Multiple medical problems as a unique risk factor for low utilization of screening mammogram and Pap smear in an underserved population

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**Background:** Screening mammograms and pap smears have shown to reduce mortality by early detection of malignancy. The utilization of these screening tests is influenced by many factors. We discovered opportunities to improve compliance in our resident clinic patients.

**Methods:** The study was conducted by residents during their clinic duties and designed as a cross-sectional study. The study period was two separate clinic weeks. Each resident assessed his own patients during respective encounters at the clinic for compliance with screening tests. Among patients who were not up to date, the reasons were asked with both open statements and directed questions.

**Results:** A total of 56 (N) patients were found appropriate for either screening mammogram (N1= 37 patients) or Pap smear (N2 = 54 patients). Thirteen patients (35%) in Mammogram (M) group and 16 (30%) patients in Pap smear (PS) group were not up to date. The common reason noted was having active or multiple medical issues (10.8% of M group and 9% of PS group) delaying utilization of these tests among other reasons.

**Conclusion:** Previous studies identified factors like ethnicity, age, education level, socioeconomic status and type of insurance influenced the utilization of these screening tests. Our study revealed having active or multiple medical problems as a common reason for low utilization of screening tests in our clinic population. This group of patients can be targeted with interventions like frequent office visits, dedicated health maintenance encounter or follow up by ancillary providers while using minimal resources.

**Biography**

Vedavyas Gannaman completed Internal Medicine training from Saint Peter’s University Hospital, New Brunswick. He aspired to complete a fellowship in the field of Hematology Oncology. Quality improvement projects are his favorite research projects. He is currently working as Chief resident at Saint Peter’s University Hospital.

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