

## **LOWER-INCOME DISTRICTS RECORDED HIGHER RATES OF ADVANCED STAGE BREAST CANCER CASES AND LOWER BREAST SCREENING RATES**

(19 Sep 2011 - Hong Kong) The Hong Kong Breast Cancer Registry's latest report, Breast Cancer Facts in Hong Kong Report No. 3 ("Report No. 3"), indicates disparities in breast screening awareness and in breast cancer characteristics among different parts of the territory. In Wanchai, the district with the highest household income, half of the breast cancer patients had had regular mammography screening before diagnosis. In the poorest districts of Kwun Tong and Sham Shui Po, less than 20 per cent had had a regular mammogram; 80 per cent had never had one.

The proportion of advanced-stage breast cancers in low-income districts was higher. The Hong Kong Breast Cancer Foundation (HKBCF) calls for women to start routine breast cancer screening, and to seek medical care if any suspicious signs are present. The financially challenged can apply for fee waivers from the HKBCF Breast Health Centre. Since the centre came into service in May 1,300 were screened; of them, 400 are subsidised.

### **70 Per Cent of Breast Cancer Patients Lack Physical Exercise**

Report No. 3 covers 5,393 people who were or are affected by breast cancer. The median age at diagnosis was 48, far below the median age of 60 in the United States and Australia. In the group, some 80 per cent had no family history of breast cancer while the majority had risk factors for the disease. The most common risk factors recorded were:

	Risk factor	%
1	Lack of Exercise (less than 3 hours a week)	72.5
2	No breastfeeding	59.7
3	High level of stress (over 50% of the time)	36
4	Overweight/Obesity	35.2
5	Use of oral contraceptives	30.4

### **Early Detection Saves Lives and Medical Expenses**

**Dr. Polly Cheung**, Chair of the Breast Cancer Registry (BCR) Steering Committee, said at the press conference that the findings of Report No. 3 confirmed the benefits of regular breast screening.



The median size of tumours detected through screening was 1.4 cm, 50 per cent smaller than tumours detected by patients themselves by chance.

The statistics also demonstrate that patients diagnosed at early stages had a lower chance of requiring a mastectomy, chemotherapy or nodal surgery. “Early detection of breast cancer does not only help increase survival, but also saves undesirable suffering and medical expenses. To take a stage II case as an example, the cost of surgery and follow-up treatment can be as much as HK\$650,000. If the cancer is detected at an earlier stage (stage 0 or I), its treatment may require surgery only, which is much simpler and can save 80 per cent of the cost.”

### **Breast Screening Rates Lower among the Less Educated and Blue-collar Workers**

Breast screening, including breast self-examination, clinical breast examination and mammography screening, has been proven to be an effective tool for the detection of breast cancer at an early stage. However, the breast screening rate among the breast cancer patients studied in Hong Kong was low. In particular, the rate of regular mammography screening was 27.4 per cent, compared with 80 per cent in New Zealand, 66 per cent in the United States and 55 per cent in Australia.

According to the report, patients who completed matriculation had a higher rate of regular screening. The screening rate in patients who were non-clerical workers or labourers was as low as 12.1 percent, one-third of the rate among professionals and white-collar workers. By district, the mammography screening rate among patients living on Hong Kong Island was double that of those living in Kowloon or the New Territories.

Dr Cheung said, in Kwun Tong, 80 per cent of the patients had never had a mammogram, topping all other districts. The rates of patients who had never had mammography screening were high in North District, Kwai Tsing, Tuen Mun and Tai Po (about 70 per cent, see table). According to the Census and Statistics Department, these districts have lower household incomes, compared to the overall median household income of HK\$18,000.

The rate of advanced-stage cases (stage III and IV) in the patient group was 12.4 per cent. Advanced-stage cases require more complex and intrusive treatment, and have a lower survival rate. The rate of advanced-stage cancers in patients receiving treatment at public hospitals (16.7%) was twice the rate of private hospital patients (7.4%). The districts with the highest rates of advanced-stage cases were Wong Tai Sin (17.8%), North District (16.0%), Sham Shui Po (15%), Kwun Tong (14.4%) and Kwai Tsing (14.4%).

**Table: Rates of patients who had never had mammography screening (MMG) by district**

District	Median household monthly income (HK\$)	% of patients who had never had MMG	% of regular MMG	% of advanced stage cases
Overall	\$18,000(HK)	<b>62.9</b>	27.4	12.4
Wong Tai Sin	\$15,000	<b>66.9</b>	23.0	17.8
North District	\$17,000	<b>75.8</b>	14.2	16.7
Sham Shui Po	\$14,000	<b>68.5</b>	23.5	15.0
Kwai Tsing	\$14,500	<b>73.0</b>	18.7	14.4
Kwun Tong	\$14,000	<b>80.4</b>	13.2	14.0
Shatin	\$20,000	<b>67.1</b>	22.3	14.0
Tuen Mun	\$16,000	<b>71.1</b>	19.9	12.3
Tai Po	\$16,000	<b>71.0</b>	18.4	12.0
Yuen Long	\$15,000	<b>65.3</b>	24.2	11.2
Islands	\$17,800	<b>64.6</b>	30.5	10.2
Central & Western	\$25,600	<b>41.5</b>	45.2	9.7
Wan Chai	\$29,000	<b>32.6</b>	53.0	3.8

### **Kwun Tong: Early Treatment Significant Improvement**

**Dr. Sharon Chan**, BCR Steering Committee member and Clinical Director of Kowloon East Cluster Breast Centre (KEC) said the lack of breast cancer awareness led to delayed diagnosis and treatment. A survey conducted by the United Christian Hospital in 2006 showed that around 30 per cent of its breast cancer patients in Kwun Tong were diagnosed at advanced stages. Most had low level of education and an low-income. In view of the situation, the Hospital Authority Kowloon East Cluster established a Breast Centre in 2008 to provide one stop service for patients from examination, treatment, supporting service to education.

Dr Chan added, "There has been significant improvement in the treatment and management of breast cancer cases since the establishment of KEC Breast Centre. About 97 per cent of patients wait less than 60 days between diagnosis and first treatment; the waiting time meets the performance target set by the HA. The average waiting time for a patient to be referred to Special Out-Patient Clinic is 7 days whilst the average waiting time for diagnosis is 1-2 weeks." To enhance public awareness in breast examination, the KEC Breast Centre not only hosts regular

health education seminars, but also starts referring cases to the HKBCF Breast Health Centre for diagnosis, hoping to expedite the process.

### **Subsidies Allow Free Breast Screening**

“Screening fees and waiting time should not prevent breast health for anyone,” said **Mrs. Eliza Fok**, Chairman of the Foundation. She urged women to start their breast screening programme at 40. “The HKBCF Breast Health Centre exists to provide all with expedient, affordable yet professional and quality assured breast-screening services.” The centre also provides fee waivers to women with low incomes or who face difficulties in affording breast screening.

*Enquiries for Free Breast Screening Programme: 3143 7333*

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Photo caption: Dr. Polly Cheung, Founder of the Hong Kong Breast Cancer Foundation (left) calls for the government to step up its effort on promoting breast cancer screening. Government-run population-based breast screening programmes have been implemented in some 20 countries and regions, including Mainland China, but not Hong Kong .



### **About Hong Kong Breast Cancer Registry**

The Hong Kong Breast Cancer Registry (BCR) was launched in 2007 by the Hong Kong Breast Cancer Foundation as the most representative registry and monitoring system for breast cancer. It collects data from all local breast cancer cases, including demographics, risk exposures, cancer characteristics, treatment methods, clinical outcomes and survival. The analyses and research based on the data will allow patients, medical professionals and policy makers to better understand the facts about local breast cancers. It also provides insights and evidence to support our advocacy for better prevention and breast cancer care in Hong Kong.

To date, some 6,000 breast cancer patients and survivors have joined the BCR. The 25 medical facilities participating as co-investigators are 15 private hospitals and clinics, 6 of the 7 oncology centres of public hospital, including the oncology departments of the University of Hong Kong and the Chinese University of Hong Kong.

### **About Hong Kong Breast Cancer Foundation**

The Hong Kong Breast Cancer Foundation was set up on 8 March 2005, as a non-profit charitable organisation dedicated to eliminating the threat of breast cancer to the local community through education, support and research & advocacy. Its missions are: to educate the public about breast cancer and promote early detection; to support breast cancer patients on their road to recovery; to advocate better breast cancer care in Hong Kong.