11. BREAST CANCER RISK ASSESSMENT AND CHEMOPREVENTION USE AMONG VA PRIMARY CARE

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BACKGROUND: Despite recommended guidelines and available medications to reduce breast cancer risk by up to 50-65%, <5% of the 10 million eligible women are offered chemoprevention in the U.S. The comfort level, practice patterns, and barriers to breast cancer risk assessment and chemoprevention use within the VA have not been reported.

METHODS: We assessed VA primary care providers using a REDcap survey. We obtained provider demographics, use and comfort level with breast cancer risk models and chemoprevention and knowledge about chemoprevention. Data was analyzed with Fishers exact or chi-square tests.

RESULTS: Of the 200 survey respondents, 167 were included for analysis. Overall, 30% used the Gail model monthly or more often, and 1.5 % prescribed chemoprevention in the last 2 years. Fewer than 30% correctly answered chemoprevention knowledge questions. Designated women's health providers were more comfortable with risk assessment and chemoprevention ($p<.046$, $p<.004$) and used risk models more often ($p<.045$). 63% expressed interest in education about breast cancer prevention.

CONCLUSIONS: Breast cancer risk assessment and chemoprevention use by VA primary care is limited by lack of comfort and familiarity. Women's health providers are more comfortable and knowledgeable about breast cancer risk models and chemoprevention, offering an opportunity for partnership with high-risk oncologists to improve breast cancer risk assessment and chemoprevention use among female Veterans.