

**Submission Id: 3484**

**Title**

*(In)Equities in the Prevalence and Rates of Mammography Orders in Low-Income Latina Patients across 21 US States from 2012-2020*

**Priority 1 (Research Category)**

Women's health

**Presenters**

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**Abstract**

Context: Breast cancer is the most common cancer and leading cause of cancer death for Latinas in the US. Mammography is a screening service recommended between ages 50 and 74 at least every 2 years. While prior research has shown Latinas may be more likely to have recent mammography, it is usually based on self-report which is vulnerable to recall bias and does not evaluate screenings over time. Additionally, no studies have evaluated this service by preferred language, a factor shown to be associated with health services utilization. Objective: Estimate the relative odds and rates of mammography orders in low-income Latinas (by language preference) compared to non-Hispanic White patients over a >10-year study period. Study Design: Retrospective observational study. Setting or Dataset: ADVANCE, an electronic health record (EHR) dataset representing a network of US community health centers (CHCs). Population Studied: Non-Hispanic White, Latina Spanish-language preferring and Latina English-language preferring women >50 years-old (N=181,755) seeking care at 561 CHCs across 21 states. Outcome Measures: Odds of ever receiving a mammography order using generalized estimating equations (GEE) logistic regression and rate of orders using GEE Poisson regression adjusting for patient-level covariates. Results: Compared to non-Hispanic White women, Spanish-language preferring Latinas had higher covariate-adjusted odds and rates of mammograms (OR= 2.13, 95%CI=2.07-2.19, RR=1.53, 95%CI=1.50-1.56) while English-language preferring Latinas had similar odds but lower rates of mammograms compared to non-Hispanic White women (OR=0.99, 95%CI=0.95-1.03, RR=0.93, 95%CI=0.90-0.96) Conclusions: English preferring Latinas have lower mammogram order rates which adds to the body of literature on relative inequities in healthcare service utilization. Further EHR and longitudinal research could examine mammogram utilization in this population. Research efforts are needed to understand the higher rates in Spanish-preferring Latinas, and why this group might do better than others in this setting.