Only a third of area hospitals catch breast cancer early

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Area racial gap in disease's mortality is growing

Comments
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Only about one-third of Chicago hospitals are able to show that they find breast cancer when it's small or provide treatment within 30 days of diagnosis -- two factors that can improve a woman's chances of survival.

Those are among the Metropolitan Chicago Breast Cancer Task Force's findings in its first snapshot of how well Chicago area hospitals screen for and treat breast cancer.

New figures from the Sinai Urban Health Institute also provide further evidence that Chicago's racial gap in breast cancer mortality has grown steadily over the last two decades, outpacing similar disparities between black and white women in New York City and the nation as a whole.
Timely treatment and finding small cancers were two of six quality benchmarks included in the task force’s report, which relied on data reported by 40 hospitals involved in the Chicago Breast Cancer Quality Consortium.

Areas in which Chicago hospitals fared better were following up on suspicious mammograms and testing tumors for signs of invasive breast cancer, the task force reported Wednesday.

But the report doesn’t tell the whole story, since the task force wasn’t able to tell whether a hospital was falling short in the care it was providing or the records it was keeping, task force executive director Anne Marie Murphy said.

“A hospital may give you a number that would show a low number of small cancers being detected. But it could be that's all that they had documented,” Murphy said.

Even if hospitals are providing quality care but not documenting it, that's still a problem, since facilities won't know where they need to improve until they start tracking the numbers, Murphy said.

"This tells us that there's a lot of room for improvement," she said.

Also included in the report were the latest figures from the Sinai Urban Health Institute, whose last report in 2008 showed that black women in Chicago were more than twice as likely as white women to die of breast cancer. This time, the institute averaged the difference in mortality rates for black and white women during three-year intervals from 1981 to 2007.

Between 2005 and 2007, the most recent period for which data are available, black women in Chicago were 62 percent more likely to die of breast cancer than white women, compared with a 27 percent difference in New York City during the same period. The figures also show that the gap between black and white women in Chicago has been growing steadily since 1987, when the death rate for black women was only 2 percent higher.

Today, the task force is holding a rally to call for an additional $31 million in funding for the Illinois Breast and Cervical Cancer Program, which provides free cancer screening and low-cost treatment to uninsured
women. The additional funding would allow the program to provide screening to one in five women who qualify for it, instead of the one in eight the program currently can accommodate, Murphy said.

"We are totally sensitive to the fact that the state is short on money, but early death cannot be a budget solution for women," she said.

Without the program, Hyde Park breast cancer survivor Tonya Hackney, 50, says she wouldn't have gotten the quick diagnosis and treatment that she says saved her life.

Hackney, who was unemployed when her breast cancer was diagnosed last year, said there are still too many obstacles, particularly for low-income women, when it comes to getting breast cancer screening and treatment.

"If you don't know what to ask and what you're entitled to, you don't get the help you need," she said. "Women, even though they need this health care, they get discouraged because of all the red tape."