of Health, DK-2300 Copenhagen S, Denmark; Tel: +45 72 22 74 48, Fax: +45 72 22 74 07; www.dacehta.dk
Reference	DACEHTA Report 2004; 4(1). Danish, English summary. ISBN: 87-91437-31-8 (online): www.sst.dk/publ/Publ2004/CEMTV_mammo_fyn.pdf

Aim

To evaluate the economic and psychosocial consequences of regular mammography screening. The project was extended to include an evaluation of the radiological and clinical effects of the first two screening rounds.

Conclusions and results

Radiological and clinical effects: Potential advantages of mammography screening include a decrease in breast cancer mortality, an increase in the use of more gentle methods (eg, breast conserving surgery instead of mastectomy), avoidance of removing all lymph nodes in the axilla if the sentinel node is free of metastases, and a reduced use of adjuvant therapy. The main disadvantage of mammography screening is the risk for false-positive and false-negative test results. A conclusion is that the results from the first and second screening rounds are considerably better than expected. The participation rate is higher and the recall rate is lower. Surgical frequency is as expected. The percentage of females with breast cancer is higher, and the corresponding percentage of females with a benign disease is lower, than expected.

Psychosocial consequences: The psychological consequences from participating in a mammography screening program relate partly to the general effect of screening participation and partly to the problem of false-positive and false-negative findings. Questionnaires of the screening project in Funen found a generally high level of satisfaction with the organization of screening. Hence, for 90% of the females, the screening program does not lead to more focus on breast cancer, or a generally greater concern about cancer.

Economic consequences: Introducing mammography screening not only leads to changes in the diagnostic procedure, but it also affects the treatment of breast cancer patients through increases and cutbacks concerning different areas in the course of treatment. Overall, the results indicate that mammography screening leads to a total increase in the costs for diagnostic procedures and

treatment of breast cancer. However, some of these costs are counterbalanced by savings in other areas, mainly associated with adjuvant oncological therapy and treatment for recurrent disease. However, from a societal perspective, the costs are essentially higher because the time and transportation costs for women must also be included.

Methods

The general aspects of mammography screening are addressed through a survey of the literature. The economic and psychosocial consequences of regular mammography screening are evaluated from data collected from 2 screening rounds, questionnaires, and interviews. The material is population based, comprising all females aged 50 to 69 years in the county of Funen, Denmark, treated for tumors in the breast within the time intervals specified.