



PHILIPS

MicroDose

Mammography Solutions

Insights into women's mammography decisions

Surveys of more than 500 women reveal mammography decision-making and experiences

Two surveys of women who had mammograms on MicroDose systems sought to determine how the women chose a mammography service, as well as their opinion of their mammography exams. Both surveys found that healthcare providers most often informed women of the need for mammography, and were the source most likely to be turned to for mammography information. However, women also seek information from the internet, and less frequently, their peers. The surveys also found that the majority of the women surveyed who had previously had mammograms on other mammography systems thought MicroDose was more comfortable, most often because the women felt less breast compression.

Surveys purpose and methods

A bioentrepreneurship student at the Karolinska Institute (Solna, Sweden) conducted the survey as part of his master's thesis on women's mammography preferences. The aims of the survey were to investigate the Swedish mammography system market, to explore women's preferences on mammography, and to evaluate MicroDose's performance based on women's experience.

The quantitative survey was conducted with 298 women who had just received a screening mammography at Universitetssjukhuset Örebro (Örebro, Sweden).

A second survey, conducted at Allison Breast Center (Richmond, VA, U.S.A.), asked similar questions of 214 women who received screening mammography at the center. The purpose of that survey was to better understand the center's customers and their satisfaction with the center's services.

Results

Learning that a mammogram is suggested 90.43 % of women surveyed learned of the need for a mammogram through a healthcare provider/screening program. While a significant majority chose this answer in both surveys, the percentage was considerably higher in Örebro (100%, vs. 77.10% in Richmond), due to the nationally organized screening program that sends all women over age 40 a mammogram reminder. The other resources most frequently cited were peers (20.31%), and the media (15.04%).*

Sources of information on mammography

Women find information about mammography from a variety of sources, including media, healthcare providers/screening program, the internet, and peers. Healthcare providers/screening program again ranked first at 90.82%, followed by the internet at 58.59%, peers at 21.09%, and the media at 13.87%.*

Choosing a clinic

The coordinated screening program in Sweden was again evident when women were asked how they chose a clinic.* The Swedish women are directed to a site via a letter, and 86.24% of them followed that direction. In the Richmond survey, the top answer was recommendation by a general practitioner/gynecologist (64.29%), followed by recommendation by friends/family (31.12%). Other answer included location, desire for a low dose mammography, familiarity with the clinic, insurance covered the clinic, and same day results.

Familiarity with types of mammography equipment

When asked if they were aware of differences among screening mammography systems (e.g. analog, digital, 3D) 61.13% of the women responded that they were not aware. Of those who were aware, differences cited included sharper pictures, greater comfort, newer technology, less radiation, greater speed, and use of ultrasound system and MRI.

Women rank factors involved in choosing a site
“What do you think is important when choosing a mammography system/ clinic for your mammogram?”*

* Survey participants could choose multiple answers.

Option	Richmond	Örebro
Doctor’s advice/professional service	170	237
Comfort during examination (offered as choice in Richmond survey only)	116	NA
Amount of radiation dose (offered as choice in Richmond survey only)	118	NA
External examination environment (welcoming examination room/ lights/ decoration/ music)	63	18
Family or friends’ recommendation	67	4
Clinic location	48	57
Good equipment (offered as choice only in Örebro survey)	NA	230
No opinion (offered as choice only in Örebro survey)	NA	4
Other	13	10

Items in the “other” category included: Results before you leave, rapport of personnel, experience, physician skills, speed, and efficiency.

Among those with a basis for comparison, more than 69% found MicroDose more comfortable than exams on other systems

In the Richmond survey, 78.67% of women surveyed said that MicroDose was more comfortable than other systems they had experienced, while 17.54% said there was no difference, 2.37% said it was less comfortable, and 1.42% hadn’t had any previous mammograms. In the Örebro survey, 30.90% found it more comfortable, while 24.31% said there was no difference, 0.69% said it was less comfortable, and 44.10% had only experienced MicroDose mammograms. Among those who found it more comfortable, the reasons cited were:*

- Less unpleasant compression (76.08%)
- Shorter examination (53.33%)
- Lower X-ray dose (33.73%)
- Better design (23.14%)
- Warm breast support (22.35%)
- Other (e.g. free-breathing, easier positioning, good technician)

Analysis

The surveys showed that there is an opportunity to educate women more about mammography, particularly about the differences among types of mammography systems. In addition, the survey showed that the internet may be an effective vehicle for such education, although word-of-mouth (healthcare providers, and to a lesser extent, peers) are the leading sources of information. Further, the survey suggests that providers interested in differentiating their services may consider promoting comfort, speed, and lower dose.

