

Disparities in Breast Cancer and the Role of Patient Navigator Programs

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Despite advances in screening techniques and early detection modalities, breast cancer remains the most common malignancy affecting women in the United States. Therapeutic treatment options for breast malignancies vary in nature and are complex, with outcomes dependent on a plethora of variables. Lack of health insurance, racial disparities, limited access to medical care, socioeconomic status, underuse of available therapies, and inadequate follow-up are noted barriers to the diagnosis and treatment of patients with breast cancer. Patient navigation programs have shown a benefit in assisting these patients through screening, diagnosis, and treatment phases. This literature review will attempt to outline the obstacles associated with timely diagnosis and management of complex breast malignancies while highlighting the impact on professional practice.

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Breast cancer persists as the most common malignancy in American women. In 2011, an estimated 230,480 women were diagnosed with invasive breast cancer (American Cancer Society, 2012; DeSantis, Siegel, Bandi, & Jemal, 2011). Various multifactorial causes for disparities in breast cancer care remain prevalent. The most noted barriers to attaining appropriate diagnosis and treatment for breast malignancies include African American and Hispanic ethnicity, low socioeconomic status, access to health insurance, a lack of continuity in medical care, communication challenges, education level, decreased social support, family health priorities, healthcare practices, and cultural beliefs (Ferrante, Chen, & Kim, 2007). The elimination of those noted barriers would significantly reduce the abundance of healthcare disparities for patients diagnosed with breast cancer. This article reviews the current nursing literature on disparities in breast cancer care and the role of the patient navigator program, while providing insight on how health disparities and patient navigation impact professional practice.

Literature Review

The author conducted a thorough review of the literature using the PubMed and CINAHL® databases with the following keywords: *health disparities, breast cancer care, patient*

navigator programs, ethnicity, and socioeconomic status. To understand how barriers affect the diagnosis and treatment of breast cancer, having knowledge of the framework behind breast cancer care is imperative. The National Comprehensive Cancer Network (NCCN) offers clinical practice guidelines based on disease status. Therapeutic treatment options for breast cancer vary in nature and are complex. Guidelines for initial evaluation, treatment recommendations, and follow-up have been established based on the results of numerous clinical trials that have assessed the efficacy of those recommendations (NCCN, 2012). In addition, staging, pathology assessment, treatment approaches, and adequate follow-up must be performed in accordance with NCCN guidelines to achieve optimal clinical outcomes. As researchers continue to debate the most noted barriers to breast cancer diagnosis and treatment, the American Society of Clinical Oncology's (ASCO's) Health Disparities Advisory Group issued a policy identifying low income, lack of insurance, and access to care as the key components in disparities of breast cancer (Dunn, Agures-Collins, Browne, Lubet, & Johnson, 2010).

Lack of Health Insurance and Access to Screening

Despite recommendations for annual breast screening mammography for women aged 40 years and older, lack of adherence