Effective Approaches for Boosting Colorectal Cancer Screening Rates

Early and regular screening can improve detection rates and lead to better outcomes for colorectal cancer.

July 12, 2023 By Colon Cancer Foundation

Colorectal cancer (CRC) remains a serious public health issue in the U.S. that affects people from all walks of life, independent of race, gender, or age. The third most commonly diagnosed cancer in the U.S., an estimated 150,000 new cases and 53,000 deaths are attributed to CRC each year, highlighting the urgency for effective prevention and early detection strategies.

Early and regular screening can improve detection rates and lead to better outcomes for CRC. However, there are significant disparities in the rates of CRC screening for some groups, such as medically underserved communities. Race and ethnicity, socioeconomic status, and access to healthcare services have a significant impact on CRC screening rates.

During the annual Digestive Disease Week 2023 meeting, several research studies were presented that identify interventions to improve CRC screening rates, specifically in medically underserved populations. The following interventions were identified in the systematic review to increase CRC screening rates among medically underserved populations:

1. **Multicomponent interventions:** These interventions involved multiple elements, such as patient education, provider reminders, patient navigators, and mailed outreach.
2. **Patient navigation:** Interventions that included the use of patient navigators, who assist patients in navigating the healthcare system and overcoming barriers to screening, were effective in increasing screening rates. [3]
3. **Mailed stool-based kits with provider letters:** Sending screening kits to patients by mail, along with a letter from their healthcare provider recommending the screening, was found to be a successful intervention. [3]

Multiple Elements to a Successful Screening Program

The study conducted by Shailavi Jain et al., highlighted the impact of a multicomponent health system intervention to increase screening participation among patients with a family history of CRC. This intervention involved:

- Electronic health record reminders to primary care providers
- Reminders to patients to schedule a colonoscopy
- Additional educational resources about familial CRC risk and the colonoscopy procedure

The intervention increased colonoscopies ordered, scheduled, and completed among high-risk patients.

Another study focused on using patient-level structured data elements to optimize population-based CRC screening. The study utilized individualized health data, such as laboratory results and diagnosis codes, to identify patients with significant comorbidities who were unlikely to complete routine screening. This approach allowed for targeted screening efforts to be directed towards patients most likely to complete screening as intended by their primary care team.

A meta-analysis examined the efficacy of an opt-out outreach method to optimize screenings. This approach involved giving patients the option to either opt-in or opt-out of receiving fecal immunochemical test (FIT) kits. The analysis showed that patients who were given the option to opt-out had a significantly higher FIT completion rate compared to those who were given the option to opt-in.

Additionally, a quality improvement project evaluated the effectiveness of mailed reminders in increasing uptake of FIT. Mailed reminders were found to be an effective strategy in improving screening rates.

Overall, these studies highlight the effectiveness of various interventions, including multicomponent approaches, patient navigation, mailed reminders, and opt-out outreach methods in increasing CRC screening rates among medically underserved populations and individuals with a family history of CRC. These interventions can inform the design of programs aimed at improving CRC screening in these populations.

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