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Patterns and Predictors of Screening for Breast and Cervical Cancer in Women with CKD

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Abstract

Background and objectives Breast and cervical cancers are prevalent in women with CKD, but it is uncertain how often screening for these cancers should be undertaken given concerns that the benefits of screening may be fewer and the harms greater in women with CKD than in the general population. We examined patterns of breast and cervical cancer screening in women on the basis of CKD stage and age and assessed predictors of screening.

Design, setting, participants, & measurements We conducted two population-based cohort studies (breast and cervical cancer screening) from 2002 to 2013 using linked administrative health care data from Ontario, Canada. A total of 141,326 and 324,548 women were included in the breast and cervical cancer screening cohorts, respectively.

Results The 2-year cumulative incidences were 61% among women without CKD, 54% for those with CKD stages 3a and 3b, 37% for those with CKD stages 4 and 5, and 26% for women on dialysis. Similar patterns were observed for the 3-year cumulative incidences of cervical cancer screening. The associations of breast and cervical cancer screening with CKD were modified by age and CKD stage, where lower incidence of screening in women with advanced CKD compared with no CKD was most pronounced in older age groups ($P < 0.001$). Older age, higher comorbidity burden, and lower-income groups were associated with a lower rate of screening.

Conclusions Most women with advanced CKD do not receive breast or cervical cancer screening. A better understanding of patient and health professional preferences toward cancer screening in CKD is needed along with the outcomes of such screening.

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