

POSTER PRESENTATION

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The effects of obesity and mobility disability in access to breast and cervical cancer screening in France: results from the National Health and Disability Survey

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Objectives

We aimed to disentangle the effects of obesity and mobility limitation on cervical and breast cancer screening among community dwelling women.

Methods

The data source was the French national Health and Disability Survey - Household Section, 2008. The Body Mass Index (BMI) was used to categorize obesity status. We constructed a continuous score of mobility limitations to assess the severity of disability (Cronbach's $\alpha=0.84$). Logistic regressions were performed to examine the association between obesity, mobility limitations and the use of Pap test ($n=8\ 133$) and the use of mammography ($n=7\ 561$). Adjusted odds ratios were calculated (AOR).

Interaction terms between obesity and the disability score were included in models testing for effect modifications.

Results

Compared with non-obese women, the odds of having a Pap test in the past 3 years was 24% lower in obese women (AOR=0.76; 95% CI: 0.65 to 0.89), the odds of having a mammogram in the past 2 years was 23% lower (AOR=0.77; 95% CI: 0.66 to 0.91). Each time the disability score was 5 points higher, the odds of having a Pap test decreases by 20% (AOR=0.96; 95% CI: 0.94 to 0.98), the odds of having a mammogram decreases by 25% (AOR=0.95; 95% CI: 0.94 to 0.97). There was no significant interaction between obesity and disability score.

Conclusion

Obesity and mobility limitation are independently associated with a lower likelihood of cervical and breast cancer screening. Protective outreach and follow-up are necessary to reduce inequalities and thus to reduce health disparities in these vulnerable and high-risk populations of obese women with disabilities.

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