

CONVEGNO  
NAZIONALE  
GISMa  
2013



# Dalla survey SQTM

EQUITÀ E CRISI ECONOMICA

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# SQTM datawarehouse

## 36585 lesioni 2000-2011



The image shows a login page for the SQTM DWH. At the top left, there is a small square image of a person's torso. To its right, the text "sqtm" is written in a bold, lowercase font, with "DWH" in a smaller, uppercase font to its right. Below this header, there is a blue horizontal bar. Underneath the bar, the text "Scheda computerizzata per il controllo della Qualità del Trattamento del Carcinoma mammario" is displayed. Below this text, there are two input fields: "Login" and "Password". To the right of the "Password" field, there is a MySQL logo. At the bottom right of the page, there is a green circular button with a white right-pointing arrow.

 **sqtm**<sup>DWH</sup>

Scheda computerizzata per il controllo della Qualità  
del Trattamento del Carcinoma mammario

Login

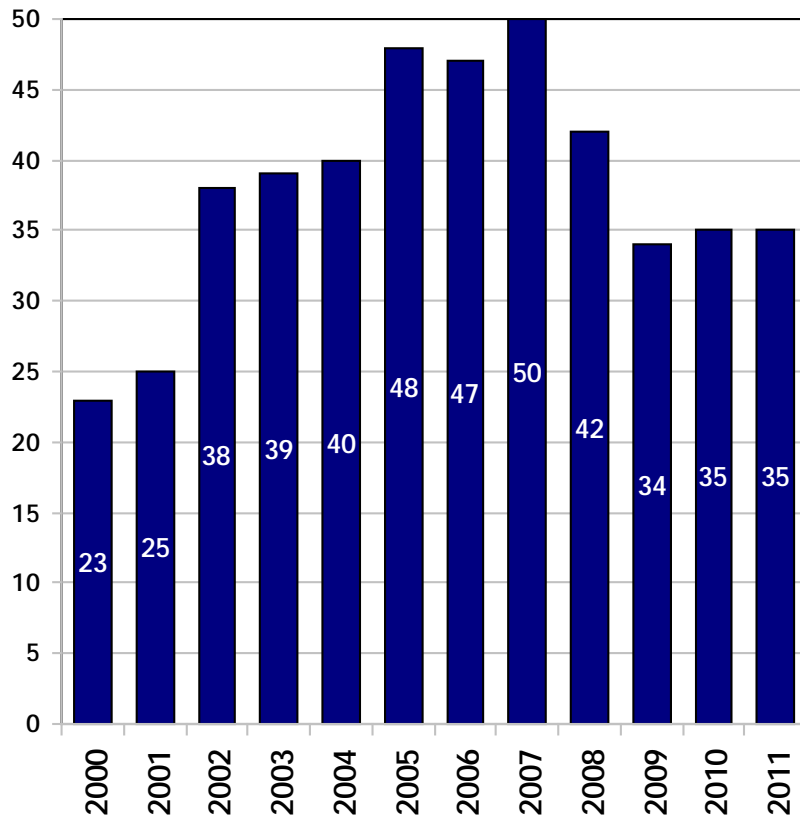
Password

 MySQL

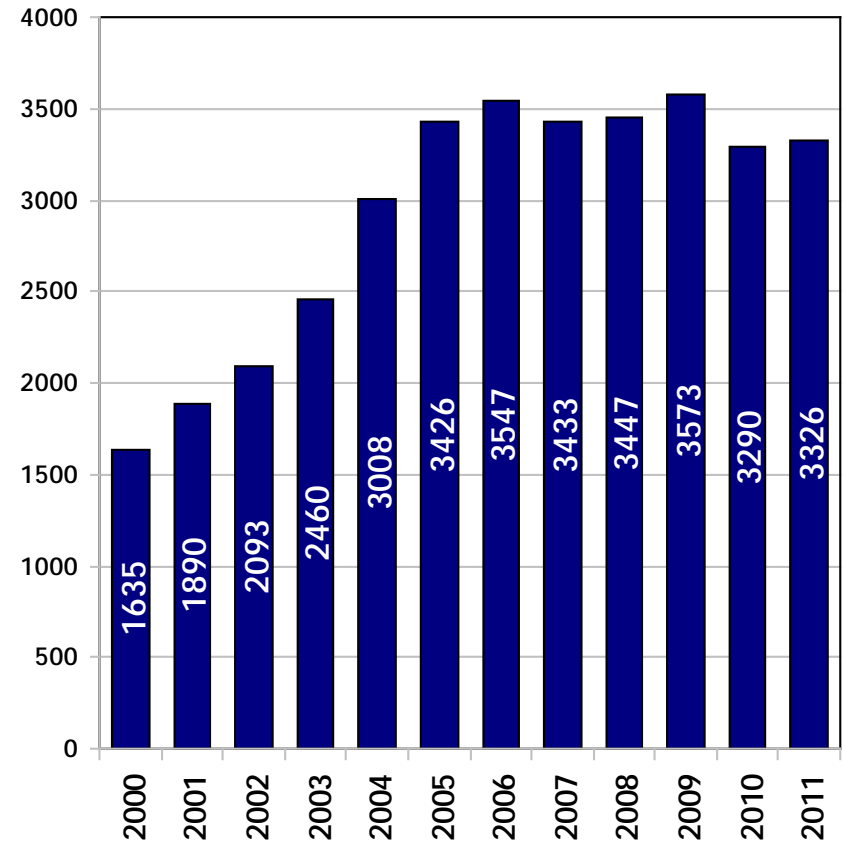


# Programmi di screening e numero casi (45-70 anni)

## Dati: SQTМ Screening Italia 2000-2011



N. programmi

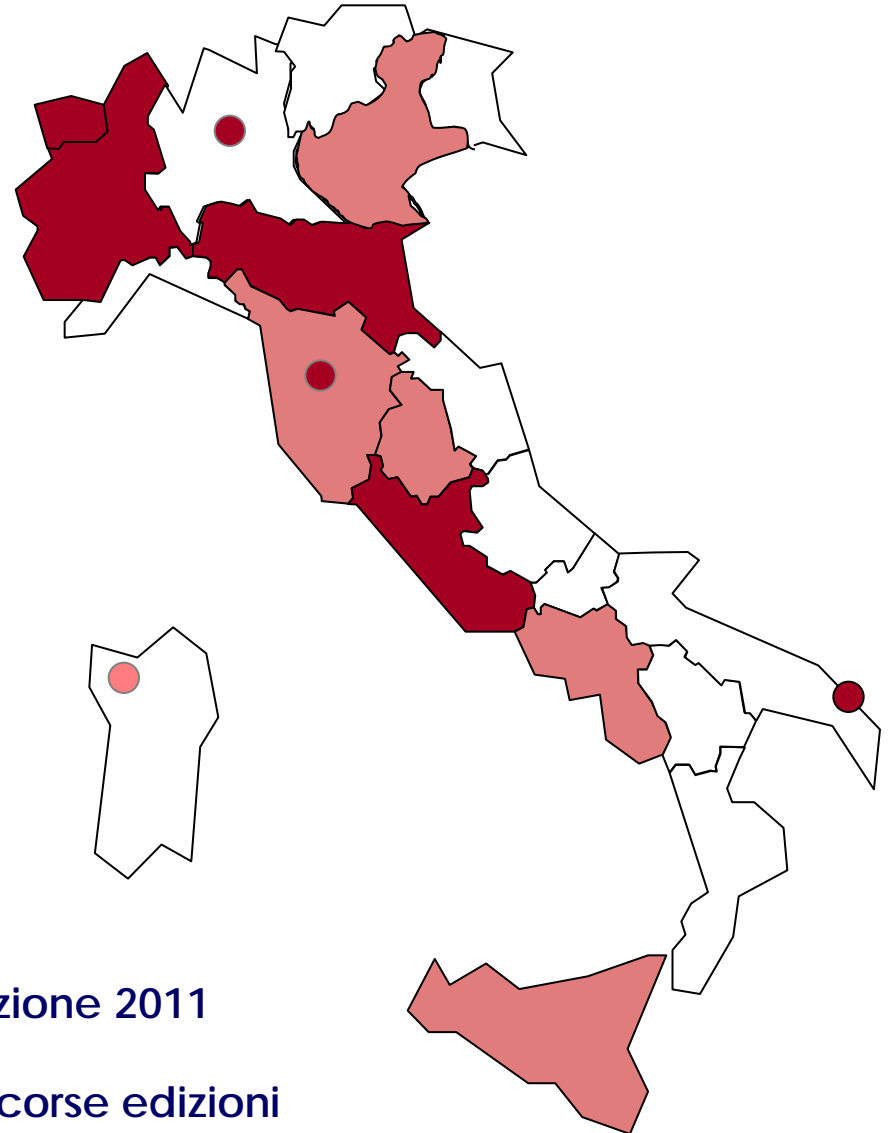


N. casi (tot. 32463)

# Numero di casi per Regione

## Dati: SQTM 49-70 anni Screening Italia 2011

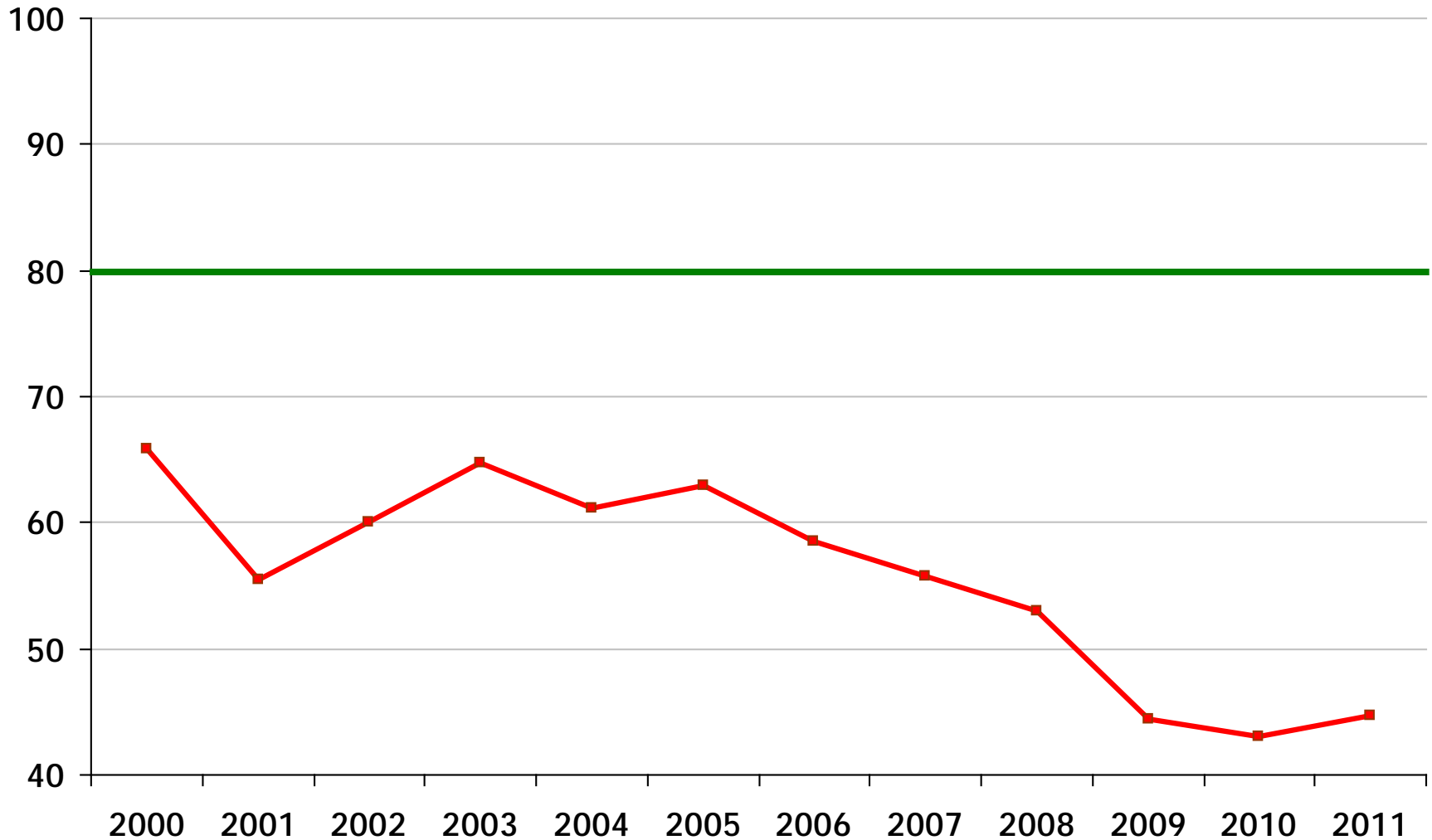
56	Valle d'Aosta
1204	Piemonte
1024	Emilia Romagna
66	Firenze
501	Lazio
60	Lecce
414	Milano
<b>3325</b>	



D1	Cito/istologia preoperatoria positiva	1981 / 2463 = <b>80.4%</b> ✓	63 miss. (2.5%)	
D3	Citologia non inadeguata nei soli cancri	1545 / 1674 = <b>92.3%</b> ✓	6 miss. (0.4%)	
H1	Grading disponibile (invasivi)	1917 / 1956 = <b>98%</b> ✓	128 miss. (6.1%)	
H2	Grading disponibile (DCIS)	345 / 365 = <b>94.5%</b> ✗	12 miss. (3.2%)	
H3	Misurazione recettori ormonali (ER) disponibile	1887 / 1893 = <b>99.7%</b> ✓	191 miss. (9.2%)	
T2	Intervento entro 30 giorni dalla prescrizione chirurgica	1172 / 2593 = <b>45.2%</b> ✗	592 miss. (18.6%)	
T3	Intervento entro 60 giorni dalla mammografia di screening	951 / 2627 = <b>36.2%</b>	498 miss. (15.9%)	
T4	Intervento entro 90 giorni dalla mammografia di screening	1871 / 2627 = <b>71.2%</b>	498 miss. (15.9%)	
S2	No congelatore in cancri fino a 1 cm	402 / 455 = <b>88.4%</b> ✗	196 miss. (30.1%)	
S6	Intervento conservativo in casi pT1	1300 / 1425 = <b>91.2%</b> ✓	12 miss. (0.8%)	
S7	Intervento conservativo in carcinomi in situ fino a 2 cm	276 / 308 = <b>89.6%</b> ✓	6 miss. (1.9%)	
S8	Margini indenni (> 1 mm) dopo intervento definitivo conservativo	1518 / 1618 = <b>93.8%</b> ✓	452 miss. (21.8%)	
S9	Almeno 10 linfonodi asportati	364 / 388 = <b>93.8%</b> ✗	4 miss. (1%)	
S10	N0 con solo linfonodo sentinella	1111 / 1234 = <b>90%</b> ✗	0 miss. (0%)	
S11	CDIS senza dissezione ascellare	335 / 351 = <b>95.4%</b> ✓	27 miss. (7.1%)	
S16	Unico intervento negli invasivi	1976 / 2120 = <b>93.2%</b> ✓	7 miss. (0.3%)	

# Intervento entro 30 gg. dalla prescrizione

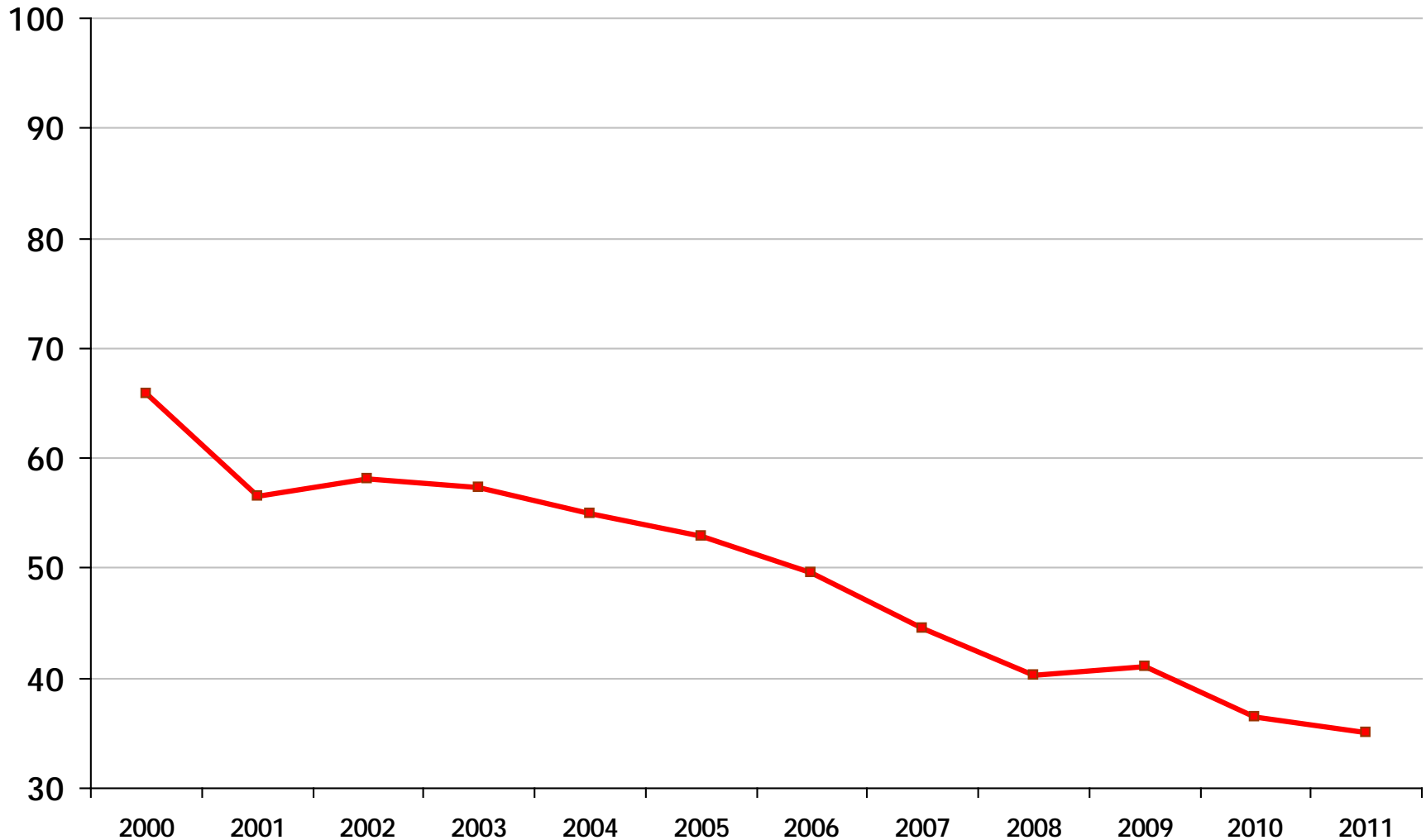
Dati: SQTM Screening Italia 2000-2011



✗ Emilia Romagna	735 / 1421 = <b>51.7%</b> ✗	101 miss. (6.6%)
✗ Lazio	151 / 372 = <b>40.6%</b> ✗	115 miss. (23.6%)
✗ Lombardia	140 / 247 = <u>56.7%</u> ✗	167 miss. (40.3%)
✗ Piemonte	319 / 948 = <b>33.6%</b> ✗	191 miss. (16.8%)
✗ Toscana	40 / 61 = <b>65.6%</b> ✗	2 miss. (3.2%)
✗ Val d Aosta	43 / 50 = <b>86%</b> ✓	3 miss. (5.7%)

# Intervento entro 60 gg. dalla mx di screening

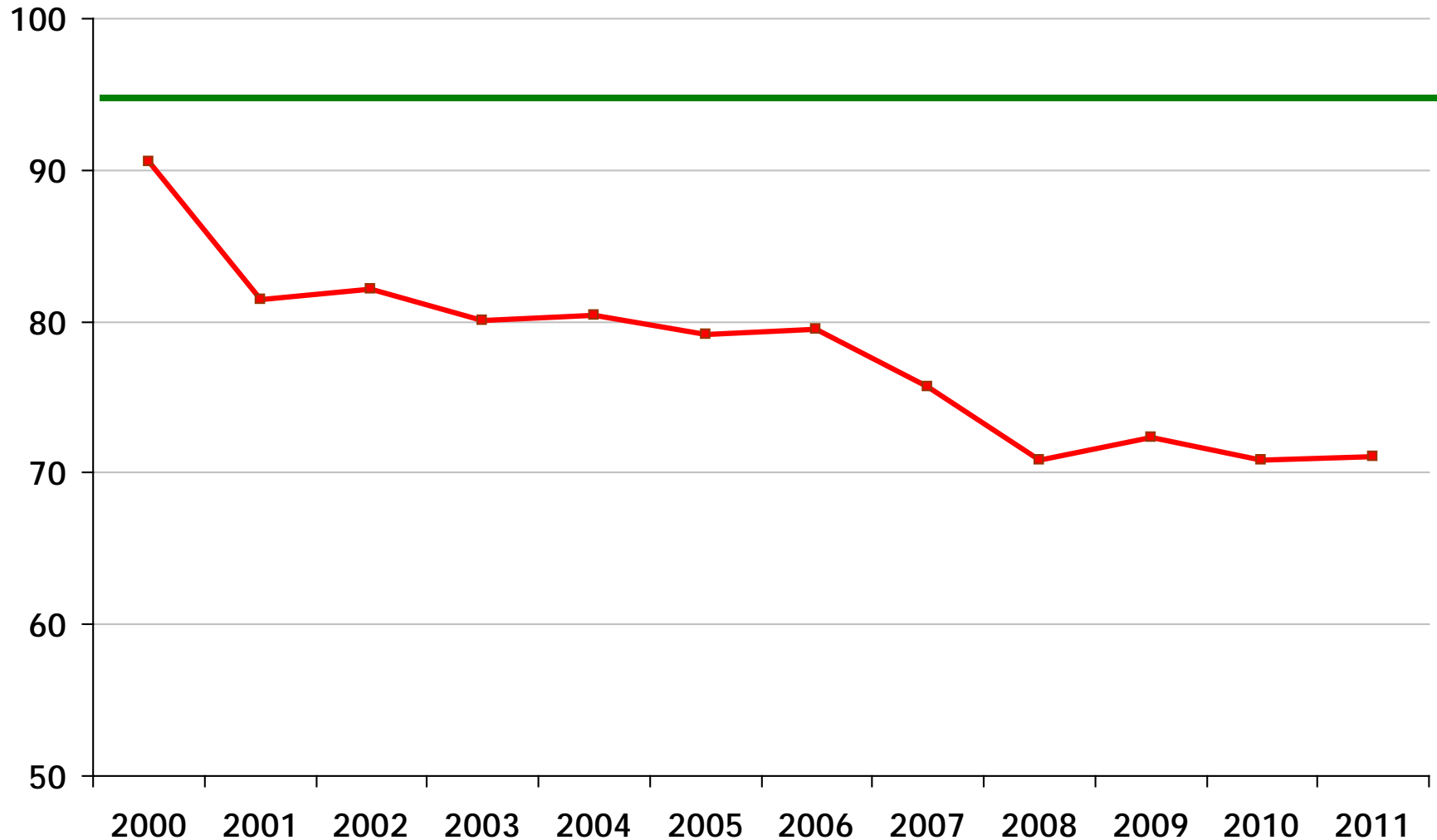
**Dati: SQTM Screening Italia 2000-2011**





# Intervento entro 90 gg. dalla mx di screening

Dati: SQTM Screening Italia 2000-2011



## Preoperative Delays in the US Medicare Population With Breast Cancer

*Richard J. Bleicher, Karen Ruth, Elin R. Sigurdson, Eric Ross, Yu-Ning Wong, Sameer A. Patel, Marcia Boraas, Neal S. Topham, and Brian L. Egleston*

### **Conclusion**

Waiting times for breast cancer surgery have increased in Medicare patients, and measurable delays are associated with demographics and preoperative evaluation components. If such increases continue, periodic assessment may be required to rule out detrimental effects on outcomes.

*J Clin Oncol 30:4485-4492. © 2012 by American Society of Clinical Oncology*

# Delay in Surgical Treatment and Survival After Breast Cancer Diagnosis in Young Women by Race/Ethnicity

*Erlyn C. Smith, MD; Argyrios Ziogas, PhD; Hoda Anton-Culver, PhD*

*JAMA Surg. 2013;148(6):516-523*

**The 5-year survival in women who were treated by surgery and had TDT more than 6 weeks was 80% compared with 90% (P=.005) in those with TDT less than 2 weeks.**

## Effect on Survival of Longer Intervals Between Confirmed Diagnosis and Treatment Initiation Among Low-Income Women With Breast Cancer

*John M. McLaughlin, Roger T. Anderson, Amy K. Ferketich, Eric E. Seiber, Rajesh Balkrishnan, and Electra D. Paskett*

Waiting  $\geq 60$  days to initiate treatment was associated with a significant 66% and 85% increased risk of overall and breast cancer–related death, respectively, among late-stage patients. Interventions designed to increase the timeliness of receiving breast cancer treatments should target late-stage patients, and clinicians should strive to promptly triage and initiate treatment for patients diagnosed at late stage.

*J Clin Oncol 30:4493-4500. © 2012 by American Society of Clinical Oncology*