BACKGROUND
We aim to describe our psychosocial distress screening program with attention to our female breast cancer population and symptoms of anxiety and depression among English-speaking Caucasians and Spanish speaking Hispanics.

METHODS
We retrospectively examined the emotional distress scores of 170 women with newly diagnosed breast cancer at the Cancer Centers of Colorado at SCL Health/Saint Joseph Hospital from January-December 2015. SCL Health IRB approval was obtained. Patients were provided a distress screening questionnaire (English or Spanish) at their initial visit. Data points included: gender, age, ethnicity, primary language, emotional distress (worry/nervousness or anxiety/fears and sadness/depression) and degree of distress (“thermometer” scale 0-10 or not at all, slightly, moderately, seriously or very seriously). The degree of distress measures were revised in August 2015 from a “thermometer” scale to a descriptive scale.

RESULTS
Of 170 women studied, there were 104 Caucasian, 49 Hispanic, and 17 other race/ethnicity (including Black, Asian, Native American, and Pacific Islander). 76 women (40 Caucasian, 31 Hispanic, 5 other) did not participate in filling out the questionnaire. Of the 94 patients responding, 68% were Caucasian (n=64), 19% Hispanic (n=18), and 13% other (n=12). With regard to symptoms, 55% of Caucasians (n=35), 44% of Hispanics (n=8), and 50% of other (n=6) reported anxiety. Moreover, 36% of Caucasians (n=23), 56% of Hispanics (n=10), and 33% of other (n=4) recorded sadness/depression. Among the descriptive scale scores from August-December 2015, Hispanics were the only group to record “seriously” or “very seriously” in regard to anxiety or sadness/depression.

CONCLUSION
Our retrospective study of emotional distress screening demonstrated lower participation among Hispanics with breast cancer. Concerns of anxiety and depression were common among all groups, with a small number of Hispanics reporting the highest levels. Emotional distress screening is an important component of cancer care for women with breast cancer and barriers for non-English speaking Hispanic patients need to be examined.