

# Breast Cancer Timeliness to Care Based on Genetic Counseling Services

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## Background

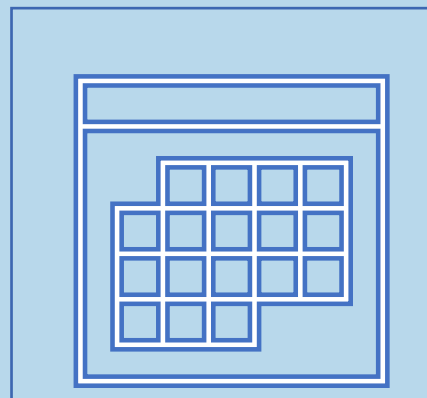
To maximize genetic testing benefits, appropriate and timely risk management must be initiated.

Germline mutations can identify patients for whom bilateral mastectomy is likely beneficial. In the United States, available data are limited regarding genetic testing of breast cancer patients at high risk regarding timing of testing relative to surgical treatment, surgical decision making, and treatment outcomes.

## Objective

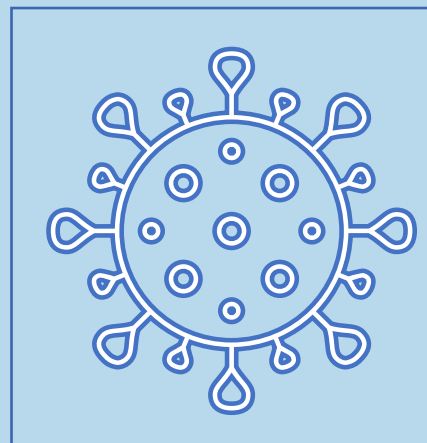
Analyze the impact of genetic testing results on timeliness to breast cancer care

## Methods



Timeliness to treatment was measured utilizing the WHS Cancer Registry database. A retrospective review of data from 2018 – 2021 was performed, using a single-tailed t-test to compare means.

Data were matched with all patients who received genetic counseling services versus those patients that did not.

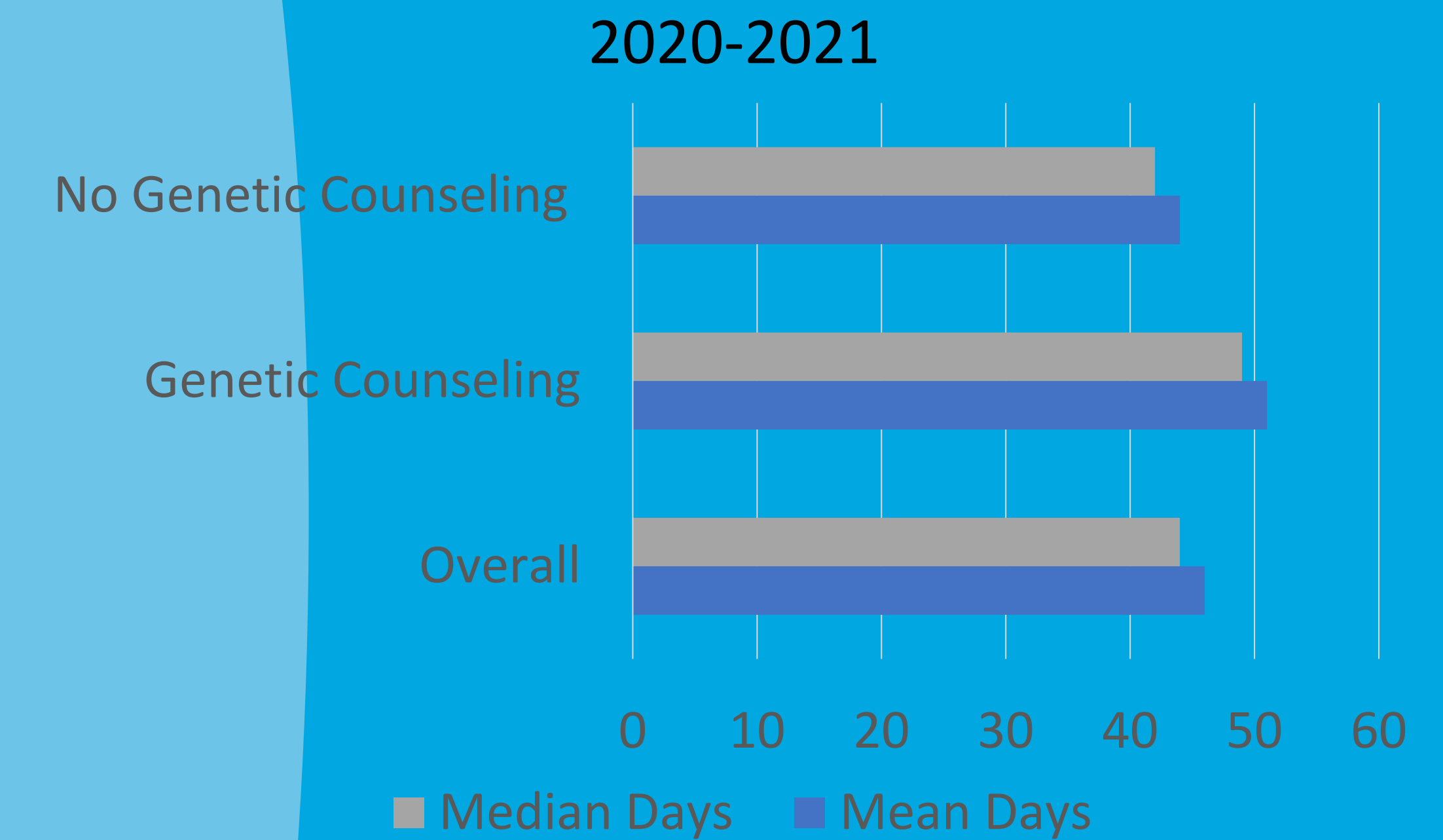
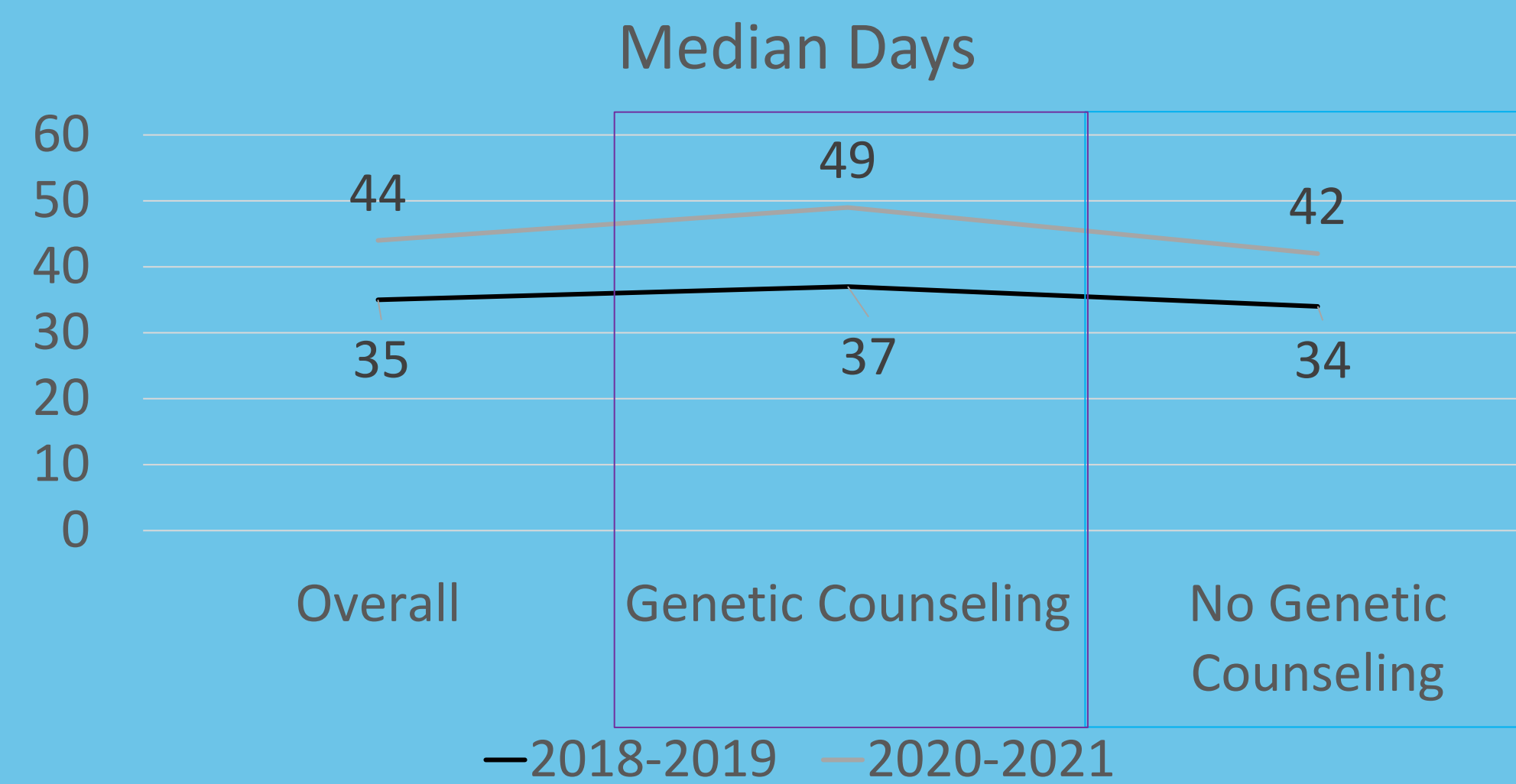
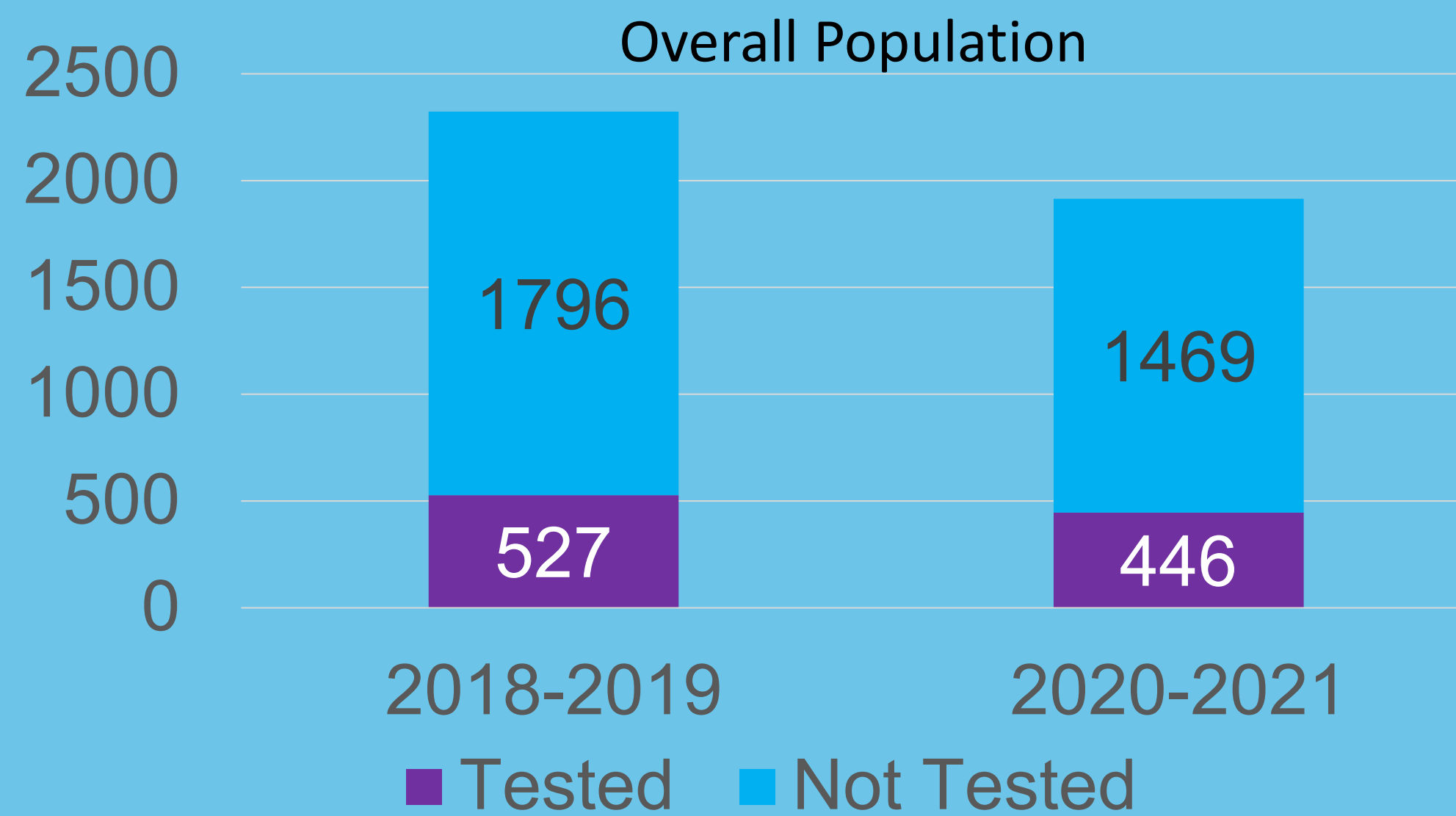


Data were reviewed from 2 years pre-pandemic and 2 years post-pandemic

Data points used to measure timeliness to treatment included the initial date of diagnosis and the date of first treatment.



## Results



This statistically significant finding ( $p < 0.00$ ) can be explained by the following:

- Virtual appointments during shelter in place caused lab delays
- Supply chain issues caused delays in receiving necessary shipments
- Staffing shortages in the genetic counseling department as well as other points of care

## Conclusion

Timeliness to care was affected by genetic counseling during pandemic (added 7 days) as compared to pre-pandemic (added 4 days).

## Implication

Overall, quality of care was not impacted despite the timeliness to care impact, however, adjustments in patient messaging could be implemented to modify patient expectations should future healthcare crises arise.

## Exclusion criteria:

- Stage IV patients
- Patients receiving neo-adjuvant therapy

