

Presentation Title	Place in Schedule
Return to Work after Breast Cancer Treatment in African-American Patients	Concurrent Session 2.1 <i>Day 2 – Wednesday</i> <i>May 9<sup>th</sup>, 2018</i> <i>2:30 – 3:45pm</i>
Description of Presentation	Presenter Name(s) And Credentials
<p>Background: Employment is a social determinant of health. However, few longitudinal studies have examined employment outcomes in African-American women with breast cancer. We examined factors associated with return to work over 2-year follow-up in a sample of African-American breast cancer patients participating in a randomized controlled trial of a cancer-information intervention’s impact (vs. standard of care) on quality-of-life and treatment adherence outcomes.</p> <p>Methods: Interview and medical-record data from 227 newly diagnosed African-American breast cancer patients (stage 0-III), who enrolled a mean 6 days from surgical post-op visit or start of neoadjuvant therapy, were analyzed in association with return to work; four more interviews were conducted over two years. Potential predictors included sociodemographic variables (age, marital status, income, education, insurance status), treatment(s) received (surgery type, chemotherapy, radiation), comorbidity, and elevated depressed mood (Center for Epidemiologic Studies Depression Scale [CES-D] score &gt; 15). Multivariable logistic regression models were used to identify factors independently associated with return to work.</p> <p>Results: At enrollment, 100 patients (44%) were employed part- or full-time; 71 of employed patients returned to work during 2-year follow-up. Study arm and other treatment and sociodemographic variables were not significantly associated with return to work and was not included in the final model. Patients with elevated depressed mood at baseline were less likely to return to work than non-depressed patients (adjusted odds ratio = 5.8, 95% CI = 1.7-19.3).</p> <p>Conclusions: Patients with elevated depressed mood were less likely to return to work over 2-year followup. Screening for depressed mood at diagnosis and providing treatment might be an effective strategy to</p>	Christine C. Ekenga, PhD, MPH <i>Washington University in St. Louis</i>
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improve continued workforce participation in African-American breast cancer patients.