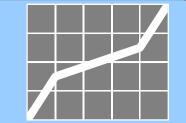
Gastroenterology Week

October 23 – 27, 2010

18th United European

Tumour Centre

At The University Of Erlangen-Nuremberg



Carl-Thiersch-Str. 7, D-91052 Erlangen, Germany www.tumorzentrum.uk-erlangen.de

"Family Members at Risk: Colorectal Cancer Patients Help Their Relatives"

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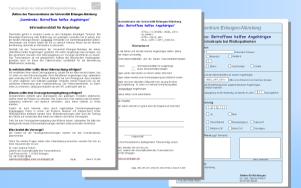


Background

Immediate relatives of colorectal cancer patients carry a two to four-fold higher risk than the normal population of developing colorectal cancer. The German public health system covers

the costs of preventive screening colonoscopies, for people from the age of 55. Studies have shown, however, that the immediate relatives of colorectal cancer patients develop the disease, on average, 10 years before the normal population, and therefore their colonoscopic surveillance should start 10 vears earlier.

Unfortunately, these facts are not sufficiently known by the general public or the persons affected. This prompted the interdisciplinary project group of the Tumour Centre at the University of Erlangen-Nuremberg in the "Month of colorectal cancer" March 2008 to start a campaign with patient groups in order to inform the high risk group.



Activities

The colorectal cancer patients in the catchment area of the Tumour Centre, who were first diagnosed between 1998 and 2008, received a letter from their treating hospitals. This letter informed the patients about the higher risk of their parents, siblings, and children, and asked them to motivate these relatives to attend screening procedures, especially colonoscopies. The patients could send back a reply indicating whether or not they wished to participate, with or without providing reasons for non-participation. Should the patients choose to comply, a document was also included for their relatives to take to the screening for the results to be documented.

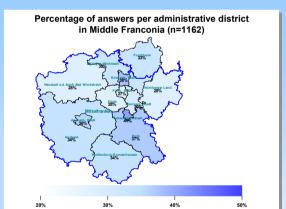
At the same time, information letters about the campaign were sent out to all general practitioners and colonoscopy centres in the catchment area, and the general public was alerted via the local newspapers. All documentation sheets are being filed in a database and analyzed as part of a doctoral thesis.

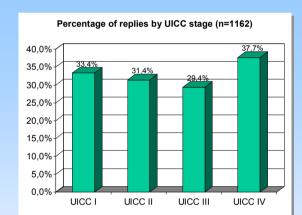
Interim results

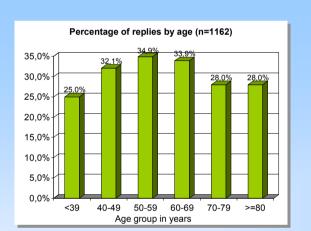


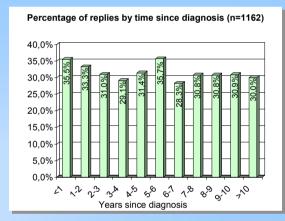
Middle Franconia:

- 1.7 million residents
- about 1600 newly diagnosed cases per year

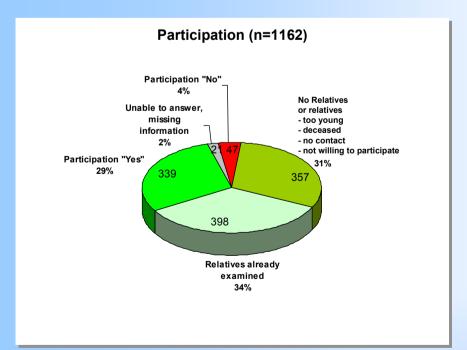








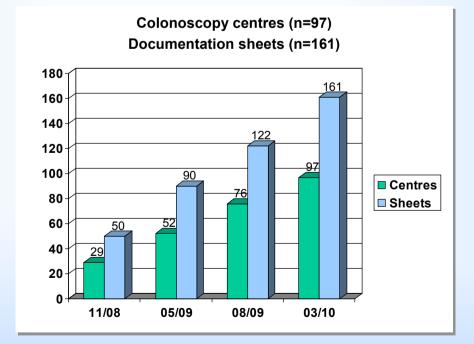
Letters were sent to more than 4000 living colorectal cancer patients in Middle Franconia with diagnosis between 1998 and 2008. 32% of the patients replied with the response letter. The response rate was independent of place of residence, disease status, age, time gone by since diagnosis, and other demographic factors e.g. gender.

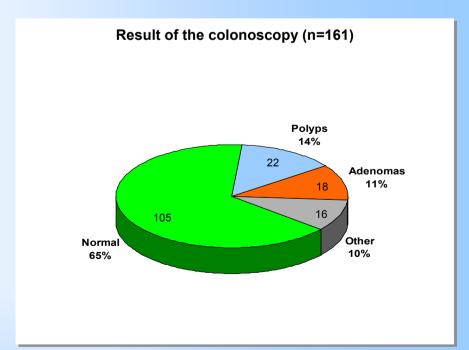


94% of the responding patients were willing to support the campaign, 4% of the responding patients did not want to support the campaign, for reasons not provided, 2% of the responding patients were not able to reply because of e.g. senile dementia.

The colorectal cancer patients in the catchment area are already very well informed: The relatives of 1/3 have already had a colonoscopy.

The relatives of another 1/3 are not or not yet candidates for a colonoscopy.





Colonoscopy centres are returning an increasing number of documentation sheets. 90% of these colonoscopies were due to the actual targeting campaign, 10% due to the press campaign.

65% of these colonoscopies were normal. 35% revealed adenomas, polyps or other findings, but no carcinoma so far.

Conclusion

The campaign was met very positively by the patients, their immediate relatives, consultants, general practitioners and the public. The primary aim of informing colorectal cancer patients about the increased risk of their immediate relatives is being achieved. The continuing interest throughout the catchment area is shown by the high demand for posters, brochures and other information material. It will take several years, however, to see whether or not the increased number of screening colonoscopies will lead to increased detection of early stage cancers in that high risk group.

