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OPPORTUNISTIC MAMMOGRAPHIC SCREENING INDICATORS IN A DECADE IN THE STATE OF GOIÁS: TECHNICAL, SOCIAL, AND ECONOMIC CHARACTERISTICS

Rosangela da Silveira Corrêa[1], João Emílio Peixoto[2], Rosemar Macedo Sousa Rahal[1], Danielle Cristina Netto Rodrigues[1], Lucy Aparecida Parreira Marins[3], Suzana Alves Bastos[4], Ruffo de Freitas Júnior[1]

[1]Universidade Federal de Goiás, Advanced Center for Diagnosis of Breast Diseases – Goiânia (GO), Brazil.
[2]Instituto Nacional de Câncer, Department of Quality Control and Ionizing Radiation Service – Rio de Janeiro (RJ), Brazil.
[3]Secretaria Estadual de Saúde de Goiás, Superintendência de Vigilância Sanitária, Coordination of Health Surveillance of Health Products and Services – Goiânia (GO), Brazil.
[4]Secretaria Municipal de Saúde de Produtos e Serviços de Goiânia, Directorate of Sanitary and Environmental Surveillance, Coordination of Inspection of Health Care Establishments – Goiânia (GO), Brazil.

Objective: The aim of this study was to evaluate indicators of opportunistic mammographic screening performed in the state of Goiás, according to technical, social, and economic aspects. **Methods:** Ecological study, where the Diagnostic Centers that performed mammography, were observed. Data were collected on the characteristics of the equipment, production, value, and sources of payment for the examinations. For the 2019 data, the following variables were analyzed: imaging technology, availability of mammography devices and estimated production, mammography expenditures, and mammographic coverage in the female population aged 40–69 years. The ratio of non-Unified Health System (SUS) and SUS examinations and the Composite Annual Growth Rate (CAGR) were also calculated to compare the indicators of opportunistic screening between 2008 and 2019. **Results:** In 2019, 164 mammography machines were identified, and of these, 66 met the SUS. This year, 400,896 examinations were produced at a cost of R$41,931,120.00. The ratio of expenses between non-SUS and SUS care was 10.3, and the number of tests performed for non-SUS and SUS was 3.87. Opportunistic screening coverage was 69.8%, with the share of non-SUS services being 56.3% and SUS only 13.5%. When compared with the results of the 2008 study, a reduction in CAGR was observed: 16.3% for conventional mammography and 17% for digital mammography. The CAGR of the female population was 1.9%, and those aged 40–69 years showed an annual increase of 3.5%. There was an increase in the number of equipment used with a CAGR of 4.3% per year and an increase in the number of examinations of 2.5% per year; the CAGR of mammography coverage was -0.9% per year. **Conclusion:** The indicators show improvement in the technology park. The annual growth of the female population demonstrates an aging population, and the increase in the number of examinations was just enough to maintain mammography coverage.

Keywords: Breast cancer. Early detection. Mass screening. Mammography. Health services.