

Obesity Is a Barrier to Mammography Compliance

BY ESTHER FRENCH

FROM THE JOURNAL OF
WOMEN'S HEALTH

Younger age, obesity, more recent health plan membership, and lower family income all reduce the likelihood that a woman will complete a mammogram, reported Dr. Adrienne C. Feldstein and her associates at Kaiser Permanente Northwest in Portland, Ore. Younger age increased the likelihood

income, length of health plan membership, and body mass index.

In the study's second phase, a subgroup of 340 women completed a mail-in survey that identified barriers to and facilitators for mammograms by answering yes or no to provided statements such as "I'm embarrassed about having mammogram." Their replies showed that although repeated reminders are effective, significant obstacles still remain.

Pain emerged as one of the major barriers for patients. The study cited 25% of the patients as reporting that a mammogram "causes too much pain," and in obese patients the percentage rose to 31%. The relationship between pain and obesity remains unclear and could be the subject of further investigation, Dr. Feldstein said in an interview.

Meanwhile, she recommended that mammography providers explore ways to

reduce pain for all patients.

"If you have the technician do the initial compression, and then the patient verbally controls the pressure from that point on, that seems to reduce the patient's pain and still preserve the quality of the x-ray image," Dr. Feldstein said.

The study was funded by the National Cancer Institute. Dr. Feldstein and her associates said they had no relevant financial disclosures. ■

The study cited 25% of the patients as reporting that a mammogram 'causes too much pain,' and in obese patients the percentage rose to 31%.

that a woman would report being "too busy" to get a mammogram and that she would have more doubts about its usefulness or accuracy. Family income was a more significant variable than was race in mammogram completion, which is "consistent with findings from other studies," they noted (*J. Womens Health* 2011 [doi:10.1089/jwh.2010.2195]).

In a study of 4,708 women aged 50-69 years, investigators first evaluated a patient's likelihood of completing a mammogram during a 10-month follow-up period after patients received multiple reminders over 3-4 months. Variables included age, visits to an ob.gyn. or primary care physician, race, family

Continued from previous page

ate exposure for the drug's adverse impact upon oocyte yield to be reversed (*Fertil. Steril.* 2009; 92:515-9).

Of course, treatment of an ectopic pregnancy involves only a brief course of methotrexate, not the many years of exposure faced by rheumatology patients. A key question is whether these patients take an irreversible hit to the primordial oocyte pool, or if their oocyte count will eventually recover after they come off methotrexate. Dr. Cooper said she hopes to provide an answer by continuing to follow the small subgroup of participants in her study who have discontinued methotrexate, often because of intolerance. Another yet-to-be-resolved question, she said, is whether prepubertal girls are more protected from methotrexate's adverse effect upon fertility, or at greater risk.

A novel finding in her study was that hormonal contraception – used by 17% of participants – was independently associated with a decline in AMH levels over time. "This is an important observation that warrants further investigation," she said.

Her study is funded by a grant from the Society for Reproductive Endocrinology and Infertility. She reported no relevant financial disclosures. ■

Help her look forward to lighter days

Significant reduction in menstrual blood loss (MBL) by 38% (vs 12% for placebo) in a 6-cycle study

- Significant reduction in menstrual blood loss (MBL) by 38% (vs 12% for placebo) in a 6-cycle study
- Consistent reduction in MBL across all cycles studied —Reduced MBL as early as the first menstrual cycle
- Dosed only during menstruation, for up to 5 days



LYSTEDA™ (tranexamic acid) tablets are indicated for the treatment of cyclic heavy menstrual bleeding. Prior to prescribing LYSTEDA, exclude endometrial pathology that can be associated with heavy menstrual bleeding.

Important Safety Information

LYSTEDA is contraindicated in women with active thromboembolic disease or a history or intrinsic risk of thrombosis or thromboembolism, including retinal vein or artery occlusion; or known hypersensitivity to tranexamic acid.

The risk of thrombotic and thromboembolic events may increase further when hormonal contraceptives are administered with LYSTEDA, especially in women who are obese or smoke cigarettes. Women using hormonal contraception should use LYSTEDA only if there is a strong medical need and the benefit of treatment will outweigh the potential increased risk of a thrombotic event. Do not use LYSTEDA in women who are taking more than the approved dose of a hormonal contraceptive.

Concomitant use of LYSTEDA with Factor IX complex concentrates, anti-inhibitor coagulant concentrates or all-trans retinoic acid (oral tretinoin) may increase risk of thrombosis. Visual or ocular adverse effects may occur with LYSTEDA. Immediately discontinue use if visual or ocular symptoms occur. In case of severe allergic reaction, discontinue LYSTEDA and seek immediate medical attention. Cerebral edema and cerebral infarction may be caused by use of LYSTEDA in women with subarachnoid hemorrhage. Ligneous conjunctivitis has been reported in patients taking tranexamic acid.

The most common adverse reactions in clinical trials (≥5%, and more frequent in LYSTEDA subjects compared to placebo subjects) were: headache, sinus and nasal symptoms, back pain, abdominal pain, musculoskeletal pain, joint pain, muscle cramps, migraine, anemia, and fatigue.

LYSTEDA has not been studied in adolescents under age 18 with heavy menstrual bleeding.

Please see Brief Summary of Prescribing Information on adjacent page.



©2011 Ferring Pharmaceuticals Inc. Lysteda.com 01/11 LYS-04737B

Lysteda™
(tranexamic acid) tablets

Help her look forward to lighter days.