

ANALYSIS OF TIME INTERVAL BETWEEN DIAGNOSIS AND THE START OF THE TREATMENT OF WOMEN WITH BREAST CANCER IN A REFERENCE ONCOLOGICAL CENTER IN RIO DE JANEIRO



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INTRODUCTION

The maximum period of 60 days to start treatment after the diagnosis of malignant neoplasms under the SUS, in use since 2013, seeks to guarantee rapid access to cancer treatment¹.

However, there are several factors that interfere in this dynamic like barriers in the Health System and individual factors²⁻⁵.

OBJECTIVES

To evaluate the interval time between the date of diagnosis and the beginning of the first oncological treatment of women with breast cancer.

MATERIAL AND METHODS

A prospective cohort study that included women diagnosed with breast cancer enrolled at Hospital do Câncer III (HCIII), Instituto Nacional de Câncer (INCA), between october 2014 and april 2015, without previous oncological treatment. Women aged less than 18 years and older than 80 years, without clinical or psychological conditions to answer the questionnaire applied at the time of screening and who died before starting the first cancer treatment were excluded.

Socio-demographic, clinical and related to the first oncological treatment variables were collected.

A descriptive analysis of the data was performed by means of measures of central tendency and dispersion for the continuous variables and absolute and relative frequencies for the categorical ones. The time interval was presented by the median and interquartile variation (IQV). For the analyzes, the SPSS statistical package (20.0) was used.

This project was submitted and approved by INCA Research Ethics Committee (CAAE: 12107913.3.0000.5274).

RESULTS

A total of 662 women were interviewed, of whom 157 were excluded and 505 completed the follow-up.

Regarding the sociodemographic variables, the median age was 56 years (21-80 years), with a predominance of not caucasian (66.3%), living with a partner (50.1%), \geq 8 years of schooling (61.0%), with no current employment (53.9%) and per capita income <1 minimum wage (52.1%). About life habits, 29.1% of the women reported consumption of alcoholic beverages in the last 30 days and 13.1% were current smoking (table 1).

Table 1: Demographic characteristics of women with breast cancer, enrolled in Hospital do Câncer III (N = 505)

Variables	N*	9/6
Ethnicity		
Not-causasian	335	66,3
Caucasian	170	33,7
Marital status		
Living with a partner	253	50,1
Living without a partner	252	49,9
Education		
< 8 years	197	39,0
≥8 years	308	61,0
Current job		
Without employment bond	272	53,9
With employment bond	233	46,
Per capita income		
< 1 Minimum wage	263	52,
≥ 1 Minimum wage	234	46,3
Family history of breast cancer		
No	370	73,
Yes	134	26,
Alcohol consumption (Last 30 days)		
Yes	147	29,
No	355	70,3
Smoking		
No	148	83,
Yes	66	13,1

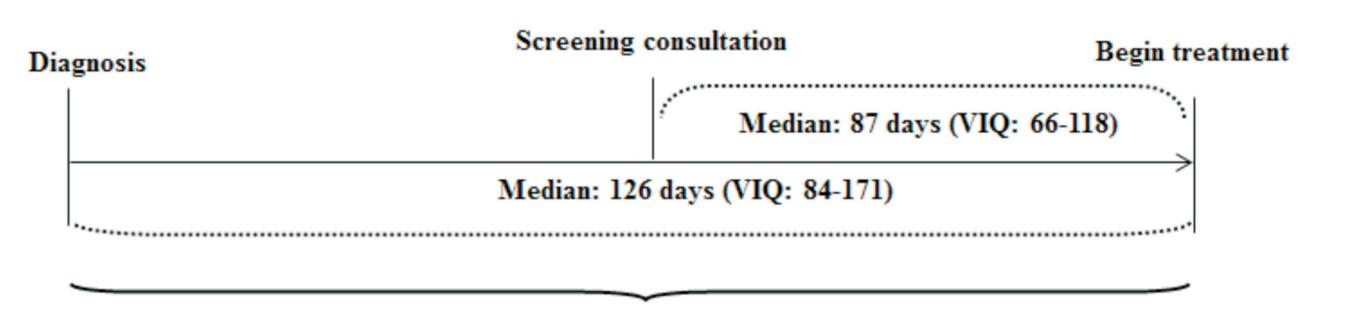
Most of the women found the breast alteration by signal or symptom (73.9%); nodule was the most frequent symptom in 45.0% of the cases. The non-special type breast carcinoma was the most prevalent histological type (81.4%), as well as the intermediate histological grade (grade 2) (62.6%). Clinical staging was advanced (≥ 2B) at diagnosis in 50.7% of the cases. Chemotherapy was the first treatment performed by the majority of the patients (57.6%) (table 2).

Table 2: Clinical and treatment-related characteristics of women with breast cancer, enrolled in Hospital do Câncer III (N = 505)

Variables	N*	9/
Previous diagnosis of benign changes in the breast		
Yes	181	35,8
No	323	64,0
How did you find the current change?		
Symptom	373	73,9
Others	132	26,
First sign or symptom noticed		
Node	227	45,
Others	277	54,
Health services at the first visit		
Sistema Único de Saúde (SUS)	258	51,
Private + others	245	48,
Health service you use		
Sistema Único de Saúde (SUS)	387	76,
Private+ others	115	22,
TNM staging		
Initial (< 2A)	241	47,
Advanced (= 2B)	256	50,
Histological type		
Non-special type breast carcinoma	411	81,
Others	94	18,
Histological grade		
Grade 1 (low)	20	9,
Grade 2 (intermediate)	316	62,
Grade 3 (high)	126	25,
First treatment		
Chemotherapy	291	57,
Surgery	200	39,
Hormone therapy	13	2,
Radiotherapy	1	0,

Differences found correspond to the absence of information

The median time interval between the biopsy result and the start of the first oncological treatment was 126 days (IQV: 84-171), and for only 11.3% this time interval was \square 60 days.



Time intervals

Figure. Median time interval between the diagnosis and the screening visit and between the diagnosis and the beginning of the first treatment

Currently, analyzes are being carried out to evaluate the association between the independent variables and the respective outcome.

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Projeto Gráfico: Serviço de Edição e Informação Técnico-Científica / INCA







^{3.} SALDAÑA, K.U; CASTAÑEDA, C.U. Delay of medical care for symptomatic breast cancer: A literature review. Salud Pública de México, v. 51, 2009.