



Short communication

Validated tools measuring women's satisfaction in breast cancer screening programmes: A systematic review



Silvia Deandrea, Minna Salakari, Luciana Neamțiu^{*}, Asli Ulutürk, Donata Lerda, Liisa Pylkkänen

European Commission, Joint Research Centre, Via E. Fermi 2749 – TP 127, I-21027, Ispra, VA, Italy

ARTICLE INFO

Article history:

Received 9 January 2018

Received in revised form

1 March 2018

Accepted 3 March 2018

ABSTRACT

International guidelines recommend assessing women's satisfaction with breast cancer screening programmes; however, validated tools are needed. A systematic review to identify and evaluate the quality of validated instruments for screening satisfaction, from 01/1965 until 11/2017 was performed. From 3283 individual citations, six instruments were identified. Evaluation of the MammoGraphy Questionnaire using the COSMIN checklist resulted in 'good' to 'excellent' scores in most assessed domains, while the other tools were mostly 'poor'/'fair' quality or did not provide enough information for assessment. Nevertheless, substantial changes in screening processes and programmes have been implemented in recent years. Thus, further development work is needed.

© 2018 Published by Elsevier Ltd.

1. Introduction

Early detection of breast cancer (BC) is crucial to prevent progression of cancer to advanced disease; hence improving survival. Based on current evidence, a 20% reduction in BC mortality in women invited for mammography screening has been reported [1–4].

Mammography, however, can cause pain, anxiety, embarrassment and discomfort. Furthermore, waiting for results can cause anxiety and fear of cancer, which may negatively influence women's satisfaction with screening and their willingness to undergo regular screening—leading to delays in BC detection [5].

The evaluation of participants' satisfaction is an essential part of monitoring the quality of BC screening services. Satisfaction with BC screening covers the entire experience, from scheduling of the appointment and the procedure, to receipt of the results [6–8]. Perceived satisfaction with BC screening in turn leads to good adherence [9–11].

In organised BC screening, healthcare organisations play a key role in improving quality of care. The European Commission Initiative on Breast Cancer (ECIBC) [12] is a person-centred initiative to improve and harmonise BC care in Europe. In this context, this systematic review was performed to identify and assess the

quality of validated instruments measuring women's satisfaction with BC screening.

2. Materials and methods

The details of the systematic review protocol are provided in PROSPERO [13]. This paper reports the results for research question 1: 'Which tools have been used to assess women's satisfaction with an organised breast cancer screening programme?'. Research question 2 regarding 'satisfaction' will be reported separately.

The search strategy included the terms 'breast cancer', 'screening', 'quality' and 'satisfaction'. The search string used is reported in Appendix 1. The search was limited to organised screening programmes with mammography as the first level test and to studies published in English, French, German, Italian, Portuguese and Spanish. The following databases were searched: Medline, CINAHL, Embase, and PsycINFO from 01/1965 until 11/2017. Comprehensive reports on women's satisfaction with organised screening only started to appear in the literature in the early 90's.

From 3283 individual citations, 1273 abstracts of potentially eligible articles were reviewed by two independent researchers and 98 articles were selected for full-text reading. Any disagreements were resolved by discussion. Nine studies reporting validation of six instruments were included in the analysis. The result of this process is reported in Fig. 1.

^{*} Corresponding author.

E-mail address: luciana.neamtui@ec.europa.eu (L. Neamțiu).

One researcher extracted the main characteristics and findings of instruments in a tabular format while another researcher checked the extracted data for accuracy. We contacted the corresponding author of each instrument twice in order to obtain missing information.

Psychometric results (i.e. results obtained through validation studies) were assessed using Terwee's Quality Criteria for Measurement Properties [14]. Following Terwee's criteria, each measurement property was given a rating of 'positive', 'negative' or 'indeterminate' depending on the design, methods and results as well as the application of established criteria for good measurement [14]. The evaluation of the quality of the instruments was performed using the COSMIN checklist [15] and PRISMA reporting [16]. All evaluations were based on the information available at the time of the assessment.

3. Results

Overall, six validated tools were identified: Breast Screening Satisfaction Scale (BSSS) [17], MammoGraphy Questionnaire (MGQ) [18,19] Experiences of Breast Screening (EBS) [20], Mammography

Experience Survey (MES) [11] and two unnamed tools [21,22]. In addition, two modified tools were identified [23,24]. The tools were in English, French, Italian, Korean and Norwegian. Details of the instruments are summarised in Tables 1 and 2.

All instruments included satisfaction with 'communication' (communication, interpersonal skills, information transfer) and 'technical competence' (perceived technical competence, staff's technical skills, technician's skills, technician's professionalism). Five tools included 'satisfaction with the physical environment' [17–19,21,22], while two included 'waiting times' [17–19] or 'access to screening unit' [20,21].

'Physical pain/inconvenience/discomfort' was assessed by three tools [11,18–20], and 'psychological discomfort/worry/anxiety/embarassment' by two [18–20]. General satisfaction was included in four [17–21].

Three instruments [17,21,22] looked at the satisfaction from the BC service point of view, whereas two [11,20] focussed on assessment of women's experiences with communication, and their physical and psychological experiences. The MGQ assessed both points of view [18,19].

The COSMIN quality evaluation is presented in Table 3. The MGQ

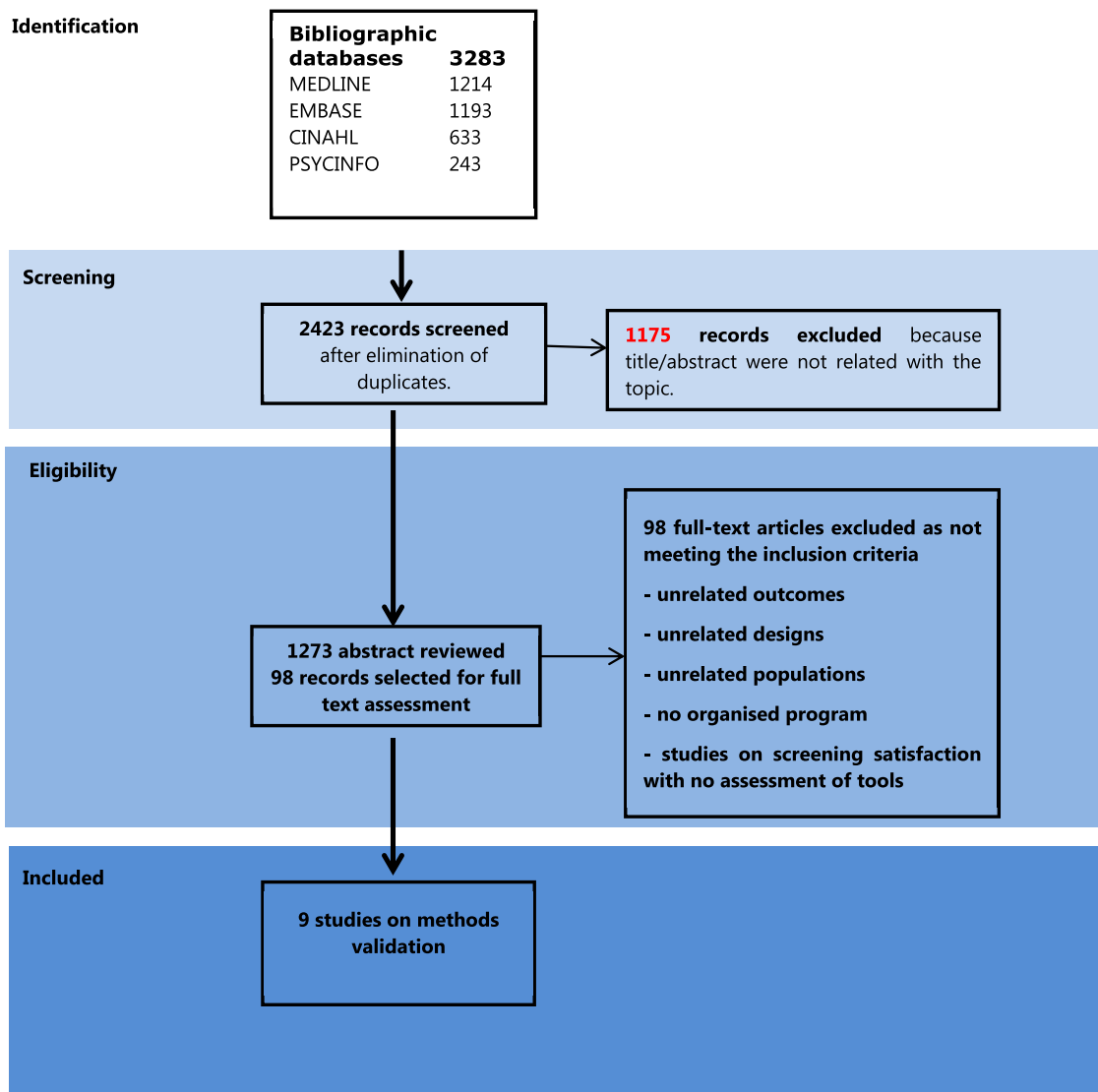


Fig. 1. Flow chart for the evidence on screening satisfaction tools.

Download English Version:

<https://daneshyari.com/en/article/8776774>

Download Persian Version:

<https://daneshyari.com/article/8776774>

[Daneshyari.com](https://daneshyari.com)