

**RESULTS:** Comparisons of the pre-intervention and post-intervention measurements showed that while the proportion of women who had a clinical breast examination or mammogram in the preceding year was decreased at the post-intervention in the control group, it was increased in the intervention group. However, the differences did not reach a significant level. No consistent patterns could be found in changes of variables in knowledge, attitudes and beliefs. These results remained similar when potential confounding factors were adjusted using mixed model regression analyses.

**CONCLUSIONS:** These results did not suggest significant effects of an intervention program which used lay health educators to promote breast cancer screening in older single African-American women.

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#### FACTORS ASSOCIATED WITH ACCURATE CANCER DETECTION DURING A CLINICAL BREAST EXAMINATION

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**PURPOSE:** Although most US women who undergo mammography screening also receive a Clinical Breast Examination (CBE), factors that predict cancer detection during a CBE have not been well studied to date.

**METHODS:** We analyzed 752,081 National Breast and Cervical Cancer Early Detection Program (NBCCEDP) screening records for CBEs performed from July 1, 1995 thru June 30, 1998 on low income women across the US. CBE results are reported as "normal" or "abnormal, suspicious for cancer." Other variables include CBE date, age, race, ethnicity, presence of breast symptoms at screening, and whether the woman had received a prior NBCCEDP-funded CBE. Most (74%) records include mammography dates and results. Tumor stage and size are reported for invasive cancers whether detected by CBE or mammography.

**RESULTS:** Breast cancer was reported on 3,780 records. On 2,224 records, the CBE was suspicious for cancer. On 1,556 records, the CBE was normal. Most (93%) cancer records with a normal CBE had abnormal mammography results. Bivariate comparisons between normal and abnormal CBE records with a cancer diagnosis found significant differences ( $p < .001$ ) in age, race/ethnicity, presence of breast symptoms, history of a prior NBCCEDP CBE, and tumor stage and size. In a logistic model controlling for these variables, women with breast symptoms were more likely to have their cancer detected during CBE (OR = 7.0, 95% CI = 5.9-8.5), while women with a prior NBCCEDP CBE were less likely to have their cancer detected (OR = 0.7, 95% CI = 0.6-0.8). Compared to women aged 50-59 years, women <40 were more likely to have their cancer detected by CBE (OR = 3.2, 95% CI = 1.9-5.4) but women  $\geq 70$  were less likely (OR = 0.7, 95% CI = 0.5-0.9). Larger cancers and those at more advanced stages were much more likely to be detected during CBE.

**CONCLUSIONS:** Among low-income women whose cancers

were detected through the NBCCEDP, older women and those who had been screened previously in the program were less likely to have their cancer detected during a CBE, even after controlling for tumor size and stage.

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#### DEPRESSION-RELATED VARIABLES AND BREAST SELF-EXAMINATION IN SINGLE OLDER AFRICAN-AMERICAN WOMEN

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**PURPOSE:** Depression-related symptoms, such as despair and loneliness, may prevent women from using preventive screening for diseases. This study aimed to assess if depression-related variables affect the likelihood of implementation of breast self-examination (BSE) in single African-American women aged 65 and older.

**METHODS:** Subjects for this study included 325 African-American women, aged 65 and older, who were widowed, divorced, separated, or never-married, and lived in ten public housing tenements in Nashville, Tennessee. In-person interviews were conducted to collect information on breast screening behavior, knowledge and attitudes, social networks and activities, medical care use and depression. Depression variables included 19 factors, such as feeling guilty, feeling sad or blue, and feeling worthless.

**RESULTS:** Using logistic regression with adjustment for potential confounders, we found that, compared with women who did not perform BSE, those who performed BSE were less likely to have felt guilty in the preceding year ( $p < 0.05$ , odds ratio (OR) = 0.3, confidence interval (CI) = 0.13-0.71). However, the other depression-related variables were not associated with BSE. For example, women who performed BSE and those who did not perform BSE reported feeling sad or blue in equal frequencies (OR = 0.93, CI 0.49-1.7).

**CONCLUSIONS:** In general, this study suggests that there is no overall association between depression-related symptoms and breast self-examination in single African-American women aged 65 and older.

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#### RACIAL DIFFERENCES IN TAMOXIFEN METABOLISM

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**PURPOSE:** A recent study indicates that black women may have a higher risk/benefit ratio from tamoxifen than white women. Several