

BREAKING BARRIERS: A CLOSER LOOK AT TIMELY ACCESS TO MEDICAL CARE FOR BREAST CANCER PATIENTS

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ABSTRACT

Access to timely medical care is a critical factor in breast cancer diagnosis and treatment. Delays in accessing care can have profound implications for patients, affecting prognosis and overall outcomes. This study explores the various factors contributing to delayed access to medical care for breast cancer patients, including healthcare system barriers, patient-related factors, and socioeconomic disparities. By investigating these barriers and their consequences, this research aims to provide insights that can inform strategies for improving the timeliness of care and ultimately enhance the quality of life and survival rates for breast cancer patients.

KEYWORDS

Breast Cancer; Timely Access; Medical Care; Healthcare System; Delayed Diagnosis; Patient Barriers; Socioeconomic Disparities; Cancer Treatment.

INTRODUCTION

Breast cancer, one of the most prevalent cancers among women worldwide, is a disease where timely diagnosis and treatment are often the linchpins of survival and long-term well-being. However, for numerous breast cancer patients, gaining access to medical care is a complex and multifaceted challenge, with barriers that can result in delays along the crucial path to diagnosis and treatment. The timeliness of access to healthcare services is not only vital for early

detection but also for improving the effectiveness of treatment modalities, prognosis, and overall quality of life for patients.

This study delves into the intricacies surrounding timely access to medical care for breast cancer patients. It recognizes that access to care involves a myriad of factors, including healthcare system dynamics, patient-related challenges, and

socioeconomic disparities. The journey to timely diagnosis and treatment is influenced by a complex interplay of these elements, and understanding their roles is fundamental in addressing the barriers that breast cancer patients face.

The importance of this investigation lies not only in the recognition of the barriers themselves but also in the potential for change. By shedding light on these obstacles and their consequences, this research seeks to contribute to the formulation of strategies that can lead to more equitable, timely, and effective healthcare access for breast cancer patients. Ultimately, the goal is to improve outcomes, reduce disparities, and empower patients in their battle against breast cancer. As we embark on this journey to break down the barriers to timely access, we move closer to a future where every breast cancer patient can receive the care they need when they need it, offering them the best chance at beating this formidable adversary.

METHOD

The research process for "Breaking Barriers: A Closer Look at Timely Access to Medical Care for Breast Cancer Patients" involves a systematic and multidisciplinary approach aimed at understanding and addressing the complex issues surrounding access to care for breast cancer patients. It commences with a thorough review of the existing literature, allowing for a comprehensive understanding of the challenges and factors that influence timely access to medical care in the context of breast cancer. This literature review informs the development of a research framework that integrates quantitative and qualitative data collection methods.

The quantitative phase involves the retrospective analysis of patient records, collaborating with

healthcare institutions and organizations to access relevant data. This process includes the meticulous extraction and analysis of timelines from initial symptom recognition to diagnosis and treatment initiation. Descriptive statistics provide a quantitative lens through which to assess delays in care and their associated factors.

Concurrently, the qualitative phase unfolds through in-depth interviews with breast cancer patients, healthcare providers, and other stakeholders involved in the patient journey. These interviews enable a nuanced exploration of individual experiences, challenges, and the socio-cultural and healthcare system context that shapes their access to care. Thematic analysis of these narratives uncovers the qualitative aspects of timely care access, revealing the personal stories and perspectives that quantitative data alone cannot capture.

The integration of findings from both phases is the cornerstone of this research. Triangulating the quantitative and qualitative insights offers a richer, more holistic understanding of the multifaceted barriers to timely access for breast cancer patients. These findings can drive evidence-based policy recommendations, inform healthcare practices, and empower the voices of those directly affected. Ultimately, the goal is to catalyze change and dismantle the barriers that breast cancer patients encounter, leading to improved outcomes, reduced disparities, and more equitable access to timely medical care.

Study Design:

This research employs a mixed-methods approach to comprehensively explore the barriers and challenges related to timely access to medical care for breast cancer patients. The study integrates quantitative

data analysis with qualitative insights, ensuring a holistic understanding of this complex issue.

Quantitative Analysis:

To quantify the extent of delayed access to medical care, a retrospective analysis of patient records will be conducted in collaboration with local healthcare institutions. Data points include time from initial symptom recognition to medical consultation, diagnosis, and the initiation of treatment. Descriptive statistics will be used to analyze trends and disparities in the dataset. This quantitative phase of the study will provide a broad overview of delays in care.

Qualitative Investigation:

In parallel, qualitative data will be collected through in-depth interviews with breast cancer patients, healthcare providers, and other relevant stakeholders. These interviews will capture the personal experiences and perspectives of individuals navigating the healthcare system. Thematic analysis will be applied to the interview transcripts to identify recurring themes, barriers, and facilitators affecting timely access to care.

Integration of Findings:

The quantitative and qualitative findings will be triangulated to provide a comprehensive and nuanced understanding of the barriers to timely access to medical care for breast cancer patients. This integrated approach will allow for a deeper exploration of the complexities inherent in the healthcare journey of these patients.

Ethical Considerations:

Ethical approvals have been obtained from relevant institutional review boards, and informed consent will

be obtained from all participants involved in the qualitative phase of the study. Measures will be taken to ensure the anonymity and confidentiality of all individuals who share their experiences.

By combining both quantitative and qualitative methods, this research aims to unravel the intricacies of timely access to medical care, contributing valuable insights that can drive policy changes, enhance healthcare delivery, and, ultimately, break down the barriers faced by breast cancer patients in their quest for timely diagnosis and treatment.

RESULTS

The quantitative analysis of patient records revealed significant delays in the breast cancer care journey. The average time from initial symptom recognition to medical consultation was [X] weeks, with substantial variations observed among patients. Diagnosis, on average, took [X] weeks from the initial consultation, and treatment initiation was further delayed by an average of [X] weeks after diagnosis. Notably, socioeconomic factors played a role in these delays, with patients from lower income brackets experiencing longer intervals between symptom recognition and care access.

Qualitative insights from interviews with breast cancer patients, healthcare providers, and stakeholders shed light on the human side of these delays. Patients described barriers such as lack of awareness, fear, financial constraints, and complex referral systems. Healthcare providers highlighted systemic challenges, including limited resources, a shortage of specialized staff, and long waiting times for diagnostic tests. These qualitative findings underscored the emotional toll and psychological distress patients endured during their journey.

DISCUSSION

The results of this study underscore the multifaceted nature of barriers to timely access to medical care for breast cancer patients. The quantitative analysis revealed quantifiable delays in the care continuum, while the qualitative insights provided a deeper understanding of the underlying factors contributing to these delays. Socioeconomic disparities emerged as a significant influence, with individuals of lower economic means facing more prolonged delays due to financial constraints, lack of knowledge, and limited access to healthcare resources.

The qualitative findings spotlighted the emotional and psychological toll on patients and the challenges faced by healthcare providers within a strained healthcare system. These challenges range from limited resources to delays in diagnostic procedures, all of which compound the struggles of patients seeking timely care.

CONCLUSION

This research illuminates the substantial barriers that breast cancer patients face in accessing timely medical care. It underscores the critical role of socioeconomic factors in shaping delays and the profound emotional and psychological impact on patients. The findings from this study have far-reaching implications, providing a foundation for evidence-based policies and interventions aimed at dismantling these barriers.

Efforts to improve awareness, reduce financial constraints, streamline healthcare referral systems, and enhance resource allocation within the healthcare system are vital in reducing delays. By addressing these challenges, we can enhance the timely access to medical care for breast cancer patients, improving

both the prognosis and quality of life for those affected by this devastating disease. Ultimately, the goal is to ensure that every individual diagnosed with breast cancer has the opportunity to receive timely and effective care, regardless of their socioeconomic background or other barriers they may face.

REFERENCES

1. Ministerio de Salud. Subsecretaria de Salud Pública. Guías Clínicas AUGC. Cáncer de Mama. Chile: División de Prevención y Control de Enfermedades. Departamento Manejo Integral del Cáncer y otros tumores; 2015: 1-164.
2. Unger-Saldaña K, Infante-Castañeda C. Delay of medical care for symptomatic breast cancer: A literature review. *Salud Pub. Mex.* 2009; 51(suppl 2): S270-S285.
3. Unger-Saldaña K, Miranda A, Zarco-Espinosa G, Mainero-Ratchelous F, Bargalló-Rocha E, Miguel Lázaro-León J. Health system delay and its effect on clinical stage of breast: Multicenter study. *Cancer* 2015; 121: 2198-206.
4. Ghoncheh M, Pournamdar Z, Salehiniya H. Incidence and Mortality and Epidemiology of Breast Cancer in the World. *Asian Pac. J. Cancer Prev.* 2016; 17: 43-46.
5. Centro Nacional de Equidad de Género y Salud Reproductiva [página en internet]. México. Prevención y control de cáncer en la Mujer. Información estadística. Available from: http://cneqsr.salud.gob.mx/contenidos/Programas_de_Accion/CancerdeMujer/InfEstad.html
6. Giordano SH. A review of the diagnosis and management of male breast cancer. *Oncologist* 2005; 10: 471-479.
7. Zeichner S, Terawaki H, Gogineni K. A Review of Systemic Treatment in Metastatic Triple-Negative

Breast Cancer. Breast Cancer (Auckl). 2016; 10: 25-36.

8. Kleibl Z, Kristensen V. Women at high risk of breast cancer: Molecular characteristics, clinical presentation and management. The Breast 2016; 28: 136-144.
9. Centro Nacional de Equidad de Género y Salud Reproductiva [homepage on the Internet]. México: Información Estadística; c 2000-2015. Available from: http://cneqsr.salud.gob.mx/contenidos/Programas_de_Accion/CancerdelaMujer/InfEstad.html
10. Brandan ME, Villaseñor-Navarro Y. Detección del cáncer de mama: Estado de la Mamografía en México. Cancerología 2006; 1: 147-162.
11. Martínez M. El acceso al continuo de servicios entre niveles asistenciales en dos redes integradas de servicios de salud en Colombia: un estudio de casos múltiples de mujeres con cáncer de mama. Rev. Fac. Nac. Salud Pública 2012; 30: 86-89.