

Analysis of Breast Cancer Screenings in St. Louis Finds Gaps and Racial Disparities, Offers Solutions

Black women ages 35 to 44 are nearly four times more likely to die of breast cancer than white women in the St. Louis region.

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Gateway to Hope, a [nonprofit](#) organization focused on removing barriers to affordable and timely [breast](#) healthcare, conducted a [first-of-its-kind regional analysis of breast cancer care](#) in the United States. The study revealed that the city of St. Louis and St. Louis county use just half of their available [mammogram](#) capacity, and [screening](#) rates are below recommended levels. What's more, Black women in the region ages 35 to 44 are nearly four times more likely to die of [breast cancer](#) than white women of the same age.

These disparities exist despite advanced infrastructure and expertise, noted the researchers, who also pointed to possible solutions.

The study was led by Gateway to Hope in partnership with the City of St. Louis Department of Health, the Saint Louis County Department of Public Health, the University of [Illinois](#) Chicago School of Public Health and the [Missouri](#) Foundation for Health and boasted participation by 90% of local providers.

From the study, Gateway to Hope identified the following five potential areas for collaboration and exploration:

- Aligning existing resources with patient needs;
- Expanding access through extended hours as well as improved scheduling and [transportation](#) solutions;

- Strengthening care coordination to reduce fragmentation and delays;
- Investing in community engagement to increase screening uptake and trust;
- Building ongoing data-sharing systems to track progress and drive accountability.

“The data in this report is groundbreaking, and we can all heed the calls to action stemming from it,” said Gateway to Hope CEO Katie Manga [in a press release](#). “We know that breast cancer has a 90%-plus cure rate when detected soon enough. The St. Louis region can do more to ensure all women have access to lifesaving early detection care.”

According to the [American Cancer Society \(ACS\)](#), breast cancer is the second most common form of cancer (behind skin cancer) for women in the United States, accounting for one in every three female cancer diagnoses. It is also the second leading cause of cancer death in women (behind lung cancer).

ACS estimates that more than 322,910 new cases of invasive breast cancer and over 60,730 new cases of non- or preinvasive breast cancer (ductal carcinoma in situ) will be diagnosed in 2026. Also this year, about 42,140 women will die of the malignancy. Once the cancer has [metastasized](#), or spread to other parts of the body, it is harder to treat, and [survival](#) rates are lower. [Earlier detection](#) and treatment can improve outcomes.

For more information, check out Cancer Health’s [Basics on Breast Cancer](#).

For the St. Louis study, partnering [epidemiology](#) teams from the Saint Louis County Department of Public Health and the City of St. Louis Department of Health provided breast cancer incidence, mortality, treatment timeliness and stage-at-diagnosis data. Using the Missouri Cancer Registry and public health data from the Missouri Department of Health and Senior Services, researchers examined trends by race, geography, age and ZIP code.

All but two of the region’s 33 mammography facilities participated in the study, reporting volumes of biopsies, screenings, services, no-show rates, radiology staff and distribution of mammograms. Researchers also reached out to mammography facilities directly to ask about availability, services, hours of operations and types of imaging. Based on this gathered data, researchers calculated the theoretical annual screening capacity of the region in 2024, which, when compared with actual 2024 screening volumes, revealed gaps concerning capacity and utilization of breast [cancer screening](#).

Overall, the St. Louis region exceeded national benchmarks in utilization of advanced technology, with 64 accredited mammography units using advanced 3D tomosynthesis. The workforce was also highly specialized, with 70% of radiologists trained in breast imaging and 81% primarily focused on breast care. Only 30% of screening facilities offered Saturday appointments, and only 6% had appointments on Sundays. Less than half of facilities offered walk-in appointments.

The study revealed disparities in cancer outcomes and mammogram utilization. Black women ages 35 to 44 were four times more likely to die of breast cancer than white women in the same age range, despite breast cancer occurring at similar rates among both groups of women. Late-stage diagnoses were more common in low-income and predominantly Black ZIP codes, with these areas reporting up to 44% of cases diagnosed in later stages. Screening rates in higher income ZIP codes reported screening rates above 60%, while rates were between 30% and 40% in North St. Louis City and North County ZIP codes, two predominantly Black municipalities.

“Our region has the infrastructure and the expertise. What we need now is an even greater will to align those resources strategically so all women, not just some, have access,” [said Manga](#). “We know what it takes to close the divides, and this landmark analysis gives our region a roadmap for action. Gateway to Hope stands alongside our area’s healthcare leaders to help address disparities in care and save more lives.”

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<http://beta.docker.realhealthmag.com/article/analysis-breast-cancer-screenings-st-louis-finds-gaps-racial-disparities-offers-solutions>