

MEDIA RELEASE

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REGULAR CANCER SCREENING MAY SAVE YOUR LIFE **- Screen for early detection of cancer today, don't delay -**

Fit and healthy mother of two, Regina Marchant, was diagnosed with breast cancer by BreastScreen NSW in August 2014, just two months after her 50th birthday. Back then, she was just another busy woman trying to juggle a full-time job and a family life with two teenage children. After some positive nagging from her husband, she called BreastScreen NSW and booked in for a routine, 20-minute mammogram.

"I was a healthy 50-year old who regularly self-examined and had no cause for concern. I had even had a mammogram in my mid-40s, and that had been fine, so nothing to fear. A few days after my mammogram, I received a letter in the post from BreastScreen NSW inviting me back to have a few more tests to complete my screening. Whilst the letter told me that one woman in twenty is invited back, and that 90% of them are fine, I still felt a little anxious. Without delay, I organised the follow-up appointment, and was back at BreastScreen NSW just a week later," said Regina

In Northern Sydney, statistics from Cancer Institute NSW (www.cancerinstitute.org.au) show there is a higher incidence of breast cancer and mortality in the female population when compared to the rest of New South Wales. The Breast cancer incidence for the Northern Sydney female population is 72.8 per 100,000 compared to 62.4 per 100,000 for NSW (2009-2013). And the mortality rate for this same population is 12.8 per 100,000 compared to 11.4 per 100,000 for NSW (2009-2013). These concerning statistics for Northern Sydney against the state average are a clear call to action for the women residing in the region to screen early.

"A base line of screening rates is established within Northern Sydney general practices with the aim of identifying pockets of patients who have lower or higher screening rates than the New South Wales average and other Northern Sydney regional practices. This analysis is shared with the practice's team for further understanding. If the practice screening rates are lower than the regional and NSW data indicate, the practice and Sydney North Primary Health Network work together to understand where improvements can be made. A 'model for improvement' is then created with the practice. Improvement goals are set with aim of working towards increasing the practices screening rates for breast, cervical and bowel cancer detection," says Sydney North Primary Health Network CEO Lynelle Hales.

The Sydney North Primary Health Network (SNPHN) offers general practices access to data extraction tools to assist with understanding their patient population and areas for quality improvement. This patient data is reviewed by the practice to help them better understand the status of their patients' health. The data is de-identified and shared with the SNPHN team for further analysis. This analysed data helps facilitate potential improvement processes within the practice, enabling the targeting of key patient groups for proactive health management, including the lifting cancer screening rates.

"My journey would have been very different if I hadn't been diagnosed early. Yes, having cancer was upsetting and hard for me and my beautiful family, but because the cancer was detected early through screening I was able to have a mastectomy and the treatment necessary to beat cancer and continue to be a mother, wife and now breast screening advocate," says Regina.

"Many people think that a family history of breast cancer puts you at the greatest risk of developing this type of cancer, but age and being female are actually the two biggest risk factors. Research tells us that 9 out of 10 women who develop breast cancer do not have a family history of breast cancer. Therefore, women aged 50-74 years, should have regular screening mammograms every 2 years regardless of family history," says Director of BreastScreen NSW in Northern Sydney and Central Coast, Meredith Kay.

In October, Regina underwent a mastectomy with skin preserving reconstruction.

"Having gone through this experience, I have become very aware of other women who have been diagnosed with breast cancer, but often at a later stage. Their journeys have been tougher than mine and, in some cases, they have lost the battle. This has made me realise how lucky I was to be screened and detected early," says Regina.

Northern Sydney GP, Dr Gilda Brunello says, "If we discover cancers at the very early stages when we are screening for them, there is a really high cure rate. In the case of cervical cancer, for example, we are detecting things before they even become cancer. The smaller the cancer, the easier it is to treat and the more treatment options we have. So, prevention is the key."

There are numerous reasons why people don't get screened for bowel, breast, or cervical cancer. "Some people don't understand or fear the process. Some people aren't aware of the free screening or bulk billing services available and cost can be a factor. Time, or lack of it, can also be an issue, and some people are simply averse to medical tests or going to the doctor at all. There might also be a language or cultural barrier which can result in a roadblock to screening. Where cultural or English as a second language obstacles are at play it is good to use an interpreter and provide materials on the benefits of early detection in different languages. For special groups in certain locations it is also great to have General Practitioners that speak multiple languages and understand the culture of that particular population. Most free cancer screening services also have interpreters available when you make your booking. Education and understanding is the focus, and as a GP you need to listen to any concerns about the screening processes your patients may have and go about dispelling any myths of misinformation," continues Dr Brunello.

Screening is a process of looking for signs that cancer may be present in the body. For bowel screening it is recommended that you do your screening every two years from the aged of 50. For breast screening (mammograms) it is, again, recommended you get a mammogram every two years after the age of 50. Cervical cancer testing has recently changed from every two years to every five years for women who are 25 years and over. However, you do need one negative screen under the two-year pap test before going to the five-year testing schedule.

"Family history has an impact on screening. If you have a family history of breast, bowel, or cervical cancer (especially when the family member was younger than 50 when they were diagnosed) or you are showing any symptoms relating to these cancers, GPs might recommend earlier screening or specific upfront tests like colonoscopies for bowels or MRIs for breasts," says Dr Brunello.

It is better news for the women of Northern Sydney when it comes to cervical cancer screening, where the rate of screening is higher (63.1%) than the NSW state average (56.3%).

In December 2017, cervical screening changed in Australia. The Pap Test has been replaced with a new Cervical Screening Test every five years. Cervical cancer is one of the most preventable cancers and the test is a simple procedure to check the health of your cervix. It feels the same as the Pap test, but tests for the human papillomavirus (known as HPV). For women aged 25 to 74 your first Cervical Screening Test is due two years after your last Pap Test. After that, you will only need to have the test every five years if your result is normal.

"The new screening is now only every 5 years for women aged between 25-74 and is so sensitive and accurate that it picks up HPV as early as possible and, if you are negative, means you don't have to go back for a cervical screen for another 5 years. This is welcome news for all women. With the old cancer screening process for cervical cancer we have more than halved the rates of both cancer occurring and the rates of death when cancer is present. This statistic will only continue to improve with the new screening process," says Professor Annabelle Farnsworth - Medical Director & Director of Cervical Screening at Douglass Hanly Moir Pathology.

"The new initiative of the self-collect pathway for cervical screening, where the patient can do their own sample in a clinical setting, should be cleared in NSW in a couple of months. Be mindful that this option is only available for women who are under-screened or have never been screened and has restricted Medicare benefits. To access it you must be over the age of 30 and not been screened for 2 years over the recommended screening interval. It is very prescriptive and must be done within the doctor's surgery. It cannot be done at home like the bowel screening test for example. You discuss it with your medical professional, they give you the sampling device and it can be done behind a curtain or in a bathroom. The swab is then sent to the lab and it is very quick and easy. This was included in the new screening program because of some of the barriers to cervical screening that were identified such as uncomfortable vaginal examinations," continues Professor Farnsworth when talking about the new cervical screening innovations.

None of us really want to talk about cancer screening, especially when it comes to the "poo test" with Bowel Cancer screening. However, the free bowel screening kit you get delivered to your home every two years after you turn 50 by the Australian Government, can be done at home and posted back to check for any abnormalities in the bowel that may lead to bowel cancer.

"Once you have sent your samples in the post and the clinical tests have been done, your result will be mailed to you and your doctor (if you have nominated one) a few weeks after you post your samples. If no blood is found in your samples, your test result will be NEGATIVE. This does not mean that you do not have or can never develop bowel cancer. Tests like these detect up to 85% of bowel cancers. Therefore, it is important to screen every two years and talk to your doctor if you develop symptoms after getting a negative result. If a POSITIVE result is found in your samples discuss it right away with your GP. A positive result may be due to other factors such as polyps, hemorrhoids, or inflammation, but it is important to investigate. Your doctor may recommend a further test to find the cause of the

bleeding, usually a colonoscopy,” says former nurse and Commissioning Operations Manager at Sydney North Primary Health Network, Donna Pettigrew.

“In Northern Sydney, bowel cancer screening rates among men aged 50-74 years are lower (37.9%) compared to females from the same age group (40.9%), so the men need to pull up their socks and get those samples in the posts. Sounds unpleasant, but the potential of something far more serious like bowel cancer is far worse,” says Donna.

A number of new program resources are available on the National Bowel Cancer Screening Program [website](#). These resources include the [Home Test Kit instruction brochure](#) which provides the four easy steps that may help save your life and [translated resources in 22 different languages](#).

Information on breast, bowel and cervical screening can be found by [clicking here](#).

Regina Marchant’s life and journey would have been very different if she hadn’t been screened for cancer and diagnosed early.

“Yes, having cancer was upsetting and hard for me and my beautiful family, but because the cancer was detected early through screening I was able to have a mastectomy and the treatment necessary to beat cancer and continue to be a mother, wife and now breast screening advocate. We’re all so busy and, if we’re feeling well, it’s very easy to put off any form of cancer screening. In the back of our minds, we are also all a little scared of what might be found. I can tell you that the alternative is far worse. Make sure you book in your screens TODAY and stay regular with it. One day it could save your life.” – said Regina!

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Photos to Download

1. [Regina Marchant](#)
2. [Meredith Kay](#)
3. [Meredith Kay & Regina Marchant](#)
4. [Dr Gilda Brunello](#)
5. [Professor Annabelle Farnsworth](#)

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RESOURCES

[For the Facts & Stats on Cancer Screening in Northern Sydney CLICK HERE](#)

Videos

[BREAST SCREENING: Regina Marchant’s Life Saving Story](#)

[CERVICAL SCREENING: More Accurate, Less Often - New Cervical Screening Information](#)

[BOWEL SCREENING: National Bowel Cancer Screening Info](#)

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