

Challenges to the implementation of the New Guidelines for Breast Cancer Early Detection in Brazil

Arn Migowski¹, Maria Beatriz Kneipp Dias¹, Paulo Nadanovsky^{2,3}, Gulnar Azevedo e Silva², Denise Rangel Sant'Ana¹, Airtton Tetelbom Stein^{4,5}.

1 Instituto Nacional de Cancer (INCA), Brazil 2 Instituto de Medicina Social (IMS - UERJ), Brazil
3 Escola Nacional de Saúde Pública (ENSP), Brazil 4 Universidade Federal de Ciências da Saúde de Porto Alegre (Ufcspa)
5. Grupo Hospitalar Conceição (GHC), Brazil

BACKGROUND

The new guidelines for early detection of breast cancer are the first Brazilian Ministry of Health Guidelines based on Systematic Reviews and applies the GRADE System, establishing new standards for guidelines development in the country. The implementation of evidence-based guidelines is a worldwide challenge and traditional strategies based only on the dissemination of their text are insufficient to generate changes in current clinical practice.

OBJECTIVE

To assess barriers that can impact the implementation of these new guidelines and strategies for overcoming them.

RESULTS AND CONCLUSIONS

Despite being based on good quality evidence, these guidelines' recommendations are still counter-hegemonic in the mainstream media, among health professionals, scholars and managers. In addition, they have been, explicitly rejected by the most influential medical societies and advocacy groups in Brazil. A major challenge to the adherence to these new guidelines is the current pattern of use of mammographic screening in the country, including the screening of young women and short interval between examinations. This harmful practice is reinforced by the dissemination of misinformation, which overestimates the benefits and underestimates or even omits the risks of screening, as well as by defensive medicine. There is also a lack of policies and actions aimed at the early diagnosis and management of symptomatic cases in the country. To overcome these barriers, changes related to the regulation of care, financing, and the implementation of a shared decision-making process in primary care are essential. Audit-feedback, academic detailing and incorporation of decision aids are some of the strategies that may facilitate the implementation process of the new guidelines in the country.

Flowchart for implementation of the new guidelines in primary care

