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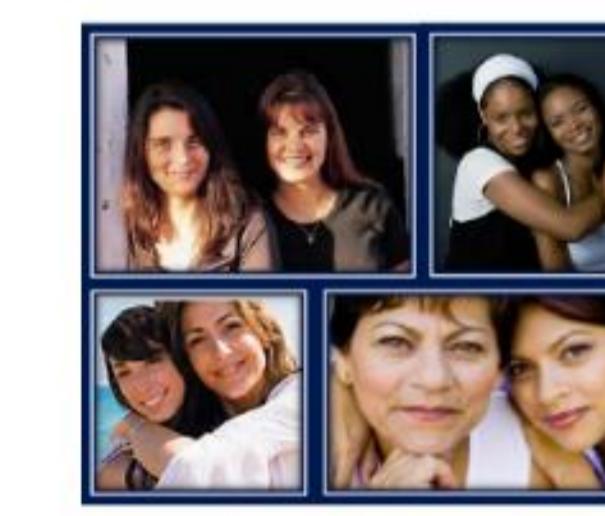
 Centers for Disease Control and Prevention (CDC), 5U48DP001901-03  
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## Background

- Women w/ breast cancer younger than 45 years old (YBCS) are about 25% of new cases; more likely to be hereditary breast and ovarian cancer (HBOC) syndrome cases
- National guidelines for YBCS recommend genetic evaluation (counseling and testing) to determine HBOC and annual clinical breast exams (CBE) and mammograms
- Underutilization of cancer genetic services and mammography, especially for Black YBCS
- 1<sup>o</sup>- and 2<sup>o</sup> - relatives of YBCS have a 2.3 and 1.5 increased relative breast cancer risk respectively. Relatives of HBOC cases should initiate MRI screening at age 25 (MRI) or earlier based on family history.
- The challenges concerning YBCS and at-risk relatives are
  - identify them in large numbers and racially diverse sample
  - low-resource ways to inform about genetic evaluation and cancer surveillance

### Breast Cancer and Your Family: How to Improve Screening and Monitoring

A guide for young breast cancer survivors and their female relatives



This booklet was created by the University of Michigan School of Nursing in collaboration with the Michigan Department of Community Health with funding from the Centers for Disease Control and Prevention



## Aims

Compare efficacy of two low-resource interventions delivered via postal mail, including targeted (more generic) versus tailored (person-specific) messages

The outcomes presented are

- Initiation of genetic testing for YBCS and cascade genetic testing for relatives
- Surveillance (CBE and mammography) based on national guidelines for YBCS and relatives
- Satisfaction, acceptance, and perceived usefulness of the interventions

## Methods

Two-arm cluster randomized trial (RCT)

Stratified sample of 3,000 YBCS (1500 Black vs. 1500 White/other)

Random selection from Michigan Cancer Registry w/ computer algorithm

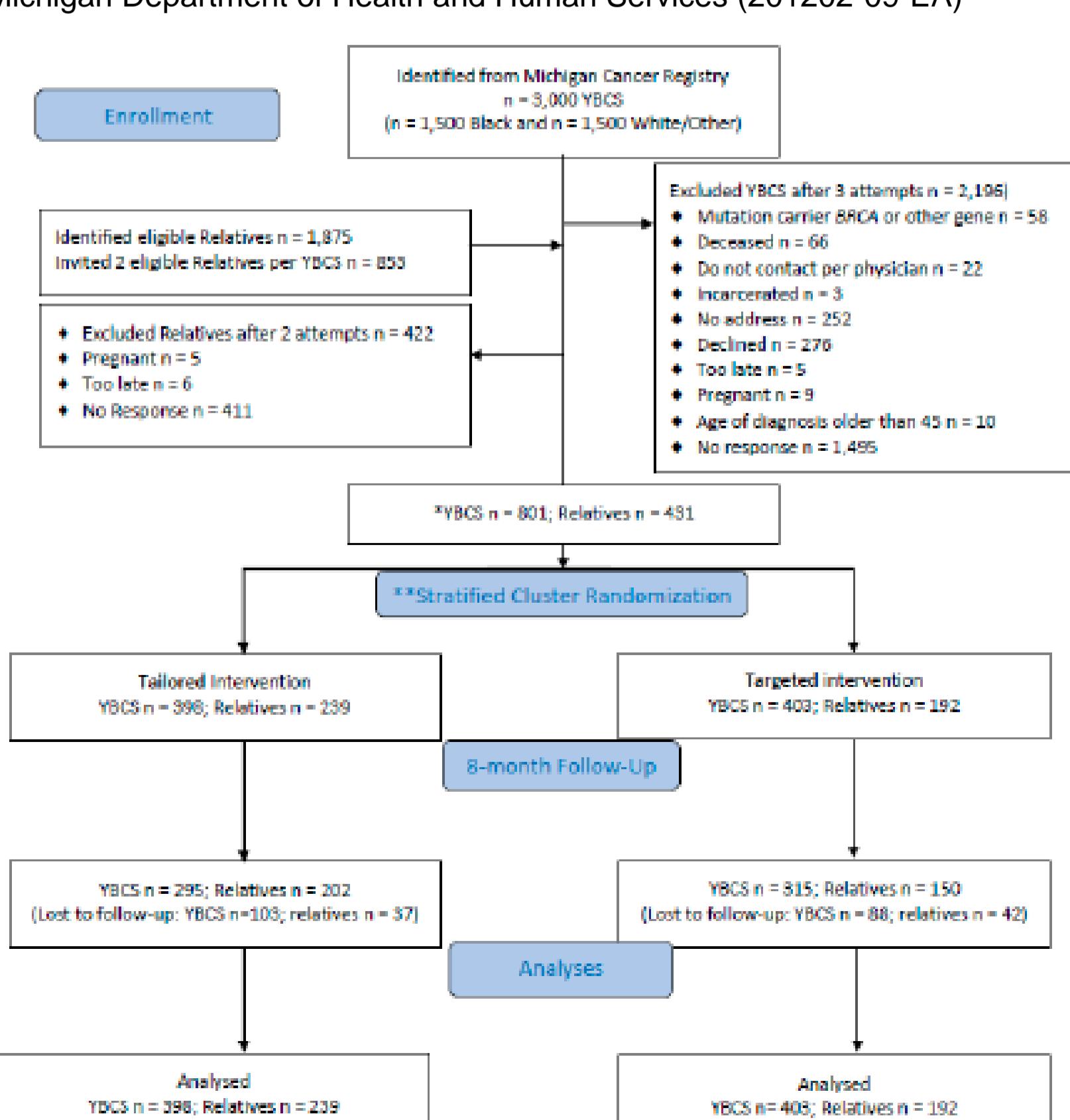
- 25-64 y.o. at the time of study
- 20-45 y.o. diagnosed w/ invasive breast cancer or DCIS
- Michigan residents at the time of diagnosis
- Able to read English, provide informed consent
- Willing to invite one of their 1<sup>o</sup> or 2<sup>o</sup>-female relatives

Relatives had to be:

- Female and Cancer-free
- 25-64 y.o. at the time of the study
- Able to read English, provide informed consent

Outcomes assessed at baseline and 8-month follow-up

Ethics approval: University of Michigan (HUM00055949) and Michigan Department of Health and Human Services (201202-09-EA)



## Results

Outcomes for YBCS* Tailored n=398 Targeted n=403	Baseline		Follow-up**		Tailored vs. Targeted p value <sup>a</sup> (95% CI)	Change from Baseline to Follow-up p value <sup>b</sup> (95% CI)	
	Tailored	Targeted	Tailored	Targeted		Tailored	Targeted
Had Genetic Testing	79 (19.85%)	107 (26.55%)	99 (24.87%)	127 (31.52%)	1.00 (-0.030 - 0.031)	<b>&lt;0.001<sup>b</sup></b> (0.031 - 0.077)	<b>&lt;0.001<sup>b</sup></b> (0.031 - 0.076)
Had CBE according to NCCN*** Guidelines	342 (85.92%)	333 (82.63%)	361 (90.70%)	356 (88.33%)	0.66 (-0.040 - 0.023)	<b>&lt;0.001<sup>b</sup></b> (0.029 - 0.074)	<b>&lt;0.001<sup>b</sup></b> (0.037 - 0.084)
Had mammography according to NCCN*** Guidelines <sup>1</sup>	298 (87.64%)	292 (87.16%)	315 (92.65%)	302 (90.15%)	0.17 (-0.009 - 0.055)	<b>&lt;0.001<sup>b</sup></b> (0.029 - 0.079)	<b>0.002<sup>b</sup></b> (0.014 - 0.054)
Outcomes for Relatives Tailored n=239 Targeted n=192		Baseline		Follow-up**		Tailored vs. Targeted p value <sup>a</sup> (95% CI)	
Had Genetic Testing	9 (0.04%)	4 (0.02%)	17 (0.07%)	5 (0.03%)	0.08 <sup>a</sup> (-0.001 - 0.058)	<b>0.008<sup>b</sup></b> (0.015 - 0.065)	<b>1<sup>b</sup></b> (0.000 - 0.029)
Had CBE according to NCCN*** Guidelines	179 (74.89%)	146 (76.04%)	204 (85.36%)	161 (83.85%)	0.44 (-0.032 - 0.085)	<b>&lt;0.001<sup>b</sup></b> (0.069 - 0.151)	<b>&lt;0.001<sup>b</sup></b> (0.044 - 0.125)
Had mammography according to NCCN*** Guidelines <sup>2</sup>	109 (69.87%)	87 (71.31%)	126 (80.77%)	96 (78.69%)	0.43 (-0.039 - 0.110)	<b>&lt;0.001<sup>b</sup></b> (0.065 - 0.168)	<b>0.004<sup>b</sup></b> (0.034 - 0.135)

Outcomes for YBCS* Black n=324 White/Other n=447	Baseline		Follow-up**		Black vs. White/ Other p value <sup>a</sup> (95% CI)	Change from Baseline to Follow-up p value <sup>b</sup> (95% CI)	
	Black	White/ Other	Black	White/ Other		Black	White/ Other
Had Genetic Testing	52 (16.05%)	134 (28.09%)	68 (20.99%)	158 (33.12%)	0.92 (-0.038 - 0.054)	<b>&lt;0.001<sup>b</sup></b> (0.028 - 0.079)	<b>&lt;0.001<sup>b</sup></b> (0.035 - 0.079)
Had CBE according to NCCN*** Guidelines	268 (82.72%)	407 (85.32%)	286 (88.27%)	431 (90.36%)	1 (-0.033 - 0.036)	<b>&lt;0.001<sup>b</sup></b> (0.033 - 0.086)	<b>&lt;0.001<sup>b</sup></b> (0.035 - 0.079)
Had mammography according to NCCN*** Guidelines <sup>1</sup>	244 (83.28%)	346 (90.58%)	259 (88.40%)	360 (94.24%)	0.46 (-0.020 - 0.049)	<b>&lt;0.001<sup>b</sup></b> (0.029 - 0.083)	<b>&lt;0.001<sup>b</sup></b> (0.020 - 0.061)
Outcomes for Relatives Black n=87 White/Other n=344		Baseline		Follow-up**		Black vs. White/ Other p value <sup>a</sup> (95% CI)	
Had Genetic Testing	2 (2.30%)	11 (3.20%)	4 (4.60%)	18 (5.23%)	1.00 <sup>a</sup> (-0.035 - 0.039)	0.5 <sup>b</sup> (0.003 - 0.081)	<b>0.016<sup>b</sup></b> (0.008 - 0.041)
Had CBE according to NCCN*** Guidelines	63 (72.41%)	262 (76.16%)	71 (81.61%)	294 (85.47%)	1.00 (-0.076 - 0.068)	<b>0.008<sup>b</sup></b> (0.041 - 0.173)	<b>&lt;0.001<sup>b</sup></b> (0.064 - 0.129)
Had mammography according to NCCN*** Guidelines <sup>2</sup>	39 (65.00%)	157 (72.02%)	45 (75.00%)	177 (81.19%)	1.00 (-0.085 - 0.102)	<b>0.031<sup>b</sup></b> (0.038 - 0.205)	<b>&lt;0.001<sup>b</sup></b> (0.057 - 0.138)

\*YBCS=young breast cancer survivor  
\*\* Intention to Treat  
\*\*\*NCCN=National Comprehensive Cancer Network  
^ Two-proportions z-Test or ^Fisher's Exact Test  
<sup>a</sup> McNemar's test or <sup>b</sup>McNemar's Exact Test

1. Tailored n = 340 and Targeted n = 335 after excluding YBCS with double mastectomy who do not receive mammograms per NCCN guidelines (excluded Tailored n = 58; Targeted n = 68)

2. Tailored n = 156 and Targeted n = 122 after excluding relatives younger than 35 years old AND relatives between 35 to 40 with Gail lifetime risk <20% who do not receive mammograms per NCCN guidelines (excluded Tailored n = 83; Targeted n = 70)

## Conclusions

- Uptake of genetic testing in both arms increased approximately 5% (short-term follow-up, lack of referral from a healthcare provider, YBCS on average 11 years post diagnosis)
- YBCS in the tailored arm more likely to report higher self-efficacy for genetic testing (not shown)
- Cascade genetic testing depends on YBCS having genetic testing first and identified with an HBOC-associated pathogenic variant
- 5% to 10% increase in CBE and mammography rates for YBCS and relatives
- Black YBCS reported higher self-efficacy and intention for genetic testing, higher satisfaction with intervention materials (data not shown)

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