

Abstract

Background: Breast cancer is the most common cancer among women worldwide. Mammography screening is a method for reducing breast cancer mortality in women 40 years old and older. The purpose of screening programs is that after starting of disease and before the lead to clinical symptoms the diagnosed. This study aimed to cost-effectiveness analysis of two interventions, screening and the no screening in women 35 to 69 years in the Kerman are a family physician.

Methodology: The study of economic evaluation research consisted of 35 to 69 years old women in the villages and towns of a population of less than 20,000 covered by family physicians in Kerman in 2013. The data were collected by a researcher-made risk assessment questionnaire. The content validity of the questionnaire was confirmed by the researchers. For the cost-effectiveness analysis of, taking into account perspective of the Insurance policymakers, no screening and mammographies screening two options were compared. Incremental cost-effectiveness (ICER), average cost-effectiveness (ACER) is calculated.

Results: In the villages and towns of a population of less than 20,000 of the 1745 were eligible for mammograms that were invited, accepted our invitation to 34.95 percent. Average cost-effectiveness of screening intervention 2273980846.05 Rials per DALY averted and Average cost-effectiveness of no screening intervention 17376649641.2 Rials per DALY averted. Incremental cost-effectiveness ratio per DALY averted 1225767961 Rials to interventions screening in comparison with interventions no screening was. Effectiveness of screening and no screening interventions were obtained 0.06171, 0.00864 DALY averted.

Conclusion: The results indicated that the participation of eligible women in breast cancer screening program was not optimal; and since the participation of the target group is a prerequisite for the success of a screening program, low participation is unfavorable. Therefore, it seems that as long as there is a risk of low participation from the target group, inclusion on the breast cancer screening program in the health insurance package is not effective, because the cost-effectiveness of the program will be very low.

Keywords: Screening, Mammography, Participation rates, Cost-effectiveness

**Cost-effectiveness analysis of screening by using
mammography for breast cancer, in areas covered family
physician plan Kerman County: 2014**

A Thesis
Presented to
The Graduate Studies

By
Nooshin Zehtab
To get a masters Degree In
Health Economics

Kerman University of medical Science
2015