

# Closing the Gap in Colon Cancer Screening

## *Results of a National Telephone Survey*

### OVERVIEW AND HIGHLIGHTS

The Colon Cancer Alliance (CCA), a national nonprofit organization dedicated to ending the suffering caused by colon cancer, and Quest Diagnostics (NYSE: DGX), the world's leading diagnostic testing company, engaged a third-party research company to conduct a national probability telephone study in May 2011 to gauge awareness of colon cancer screening. The study only included men and women self-identified as 50 years of age or older.

Colon cancer is the second leading cause of cancer related deaths in men and women in the United States, and will have claimed the lives of about 50,000 Americans in 2011, according to the American Cancer Society (ACS). Sixty percent of colon cancer deaths could be prevented if people were screened as indicated by guidelines, according to the U.S. Centers for Disease Control and Prevention.

American Cancer Society guidelines recommend that men and women of average risk for developing colon cancer begin screening at age 50. Recommended screening tests include colonoscopy (every 10 years), flexible sigmoidoscopy or virtual colonoscopy (every five years), and fecal occult blood (FOBT) and fecal immunochemical (FIT) tests (annually), among others.

Highlights from the survey findings include:

- Screening gaps persists: Nearly one out of three (31 percent) men and women age 50 years and over have never been screened for colon cancer by any screening method.
- Colonoscopy is the preferred method: Eighty seven percent of respondents who had been screened said they had been screened by a colonoscopy. Medical experts widely regard colonoscopy as the preferred colon cancer screening test.
- Healthcare providers influence colon cancer screening: Among men and women age 50 and older who have not been screened for colon cancer, more than one in four (28 percent) said their healthcare provider, such as a doctor or nurse, did not recommend screening. And nearly one out of five (17 percent) who had been screened, but not by a colonoscopy, said their healthcare provider had not recommended a colonoscopy. However, 80 percent who claimed to know ACS guidelines calling for screening to begin at age 50 said their knowledge came from their healthcare provider.
- Time constraints, fear and cost concerns are also major impediments to screening: Among patients who said fear prevented them from being screened by any method, 61 percent cited unpleasant bowel preparation as a deterrent to screening. This finding is noteworthy because while some tests, most notably a colonoscopy, involve bowel

preparation, others, such as FITs, do not, raising the prospect that healthcare providers could step up efforts to educate patients in their screening options.

- A large number of respondents did not adhere to guidelines calling for periodic testing after an initial screen: Of those between 60 and 70 years old, 33 percent claimed they had been screened once and 22 percent said they had been screened twice. The findings suggest that some patients, after being screened once, are lulled into a false sense of security and fail to undergo additional testing.
- Diagnostic advances may improve screening rates: Three out of four (75 percent) survey respondents said they would be screened more frequently if a blood test for colon cancer screening were available. And when asked, 80 percent said they would give up a modern convenience – from wine and beer to chocolate or even their cell phone – for six months if they could take a blood test for colon cancer instead of a colonoscopy. Genetic blood tests to aid the detection of colon cancer have recently been introduced in the United States, but they have yet to be endorsed by medical guidelines for screening.

## DEMOGRAPHICS AND SURVEY METHOD

The Colon Cancer Alliance and Quest Diagnostics engaged national survey firm ORC International, an infoGroup company, to conduct a national probability phone study during the period of May 5-9, 2011. The study was funded through an educational grant from Quest Diagnostics.

The study involved two telephone surveys conducted among a national probability sample of 1,304 adults comprising 614 men and 690 women 50 years of age and older, living in private households in the continental United States. Respondents were asked a series of questions involving multiple choice answers to gauge their self-professed behavior and beliefs with regard to colon cancer screening.

The survey's strengths include the random selection of respondents and that it only included men and women self-identified as 50 years of age or older. Other strengths of the survey include its size and distribution among people of different ages, genders, ethnicities (Caucasian, African American and Hispanic/other ethnic group), education levels (not a high school graduate to college graduate or higher), income levels (\$35,000 to more than \$100,000 annually) and regions. The limitations of the survey include an inability to confirm respondents' answers, such as through access to medical records.

## SUMMARY OF FINDINGS

### AWARENESS OF COLON CANCER SCREENING GUIDELINES

Survey respondents who said they were aware of ACS screening guidelines cited the following as the source of their knowledge:

- 80 percent – healthcare provider
- 31 percent – family
- 23 percent – friends
- 12 percent – Internet

## **GAPS IN COLON CANCER SCREENING**

Nearly one out of three (31 percent) men and women age 50 years and older have never been screened for colon cancer. The most frequently cited reasons for not getting screened were (respondents were asked to select options that applied):

- 28 percent – healthcare provider, such a doctor or nurse, didn't recommend I get screened
- 18 percent – too busy or time constraints
- 16 percent – fear
- 16 percent – didn't know I needed to be screened
- 15 percent – can't afford the health insurance co-payment
- 10 percent – no insurance
- 9 percent – modesty or embarrassment

Among those who said fear was a reason they had never been screened for colon cancer, the following causes of fear were cited:

- 61 percent – unpleasant bowel preparation (laxatives and fasting)
- 36 percent – afraid of test results
- 35 percent – side effects, such as pain, discomfort and gas
- 28 percent – afraid of medical tests
- 17 percent – fear of being sedated by anesthesia
- 6 percent – modesty or embarrassment

## **REASONS NOT SCREENED BY COLONOSCOPY**

Eighty seven percent of those who had been screened for colon cancer said they had been screened by a colonoscopy. Those who had been screened for colon cancer, but not by colonoscopy, cited the following reasons why they had not had a colonoscopy:

- 22 percent – unpleasant bowel preparation (laxatives and fasting)
- 20 percent – side effects from the procedure or preparation
- 20 percent – fear of the procedure or anesthesia
- 17 percent – healthcare provider didn't recommend a colonoscopy

## **PERIODIC TESTING AFTER INITIAL COLON CANCER SCREEN**

Among the men and women age 50 years and over who said they had been screened in the past:

- 40 percent have been screened once
- 22 percent have been screened twice
- 12 percent have been screened three times
- 18 percent have been screened four or more times

Among those between the ages of 60 to 70 years old:

- 24 percent had never been screened
- 33 percent have been screened once
- 22 percent have been screened twice

## LIKELIHOOD TO GET SCREENED FOR COLON CANCER USING A BLOOD TEST

When respondents were asked about a blood test for detecting colon cancer:

- 78 percent said they were likely to take a blood test for colon cancer screening
- 18 percent said they were unlikely to take a blood test
- 75 percent said they were more likely to get screened more frequently for colon cancer if a blood test were available.
- 80 percent they would give up a modern convenience – from wine and beer to chocolate or even their cell phone – for six months if they could take a blood test for colon cancer instead of a colonoscopy.

## CONCLUSIONS

The present study builds on other recent research suggesting that more people 50 years and older are being screened than in the past. Yet, a significant number of people who should be screened are not. Impediments to testing include a lack of knowledge about colon cancer screening options, time constraints and fears of extensive bowel preparation and sedation by anesthesia required of certain tests. Misinformation about testing options, including the frequency with which to undergo different screening tests, may also contribute to poor guideline adherence.

Healthcare professionals have an opportunity to educate their patients on the value of screening and the advantages, limitations and applications of different screening tests. While colonoscopy is widely considered the preferred screening method, medical associations in recent years have expanded the range of tests they recommend with the recognition that non-colonoscopy tests may provide opportunities to evaluate patients who would otherwise never be screened for colon cancer.

Finally, the survey suggests that easier, less invasive screening options, such as blood tests, may help to promote higher rates of clinically appropriate screening. The medical and diagnostics community should seek to develop diagnostic advances that are both clinically reliable and convenient for the patient.

### Colon Cancer Alliance

The Colon Cancer Alliance is the oldest and largest national patient advocacy organization dedicated to ending the suffering caused by colorectal cancer. In order to increase rates of screening and survivorship, the Colon Cancer Alliance provides patient support, public education, supports research and conducts advocacy work across the United States. Visit [www.CCAlliance.org](http://www.CCAlliance.org).

### Quest Diagnostics

Quest Diagnostics is the world's leading provider of diagnostic testing, information and services that patients and doctors need to make better healthcare decisions. The company offers the broadest access to diagnostic testing services through its network of laboratories and patient service centers, and provides interpretive consultation through its extensive medical and scientific staff.

The company is also a leader in colon cancer testing. The company offers the **ColoVantage™** test, the first blood-plasma DNA test in the U.S. for aiding in the detection of colon cancer, based on the Septin9 DNA biomarker owned by Epigenomics AG. The company also offers the **Insure® FIT** test as well as several genetic tests, including **EGFR pathway analysis**, for aiding in therapy selection for colon cancer. Additional company information is available at [QuestDiagnostics.com](http://QuestDiagnostics.com). Follow us at [Facebook.com/QuestDiagnostics](https://Facebook.com/QuestDiagnostics) and [Twitter.com/QuestDX](https://Twitter.com/QuestDX).

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