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SHERYL SPALDING
29TH DISTRICT

Testimony before the
Senate Public Health and Welfare Committee

On SB407 – An Act concerning mammography examinations; providing for certain information and notice to the patient.

Madam Chairman and Members of the Committee,

Thank you for the opportunity to talk with you about a subject that for the past several years has been a big concern of mine.

In March of 2004 my oldest daughter was diagnosed with breast cancer. This was two full years after she had gone to her primary care physician with a painful lump which her physician told her to ignore. You see, while my daughter had dense breasts, she also had none of the breast cancer markers. She was thin, 34 years old with no family history of breast cancer. In addition, she was not told that a mammogram would probably show nothing.

A couple of months later when Veronica asked if she should get a mammogram, she was told only that she was too young; she was 34.

You have to know at this point that my daughter is a member of the Pink Ribbon Girls (women under the age of 40). So many of those girls have the same story of dense breasts, no markers for breast cancer, and being told not to worry. They were given no other information concerning breast cancer, or dense breasts, or available alternative diagnostic tests.

To return to Veronica's story, about one year later in December of 2003 she went to an endocrinologist who decided to use an ultra sound. He readily found a lump and referred her to a surgeon. In January of 2004 the surgeon tried to do a needle biopsy but could not make that work. He told her what the others did: don't worry, you have dense bumpy breasts, but because we could not do a needle biopsy we need to schedule surgery to get the lump out. Since every doctor had given her no sense of urgency and she had just started nursing school, she put this off until Spring Break.

During that procedure in March she said the room had been lighthearted. Then everything got quiet. She could hear the paper the nurse was holding rustle and knew something was wrong. It was probably cancer the doctor said, but they wouldn't know until after the frozen specimens came back. Two days later on a Saturday morning she got the dreadful news. And just that fast because of the likelihood of it having spread, she was scheduled for her first radical mastectomy the next Thursday. Since then, she has had her second radical mastectomy, reconstructive surgery, and an oophorectomy.

If any of the doctors along the way had given her information about breast cancer, specifically dense breasts, and available diagnostic tests, the results might have been less intrusive, and much less expensive, not to mention less disruptive in her and her family's lives.

The good news is that was seven years ago and today she has a clean bill of health, but at what cost to the system, to her and her family? That needn't have been with just some basic information.