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The equity of access to mammography in Spain.

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Abstract

Background: Equity, commonly defined as "equal access for equal need", can be measured by the extent to which needed medical care is received. Most experts agree that women of a certain age should receive periodic mammograms to screen for breast cancer. In this study women are considered to have access to mammography if they have had at least one mammogram in the last two years.

Objectives: 1) To determine the proportion of women aged 40 to 70 years who have had at least one mammogram within the last two years and 2) to analyze the association between access to mammography and various sociodemographic and behavioral factors.

Methods: Cross sectional study by population survey. The sample was composed of 3,218 women between 40-70 years of age who were representative of the whole country, selected by stratified multi-stage cluster sampling. A standard questionnaire was used to collect data by personal interview on the dependent variable (mammogram performed within the last two years: between April 1992 and April 1994) and the independent variables (factors related with access to the test). We made a univariant study of the association between these factors and access to mammography using the Mantel Haenszel chi-square and Student's t tests. Statistical significance was assigned at the $p < 0.05$ level.

Results: Preliminary analysis of the results showed that 22.2% [SE 1.4] of the women had received at least one mammogram in the last two years. Women who had received a mammogram were significantly younger (52.6 years [SD 7.7] than those who had not (55.6 years [SD 9.0]). The proportion of women who had received a mammogram was lower among those who lived in smaller municipalities (19.4% in municipalities of less than 50,000 population vs. 25.1% in larger municipalities), who had less education (12.6% of those with incomplete primary education vs. 36.5% of those with university studies), and who had smaller family incomes (12.7% of those with family incomes of less than \$400 a month vs. 33.0% of those with more than \$1,600). Almost half (49.4%) of the women whose doctors had recommended they have a mammogram had done so, as compared to only 12% of those whose doctors had not. No association was found between having had a mammogram in period studied and direct family history of breast cancer (24.8% of those with a family history had had a mammogram vs. 21.8% of those without), nor was there any association with number of children (mean of 2.6 children in women with previous mammogram vs. 2.7 in those without) or number of breastfed children (2.0 children vs. 2.2).

Conclusions: Less than one-fourth of Spanish women in the age group for whom periodic mammograms are recommended have received the test in the last two years. Women who have not been tested are more likely to be older, less educated, have smaller incomes, and live in smaller municipalities than women who have. Further analysis of these data will be made to determine the weight of each factor in an explanatory model (logistic regression).

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