Enhancing Quality of Care Using Project ECHO: Insights from Breast Density and Advanced Breast Cancer Treatment Programs

Abstract 456

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Background

- As of 2020, more than 168,000 women in the United States were living with advanced breast cancer, with a 5-year relative survival rate of approximately 31%. [1]
- The survival rate continues to improve, thanks to advances in treatment, earlier detection, and a deeper understanding of disease biology. [2]
- With developments and updates to the National Comprehensive Cancer Network guidelines care for patients with advanced breast cancer has become increasingly complex.

1 IN 8 WOMEN
will be diagnosed with breast cancer in her lifetime in the US

316,950 WOMEN +2,800 MEN
estimated to be diagnosed with invasive breast cancer in the US in 2025

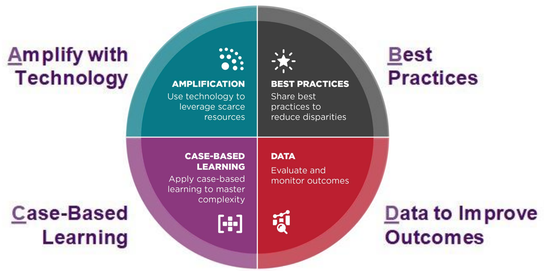
42,680 DEATHS
estimated from breast cancer in the US in 2025

Methods

To help ensure equitable access to emerging therapies and evolving standards of care, the American Cancer Society launched two ECHO (Extension for Community Healthcare Outcomes) programs: one focused on breast density and risk assessment, and the other aimed at enhancing treatment for advanced breast cancer.

The ECHO Model ®

Project ECHO is an innovative telementoring model that moves knowledge instead of patients. [3] Through case-based learning and a series of interactive sessions, participants across the globe share, learn, and collaborate to ensure that health care professionals are equipped to provide the right care at the right time and place, giving everyone the opportunity to prevent, detect, treat, and survive cancer.



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Results

Addressing Breast Density & Risk in Primary Care ECHO Cohort 1

November 2024 – April 2025

Goal: Advance understanding of the role breast density plays in a patient's overall breast cancer risk and the communication of screening options.

Learning Objectives: By the end of the ECHO program, participants will have the knowledge to:

- Communicate risk and provide primary care for patients with dense breasts
- Integrate breast cancer risk assessment into primary care practice

- 121 unique participants
- 279 learning hours
- 4 subject matter experts
- 89 health systems
- 6 sessions
- 36 states and 5 countries

Preliminary Data: The average knowledge score increased from 2.83 (before) to 3.68 (after), indicating a positive shift (+0.85). The average confidence score increased from 2.71 (before) to 3.79 (after), indicating a positive shift (+1.08).

Improving Treatment of Advanced Breast Cancer ECHO Cohort 1

May – November 2025

Goal: Address best practices in shared decision-making and high-quality treatment of advanced breast cancer.

Learning Objectives: By the end of the ECHO program, participants will have the knowledge to:

- Implement a shared decision-making approach to address the optimal sequencing of systemic therapy
- Understand novel radiotherapeutics for detecting and treating breast cancer
- Apply evidence-based strategies to support the physical and psychosocial well-being of patients throughout their treatment journey

- 144 unique participants
- 286 learning hours
- 6 subject matter experts
- 64 health systems
- 6 sessions
- 30 states and 3 countries

Preliminary data: The average knowledge score increased from 2.71 (before) to 3.65 (after), indicating a positive shift (+0.94). The average confidence score increased from 2.74 (before) to 3.53 (after), indicating a positive shift (+0.79).

Discussion

The Addressing Breast Density & Risk in Primary Care ECHO program equipped providers to assess and communicate breast cancer risk, particularly for patients with dense breasts, family history, or genetic markers. Over six months, expert-led sessions fostered practical application in diverse clinical settings. The program demonstrated global relevance. Feedback reflected meaningful practice changes, including routine discussions of breast density and use of risk scoring tools, highlighting the program's success in translating knowledge into improved patient care.

"I will be able to provide more clear education to both patients and primary care teams regarding how/why breast ultrasounds can be used as supplemental tools."

"I counsel every patient now in a different manner. Discussing density is now routine, computing breast cancer (TC) risk scores as well."

The mid-program debrief evaluation of the Improving Treatment of Advanced Breast Cancer ECHO provided data-driven insights that informed curriculum refinement. Feedback from post-session surveys indicated a strong participant interest in genetics and genomics within the context of precision oncology. Given that the majority of participants to date are nurses (54%), nurse practitioners (7%), and patient navigators (5%), the upcoming sessions will be adapted to emphasize clinically relevant content tailored to these professional roles.

"Knowledge is power, and I want to be able to empower my patients."

"I take care of many patients with advanced breast cancer, and this will strengthen my practice."

Conclusion

As advancements in breast cancer care accelerate, staying informed is essential. ECHO programs bridge knowledge gaps by connecting a network of health care professionals through dynamic, peer-to-peer collaboration. Using the "all teach, all learn" model, these programs not only share best practices, but they foster expertise, elevate clinical standards, and empower health care professionals to provide exceptional, evidence-based care to their patients.



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