A study into under-breast soreness (UBS) and its impact on breast screening.

Marilyn O’Connell1 & Judi Curtis2

1 King’s Lynn Breast Screening Unit, The Queen Elizabeth Hospital, King’s Lynn NHS Foundation Trust, Norfolk. 2 Kingston University and St George’s, University of London, SW17 0RE.

Introduction

Mammographers image women affected by under-breast soreness (UBS) or Intertrigo on a daily basis. The condition can be mild, moderate or severe. When questioned, most women reported being unaware of the condition and lacked knowledge of the causes and treatment options. In some women, the problem can cause the skin to tear which could hamper the acquisition of high quality images and affect the overall breast screening episode.

Aim

This study aimed to raise awareness of UBS amongst women invited for breast screening, and to educate them on its most common cause. With this knowledge it is hoped that women can feel empowered to discuss the topic and find treatment options in which to improve the condition and their screening experience.

Objectives

To explore the knowledge and current understanding of UBS in women invited for breast screening and the impact this condition has on them and on their mammographic experience. To identify what advice mammographers could give to women experiencing UBS to maximise compliance, optimise image quality and improve the overall breast screening experience.

Methods

The study took place over an eight week period. A poster was designed and displayed at both the static and mobile screening units to explain the aims and anticipated outcomes of the survey. All women attending for breast screening were given a purpose designed UBS leaflet, asked to complete an anonymised awareness questionnaire and supplied with a pre-paid envelope. Data was collected on a daily basis and entered onto an Excel spreadsheet.

Results

During the eight week study period, 1917 women attended their breast screening invitation and of those, 1643 (86%) women completed a UBS questionnaire.

The study shows that over half the women surveyed (55%) had never heard of UBS and over 90% had never seen any image of the condition. Almost 75% of women knew friends and relatives that had experienced UBS and 191 (12%) women had never discussed it with anyone.

Most common cause of UBS is Intertrigo. 64 (4%) women reported being unaware of the condition and lacked knowledge of the causes and treatment options. In some women, the problem can cause the skin to tear which could hamper the acquisition of high quality images and affect the overall breast screening episode.

Only 119 (8%) women were aware that the medical term for the condition was Intertrigo. 10 (4%) women said they were too embarrassed to seek advice on UBS and 191 (12%) women had never discussed it with anyone.

Of the 328 (20%) women who had experienced UBS, only 120 had sought medical advice from a healthcare professional.

Results cont......

Qualitative results: 245 women included comments on their questionnaire:

41 (16%) women stated that they only experienced UBS in hot weather. 32 (13%) women were grateful for the leaflet and would like to see it more widely available.

30 (12%) women were appreciative of the awareness and wanted more information, with some offering to take part in further research.

22 (9%) women stated that although they had never experienced UBS, they knew friends and relatives that had.

10 (4%) women said they were too embarrassed to seek advice on UBS and some had experienced it in other parts of their body (under belly, arm pit etc).

7 (4%) women offered the following descriptive terms for how UBS made them feel: Unclean, Uncomfortable, Embarrassed, Dirty, Alone, Different, Depressed, Miserable, Degrading, Debilitating and Low Self Esteem.

Discussion

Based on anecdotal evidence and from a review of the literature [2], the condition of Intertrigo can cause pain and distress in women who are affected. In this cohort of women more than half had not heard of the condition, and few had discussed it with a healthcare professional. Women expressed a desire for more information and education on the subject. It appears that having the condition would not stop the majority of women attending breast screening. However, 1 in 5 women screened had experienced UBS and some were too embarrassed or ashamed to seek advice. Two women who attended their appointment were not screened due to the severity of their UBS. They were each given an UBS leaflet and advice from their Mammographer, and both returned during the study, totally clear of Intertrigo. Interestingly, 28 of the women within the cohort made it known on their questionnaire that they were healthcare professionals and praised the study, and several took away bundles of UBS leaflets to use in their places of work.

A limitation of this study is the bias towards health conscious women attending breast screening. Further work could examine the non-attenders’ knowledge on UBS.

Implications for Practice

The study shows women were grateful for the awareness and appreciated the information contained within the leaflet. Several women took leaflets away to pass on to friends and relatives and healthcare professionals took some to place into surgeries and residential homes. This is an example of evidence to mammographers too!

Raising awareness helped women to see they were not alone and that many women suffer. It also helped to educate women on the medical term of Intertrigo for their own personal further learning and appropriate treatments.

With so many women suffering in silence with feelings ranging from feeling dirty to feeling depressed, [3] could UBS be a contributing factor to the fall in screening numbers?

By empowering women with information to self help and self treat it is hoped that they will be better prepared for their screening mammogram to ensure maximum compliance, optimal image quality and an overall positive breast screening experience.

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References

