



ScreenWise

Breast, Cervical, and Hereditary Cancer Screenings

OCTOBER 28, 2015



ScreenWise

- Three programs working together to bring quality screening services to Oregon residents
- Why we all do this work...



Patti



Mihye



Elizabeth

What ScreenWise Does

- Formerly known as the BCCP, WISEWOMAN and Genetics Programs
- The purpose of ScreenWise is to reduce breast and cervical cancer, cardiovascular disease and other diseases by promoting early detection, risk factor screening, risk reduction support, and access to medical treatment.

ScreenWise Providers

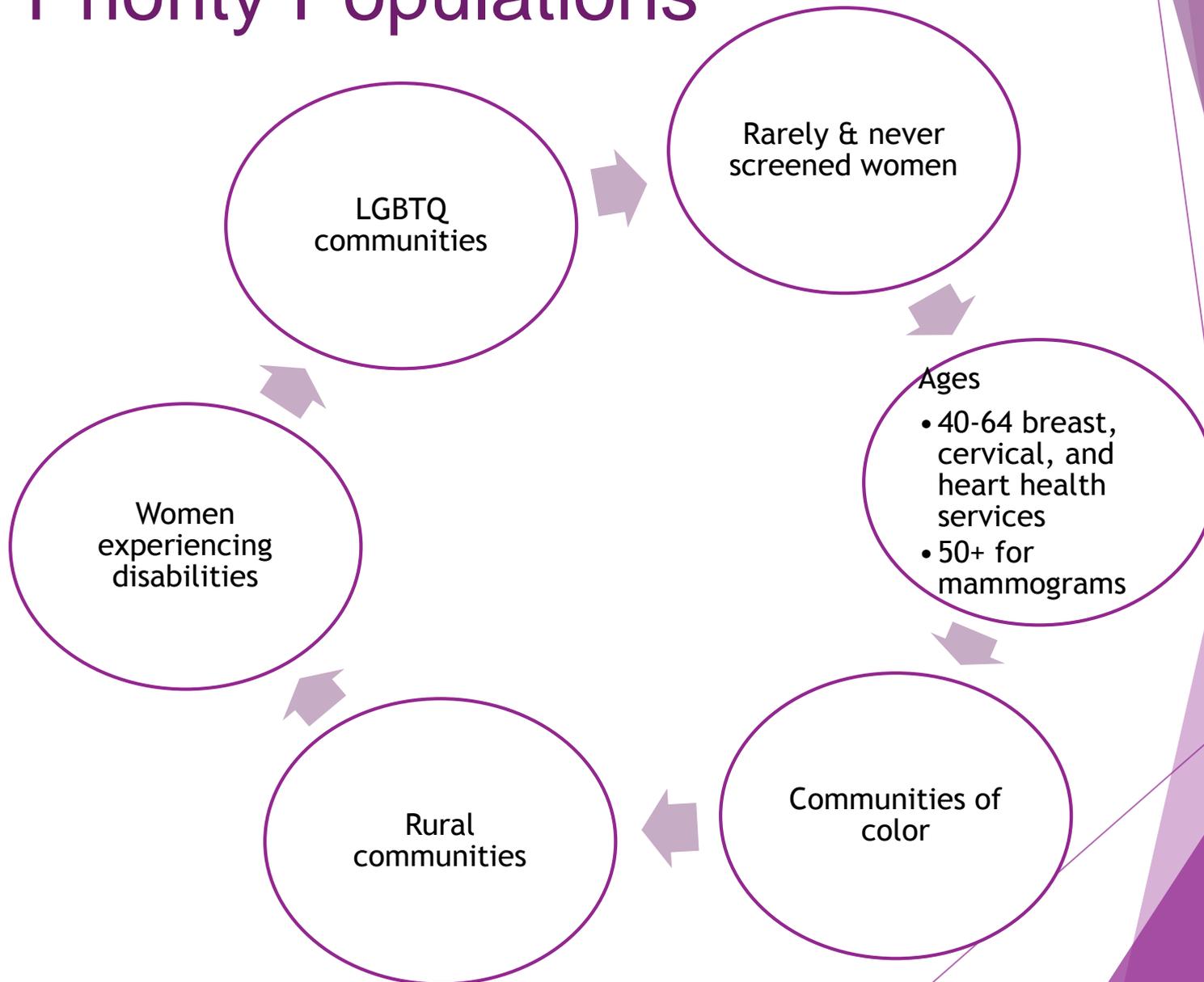
Enrolling Provider

- FQHC's, Local Health Departments, Rural Health Centers, Private Clinics, Naturopaths, Tribal Health Centers, County Clinics

Ancillary Provider

- Labs, Imaging Centers, Surgeons or Surgical Centers, Hospitals, County Clinics

Priority Populations



Eligibility (self reported)

- Oregon Resident (client lives or intends to live in Oregon)
- Household income at or below 250% of Federal Poverty Level
- Uninsured or insurance does not fully cover breast and cervical cancer screening

A client can enter the program for either screening or diagnostics:

For symptomatic women under 40, or men of any age, provider must follow national clinical guidelines and document in patient record symptoms that led to decision to enroll in program.

Eligibility (self reported)

	Age Group	Breast Services	Cervical Services	Cardio-vascular Services	Genetics Resources
Women	21-39	✓	✓	-	✓
	40-49	✓	✓	✓	✓
	50-64	✓	✓	✓	✓
	65+	✓*	✓*	-	✓
Men	Any age with breast symptoms	✓	-	-	✓

*Women 65 and older who aren't enrolled in Medicare Part B

What Can Happen in an Office Visit

- Hereditary Cancer Risk Assessment
- Referral to genetic counseling for high-risk clients
- Tobacco Risk Assessment and referral to Quit Line
- Clinical Breast Exam
- Pelvic Exam
- Pap Test
- High-risk HPV co-testing
- Referral for Screening Mammogram
- Referral for Diagnostics

Cardiovascular Services

For women ages 40 - 64, services can include:

- Health risk assessments
- Heart disease and stroke risk factor screening including:
 - ♥ Blood pressure
 - ♥ Cholesterol
 - ♥ Glucose
- Risk reduction counseling
- Referral to Healthy Behavior Options

Genetics Resources

- Genetics screening questions added to our Screening Form
- Provider education, trainings & access to tools
- Providers who specialize in genetics are listed on our webpage



What about the cost of genetic counselling and testing?

Screening Results

Approximately 80% of clients will have normal breast and cervical screening results

-Abnormal Results are referred for diagnostics or treatment

60% to 80% of clients will have a modifiable risk factor for heart disease

-Abnormal results are followed up with medical support or lifestyle modification support

Approximately 2% to 14% of clients will be identified as high-risk of developing hereditary cancer and should be referred for genetic counseling

-Referral rates depend on the risk assessment tool used

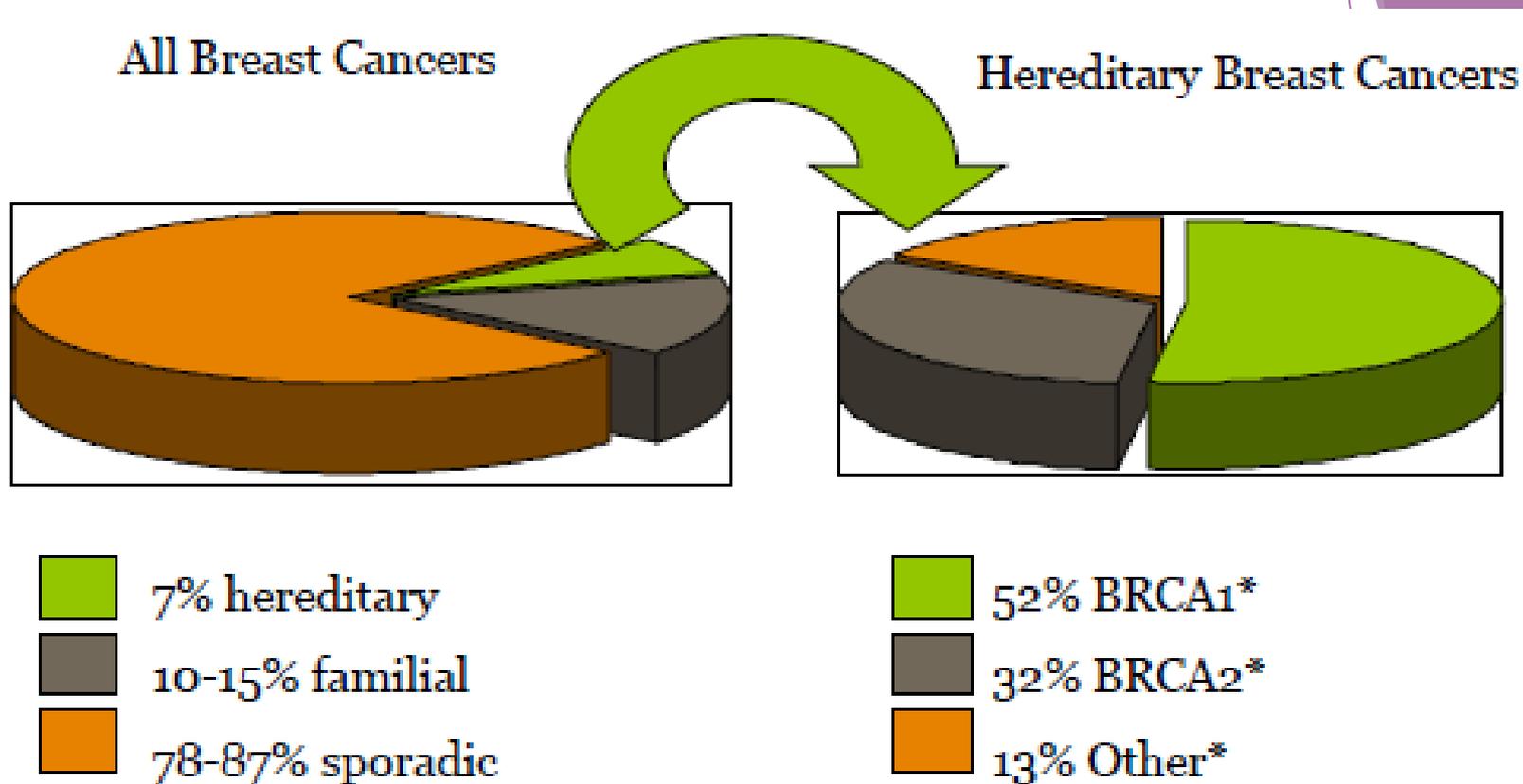


ScreenWise (for Providers)
971-673-0581



Toll-free client hotline
1-877-255-7070

Cancer is fundamentally a genetic disease[†]

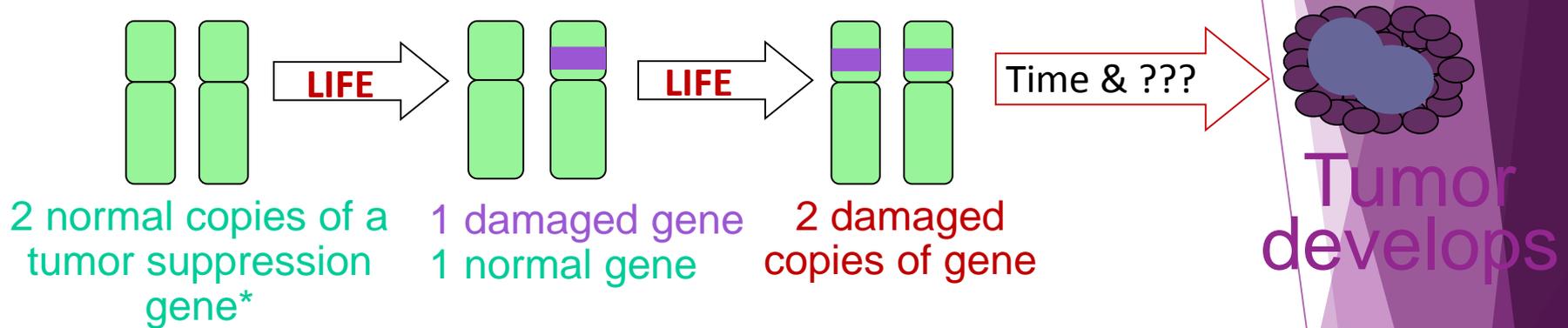


* From A J Hum Genetics, 62:676-689, 1998

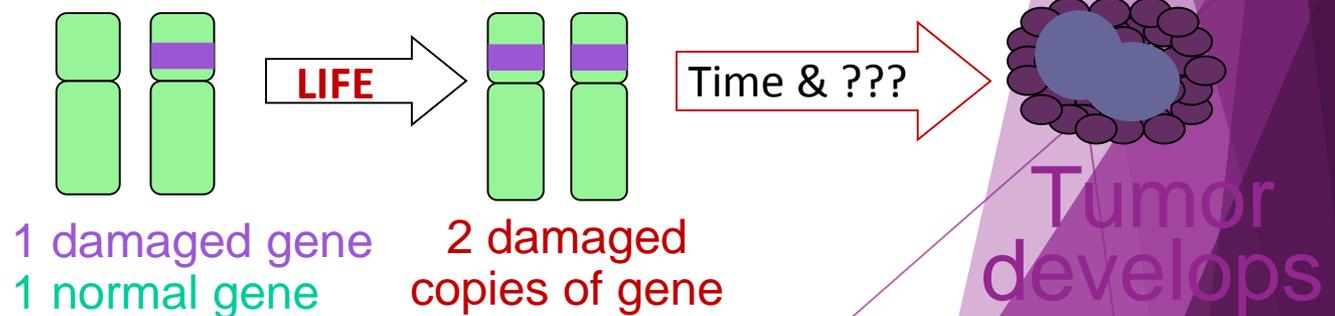
[†]All cancers are genetic but most are not inherited

It Takes Two Hits

We each have two copies of each gene

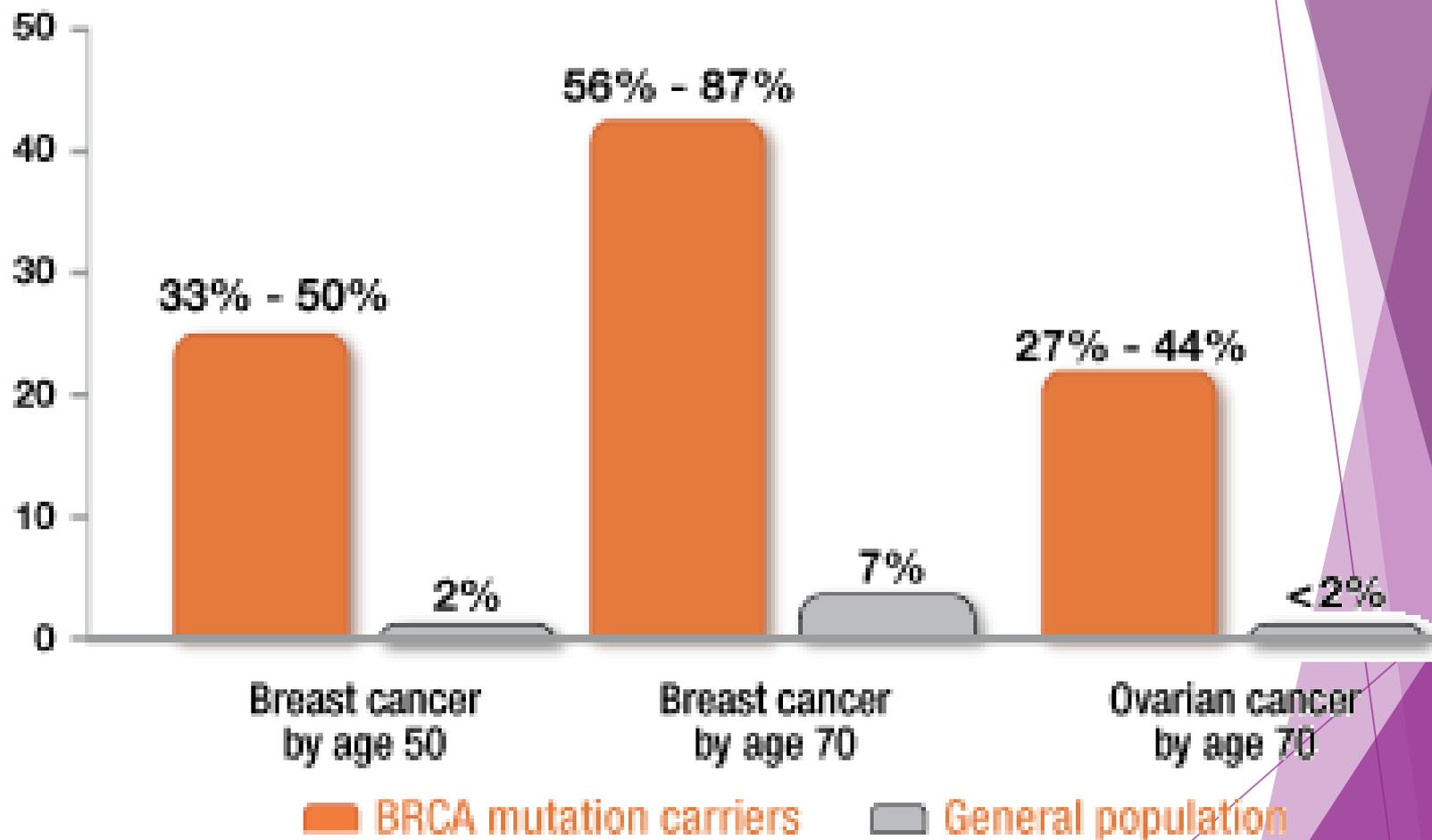


In hereditary cancer, one damaged gene is inherited



* *BRCA* mutations are responsible for ~ 60% of heritable breast and ovarian cancers; mutations in other genes cause the remaining 40%.

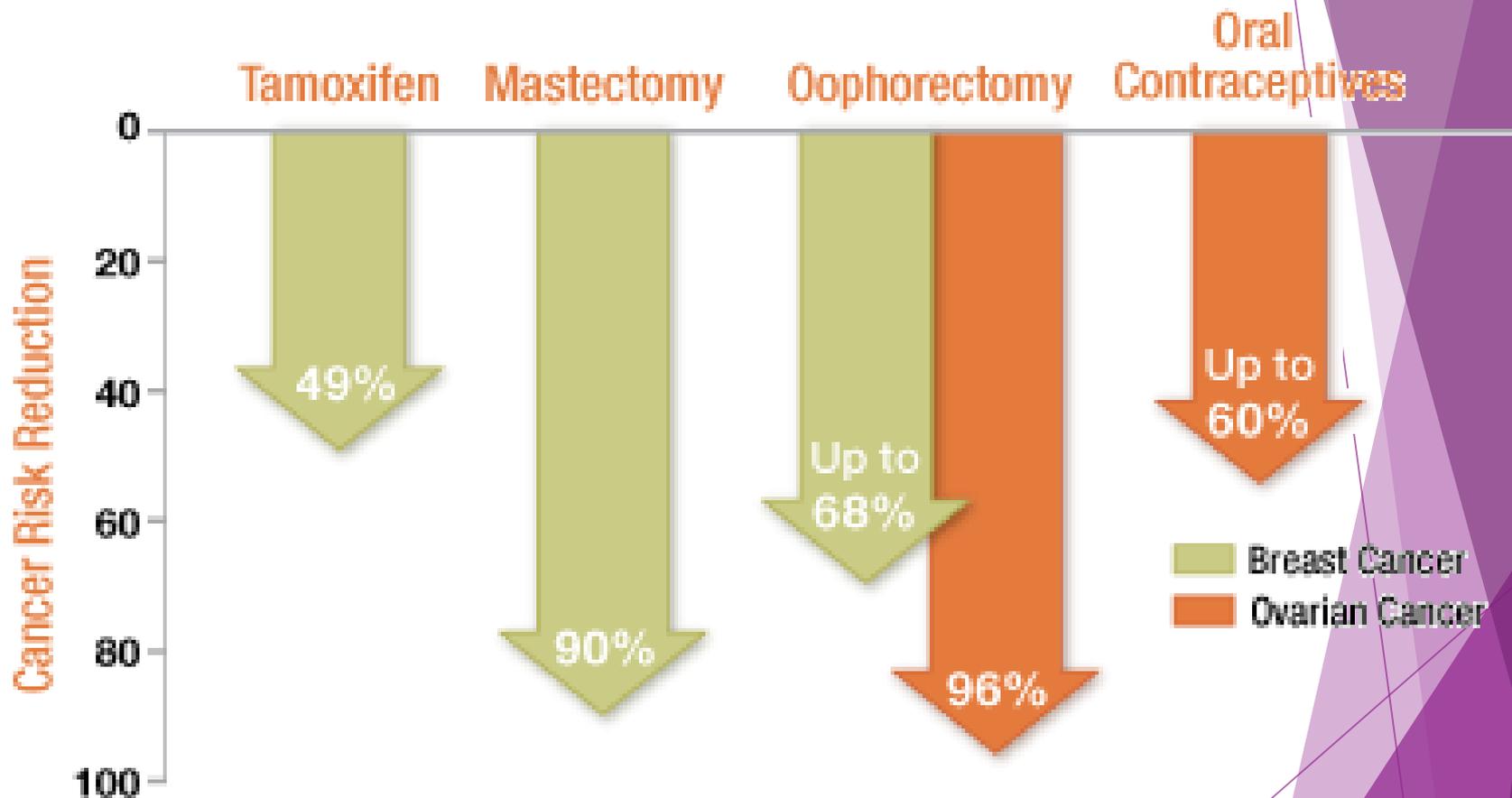
Certain *BRCA* Mutations Increases Your Risk of Cancer... (showing a woman's risk only)



Source: InheritedRisk.com. Breast and Ovarian Cancer. Accessed July 2, 2014.

<http://www.inheritedrisk.com/breast-ovarian-cancer/>.

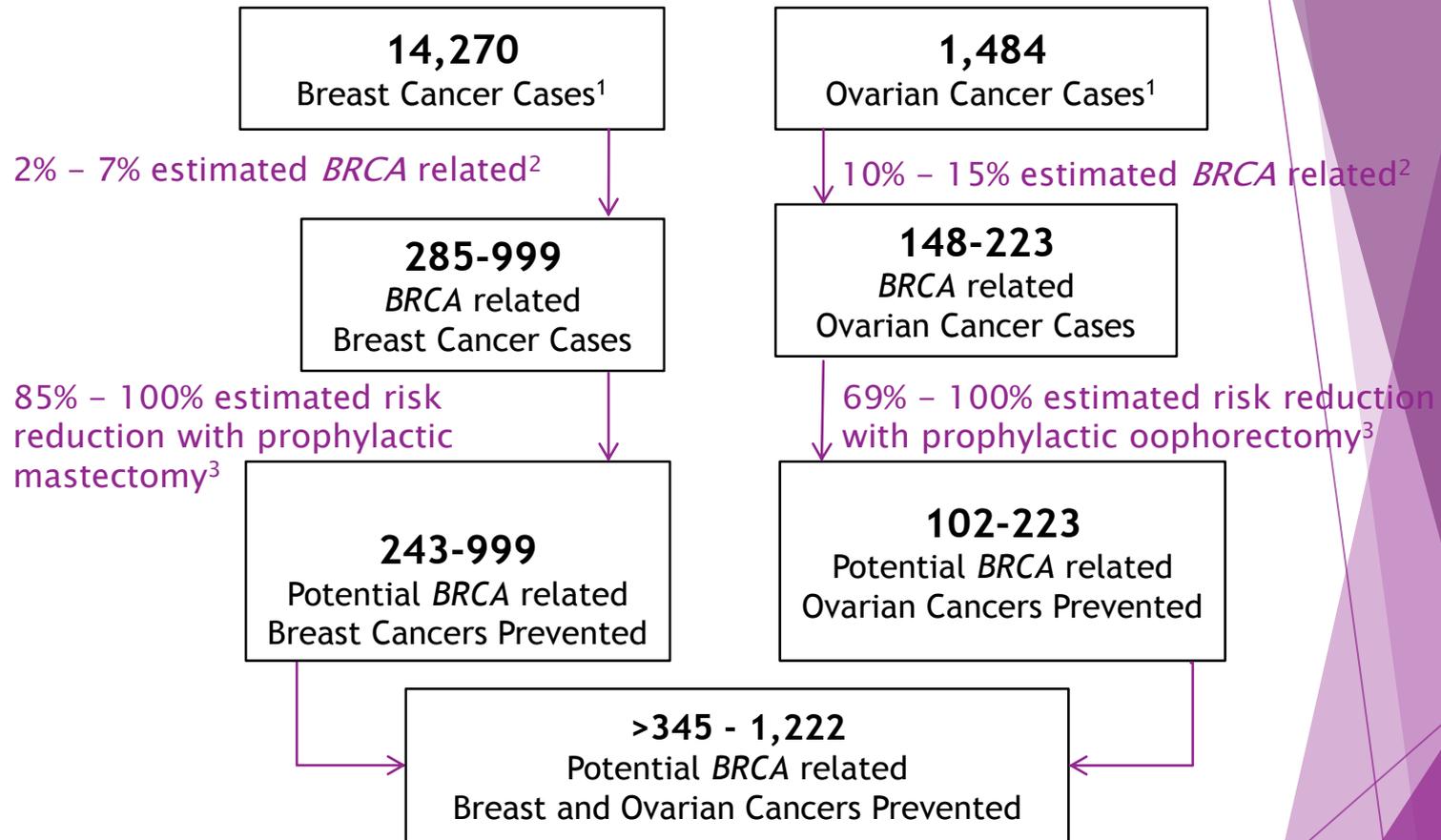
...But Proactive Health Management Can Reduce Your Risk of Developing Cancer



Source: InheritedRisk.com. Breast and Ovarian Cancer. Accessed July 2, 2014.

<http://www.inheritedrisk.com/breast-ovarian-cancer/>.

Potentially Preventable *BRCA* related Breast and Ovarian Cancers, Oregon, 2005-2009



Additional lives could be saved through chemoprevention to reduce breast cancer risk and increased surveillance to identify cancer early

Data Source:

1. Oregon Cancer Statistics, National Program of Cancer Registries, 2005-2009

2. Bowen, et al. Public health action in genomics is now needed beyond newborn screening. *Public Health Genomics* 2012; 15(6):327-34

3. United States Preventive Services Task Force, Draft Recommendation Statement, Risk Assessment, Genetic Counseling, and Genetic Testing for *BRCA* related Cancer, 2013

Evidence Based Risk Assessment

► United States Preventive Services Task Force, 2014

- Evidence-based
- For women without a personal history of cancer, referral should be made if family history of:
 - Breast cancer diagnosis <50
 - Bilateral breast cancer
 - Family history of breast and ovarian cancer
 - Breast cancer in ≥ 1 males
 - Multiple cases of breast cancer
 - >1 relative with w/ 2 primary types of BRCA-related cancer
 - Jewish ancestry
 - Known familial mutation
- Recommends against referral for low risk women (harms outweigh benefits)

► National Comprehensive Cancer Network

- www.NCCN.org
- Guidelines based on available evidence and expert opinion
- Has guideline for those without a history of cancer, similar to USPSTF
- Also has guideline for those with cancer



Genetics as a preventive medicine

① Take a three generation family history

- ▶ Classifying the family history is important in identifying those who may benefit from genetic testing and in tailoring management.

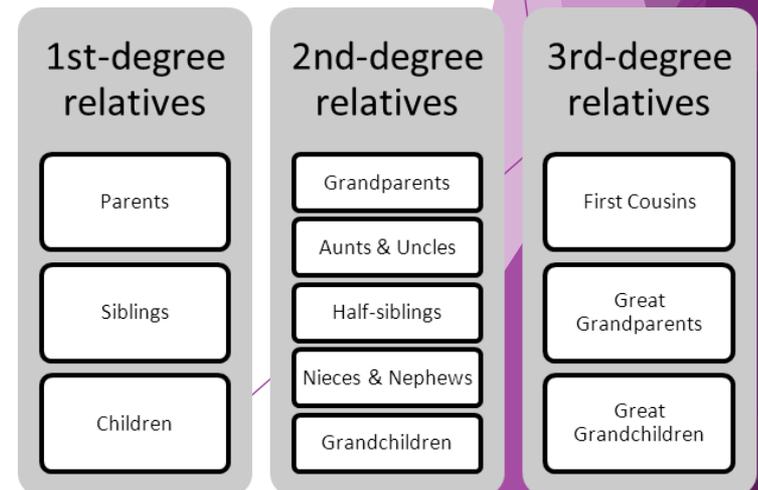
② Do a hereditary cancer risk assessment

- ▶ Genetic counseling and testing is most beneficial to those whose family history is classified as hereditary.

③ Refer to a cancer genetics specialist if high-risk

1 Take a three generation family history

- ▶ Relationship & side of family
- ▶ Age at time of diagnosis
- ▶ Type of disease/condition (as much detail as possible)
 - E.g. if cancer, ask
 - Organ in which tumor developed
 - Number of tumors (Primary or recurrence)
 - Pathology, stage, and grade of malignancy



Additional family history information

- ▶ Cause of death (if deceased)
- ▶ Especially note unusual cancers & rare diseases
- ▶ Ethnic background
- ▶ Current age or age at death
- ▶ Relevant conditions & contributing risk factors
- ▶ Information regarding prior genetic testing
- ▶ Information about pregnancies including infertility, losses, and complications
- ▶ Consanguinity

② Do a hereditary cancer risk assessment

▶ USPSFT *BRCA-related Cancer: Risk Assessment, Genetic Counseling and Genetic Testing, December 2013*

- Recommends that primary care providers screen women who have family members with breast, ovarian, tubal, or peritoneal cancer with 1 of several screening tools designed to identify a family history that may be associated with an increased risk for potentially harmful mutations in breast cancer susceptibility genes (*BRCA1* or *BRCA2*).
- Women with positive screening results should receive genetic counseling and, if indicated after counseling, BRCA testing.
 1. Ontario Family History Assessment Tool
 2. Manchester Scoring System
 3. Breast Cancer Genetics Referral Screening Tool B-RST
 4. Pedigree Assessment Tool
 5. FHS-7

Risk Assessment & Referral Tools

► Breast Cancer Genetics Referral Screening Tool (B-RST)

- <https://www.breastcancergenescreen.org/>
- Online, quick, can be used by patients and/or providers
- ~2% referral rate

► FHS-7

- Seven yes/no questions
 - ≥ 1 yes indicates referral for genetic counseling
- ~14% referral rate
 - referral based on a single breast cancer in a 1st degree relative



► The Cancer Family History Wheel

- Evaluates family history ONLY
 - not meant to assess risk in people who already have a cancer diagnosis
- ~6% referral rate
- Available from ScreenWise while supplies last



Most Common Hereditary Breast Cancer Syndromes

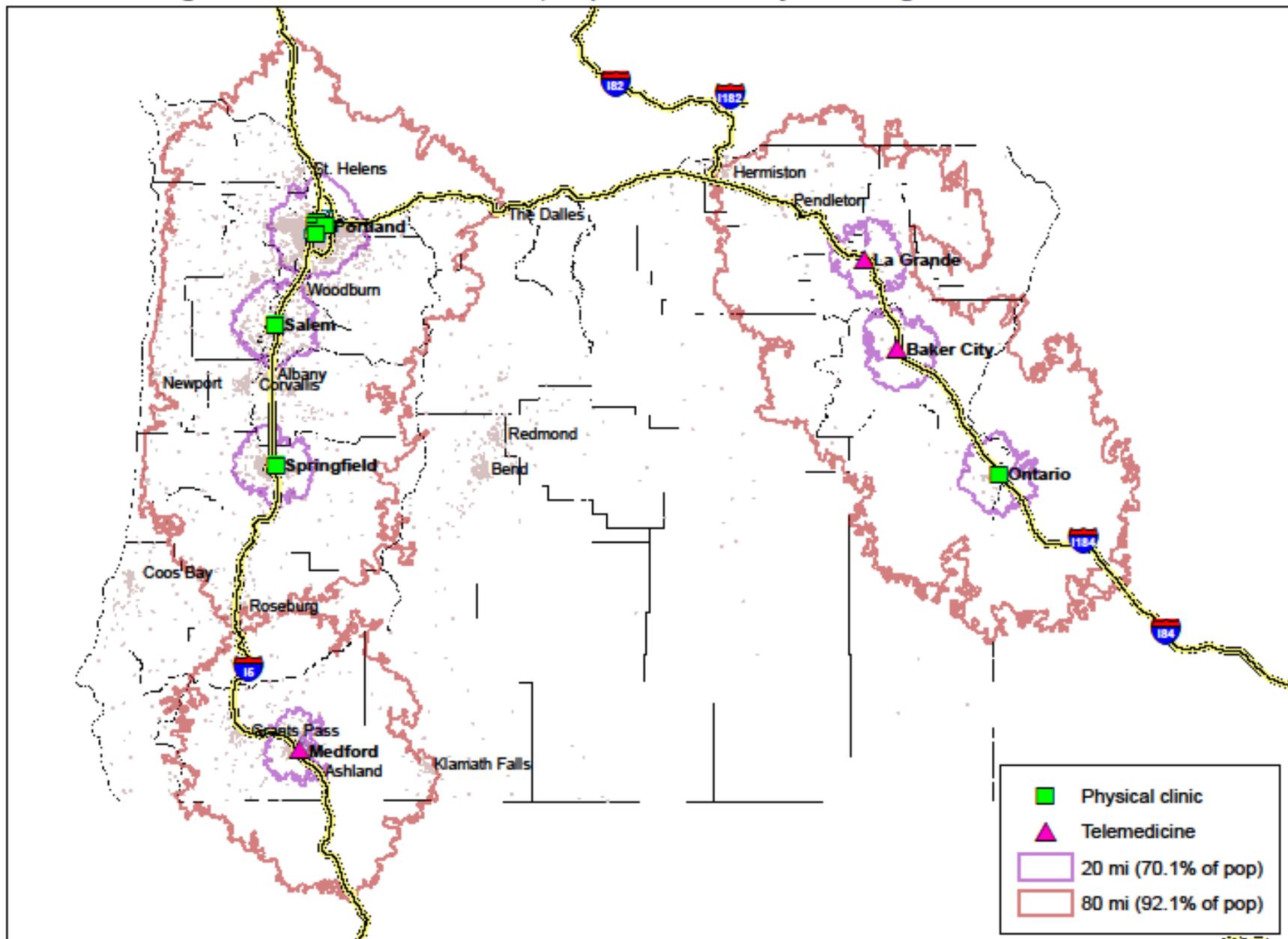
Gene	Syndrome
BRCA1 & BRCA	Hereditary breast ovarian cancer syndrome (HBOC): Breast, ovarian, male BC, prostate cancers, and pancreatic cancer, melanoma
p53	Li-Fraumeni syndrome: Breast, sarcoma, lung, leukemia, colon, adrenal cortical tumor
PTEN	Cowden syndrome: Breast, thyroid, endometrial cancers; less often brain, renal cancers. Skin manifestations, thyroid abnormalities, polyps, macrocephaly
CDH1	Hereditary diffuse gastric cancer: Lobular breast cancer and diffuse gastric cancer.

Lynch Syndrome: colorectal, endometrial, ovarian, and stomach cancer, as well as other cancers.

3) Refer to a cancer genetics specialist if client is identified as high-risk

- ▶ Who should provide genetic counseling?
 - A certified genetic counselor (CGC), a nurse with an Advanced Practice Nursing degree in Genetics (APGN), or a physician with certification from the American Board of Medical Genetics and Genomics (ABMG).
- ▶ Where can clients get genetic counseling?
 - Baker City
 - Eugene/Springfield
 - La Grande
 - Medford
 - Ontario
 - Portland Metro
 - Salem
- ▶ Access to Genetic Services (counseling & testing)
 - Cost
 - Distance to travel

Oregon Cancer Genetics Clinics, Population Density & Driving Distance To Clinics



Resources & Opportunities

▶ Hereditary Cancer Risk Assessment tools

- ▶ BRCA-Related Cancer: Risk Assessment, Genetic Counseling, and Genetic Testing (USPSTF)
 - ▶ Recommends use of any 1 of 5 tools, see recommendation statement for details
- ▶ Breast Cancer Genetics Referral Screening Tool B-RST
 - <https://www.breastcancergenescreen.org/>
 - Online, quick, can be used by patients and/or providers

▶ Hereditary Cancer Education & Free CMEs

- ▶ www.nchpeg.org/hboc/
 - ▶ 7 highlighted case examples & additional resources
- ▶ www.jaxge.org
 - ▶ 4 cancer risk assessment/family history courses for primary care clinicians

▶ Oregon Genetics Program

- ▶ Join our listserve! Just email us at oregon.geneticsprogram@state.or.us with 'listserve' in the subject line
- ▶ Phone: 971-673-0273 Website: <http://www.healthoregon.org/genetics>

Summary

▶ Screening Saves Lives

- ScreenWise is a resource for you and your clients

▶ Identifying individuals at risk for inherited cancer is important

- It can change medical management, leading to prevention of cancer or early diagnosis
- It involves collecting family history information and recognizing red flags
 - Several tools and guidelines are available to help
- Referral for genetic counseling is key for informed decision making, identification of best person in family to test, and cost reduction

▶ Providers like you are key to helping at risk clients get access to appropriate care!

How to Reach Us

- Website: www.healthoregon.org/ScreenWise
- E-mail: ScreenWise.info@state.or.us
- Call: 971-673-0581
- Fax: 971-673-0997
- Toll-free client hotline: 1-877-255-7070

Questions? Suggestions? Thoughts?