EDIFICE survey program began in 2005 and aimed to provide better understanding of the participation of the French population in cancer screening programs. Since then, the surveys have been repeated every 3 years for breast, colon and prostate cancers.

In 2013, a specific survey on breast cancer screening was initiated to assess the impact on women’s opinions of the recent controversy (Edifice C) around the risk/benefit of breast cancer screening. We took this opportunity to also assess the most recent evolution in breast cancer screening participation.

EDIFICE surveys are conducted by phone interviews among a representative sample of 1600 subjects aged between 40 and 75 years, using the quota methods. Since 2011, a validated questionnaire known as "EPICES" has been incorporated into the surveys to specifically study an underserved/vulnerable subgroup.

The targeted survey on the breast cancer controversy enrolled a representative sample of 451 women and was carried out in January 2013.

**RESULTS**

**BREAST CANCER SCREENING ACCORDING TO TIME**

For breast cancer, the rate of women attending at least one screening test was 93%, 94%, 95%, 92% in 2005, 2008, 2011, 2013 respectively.

The drop observed between 2011 and 2013 does not reach statistical significance. Interestingly, 52% of women declared having their first mammography before the age of 45 years, i.e., before the recommended limits of the national screening program (50-74 years).

**BREAST CANCER SCREENING ACCORDING TO TIME AND AGE**

There were no statistical differences between age groups (5 years age groups).

**BREAST CANCER SCREENING ACCORDING TO TIME AND SOCIO-PROFESSIONAL CATEGORY**

Women belonging to the lower socio-professional category showed a trend for a lower participation in breast cancer screening compared to women in the higher category (89% vs. 96%, NS).

**BREAST CANCER SCREENING ACCORDING TO TIME AND VULNERABILITY**

Women belonging to the underserved group (EPICES score ≥30) reported a statistically significant lower screening participation compared to the non-underserved group (83% vs. 95%, p<0.01).

**CONCLUSION**

These results suggest a decline in breast cancer screening participation over recent years for the underserved population. This trend will be verified in the forthcoming EDIFICE survey planned for 2014 on a larger sample. The reasons for non-attendance in breast cancer screening will be investigated.