

Colorectal Cancer Screening in Vietnamese Americans

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Outline

- Background
- Significance for Vietnamese Americans
- Aims
- Intervention
- Evaluation
- Measurements
- Baseline survey preliminary data

Colorectal cancer

- Second leading cause of cancer deaths
- Fourth most common cancer
- Each year ~ 150,000 have the disease
- Each year ~60,000 die from it

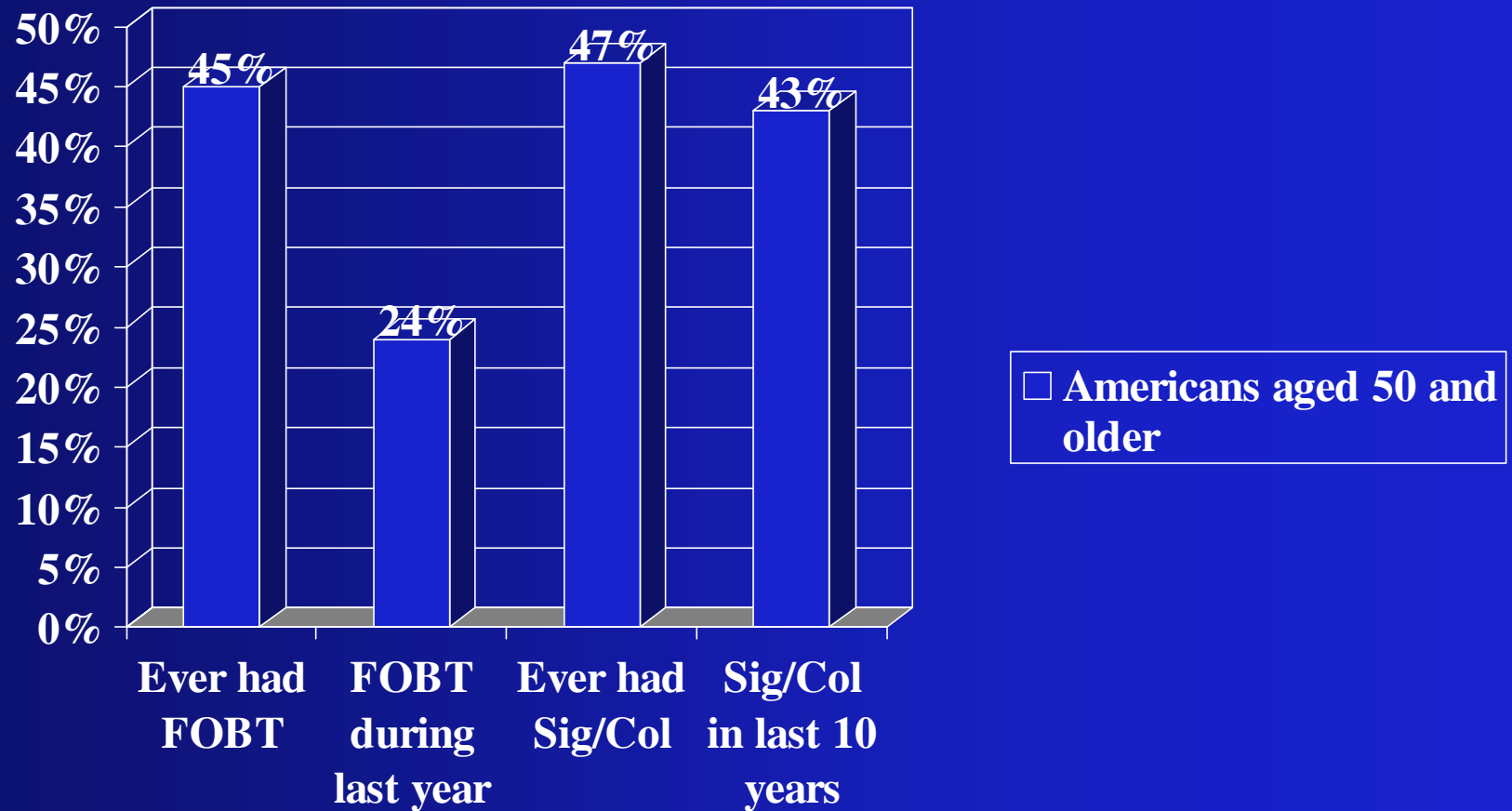
•(American Cancer Society, 2005).

Colorectal cancer screening

- Can reduce incidence and mortality by removing premalignant polyps and detecting early cancers
 - (Newcomb, 1992; Selby, 1992; Selby, 1993; Mandel, 1993; Mandel, 2000; Hardcastle, 1996).
- If detected early, 90% can be cured
- Recommendations by major professional organizations (Ransohoff, 2001).
- Screening rates are low (CDC, 2003).

Colorectal screening rates in U.S.

(CDC, 2003)



Recommended ages

- Major professional organizations including
 - U.S. Preventive Services Task Force
 - American Cancer Society
 - Gastrointestinal Consortium
 - American College of Gastroenterology
- all recommend beginning colorectal cancer screening at the age of 50 for average-risk patients (Ransohoff, 2001).

Recommended tests

- Fecal Occult Blood Test (FOBT)
- Sigmoidoscopy (Sig)
- Colonoscopy (Col)
- Double-Contrast barium enema

Effectiveness of FOBT

- One U.S. clinical trial reported a 33% reduction in colorectal cancer deaths (Mandel, 1993) and a 20% reduction in colorectal cancer incidence among people offered an annual fecal occult blood test (Mandel, 2000).

Effectiveness of sigmoidoscopy

- Case control studies found that sigmoidoscopy reduced the risk of death by 59% to 75% (Selby, 1992; Newcomb, 1992).

Effectiveness of colonoscopy

- A case control study found that patients diagnosed with colorectal cancer were less likely have had previous colonoscopy (Muller, 1995; Kewenter, 1996).

Effectiveness of barium enema

- Barium enema has been previously recommended as a colorectal cancer screening test (Winawer, 1997; Rex, 2000; Smith, 2001) but the low sensitivity for the detection of large polyps has led to a decreased interest in it as a screening tool. (Winawer, 2000; Ransohoff, 2001).

Significance for Vietnamese Americans

- In California, colorectal cancer is the
 - second most common cancer among Vietnamese women
 - fourth most common cancer among Vietnamese men (American Cancer Society, 2004).

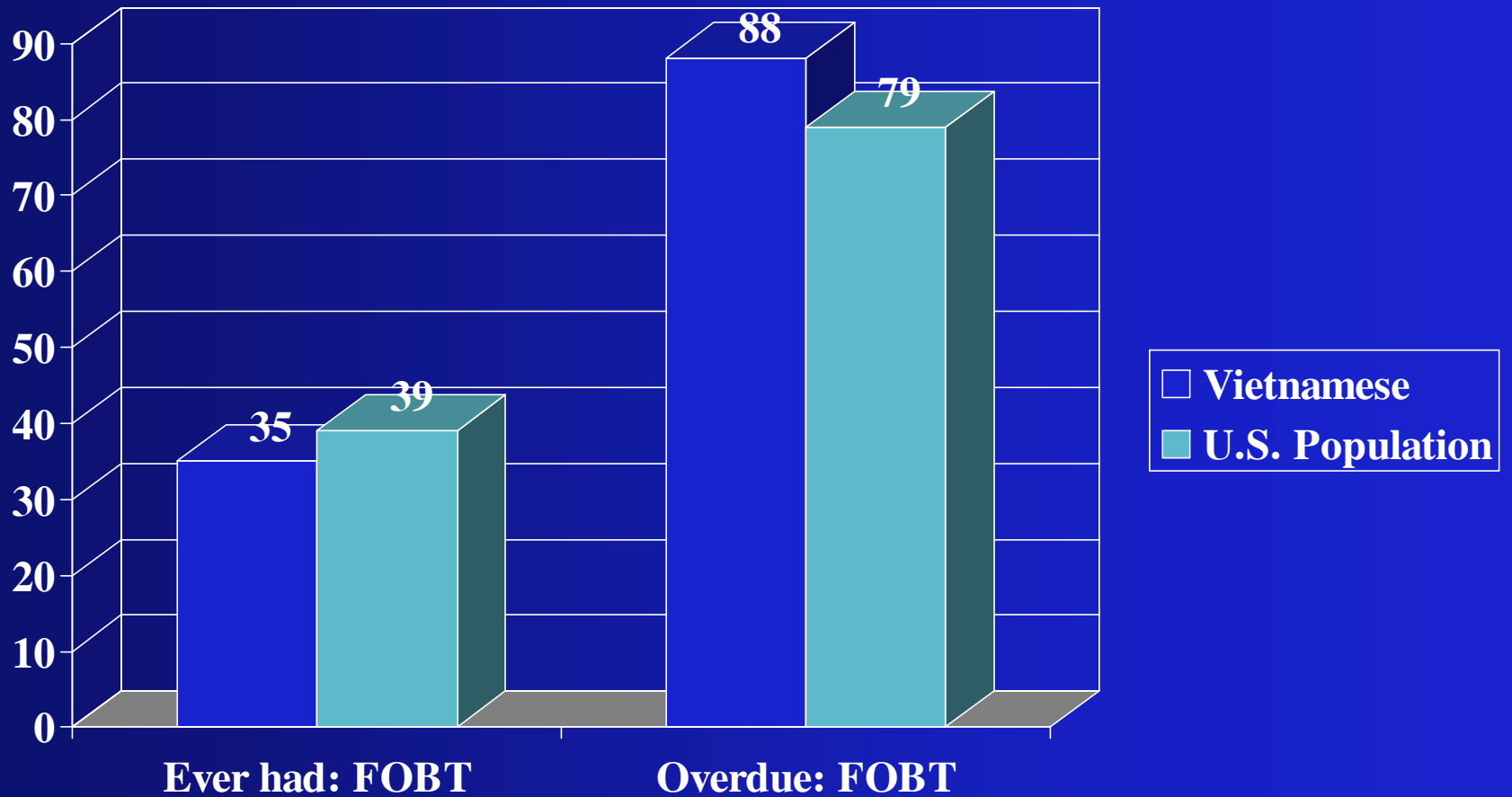
Colorectal screening of Vietnamese Americans

- Colorectal screening rates are lower in Vietnamese Americans than in the general population and non-Hispanic whites

(Jenkins, 1999; Wong, 2004 submitted).

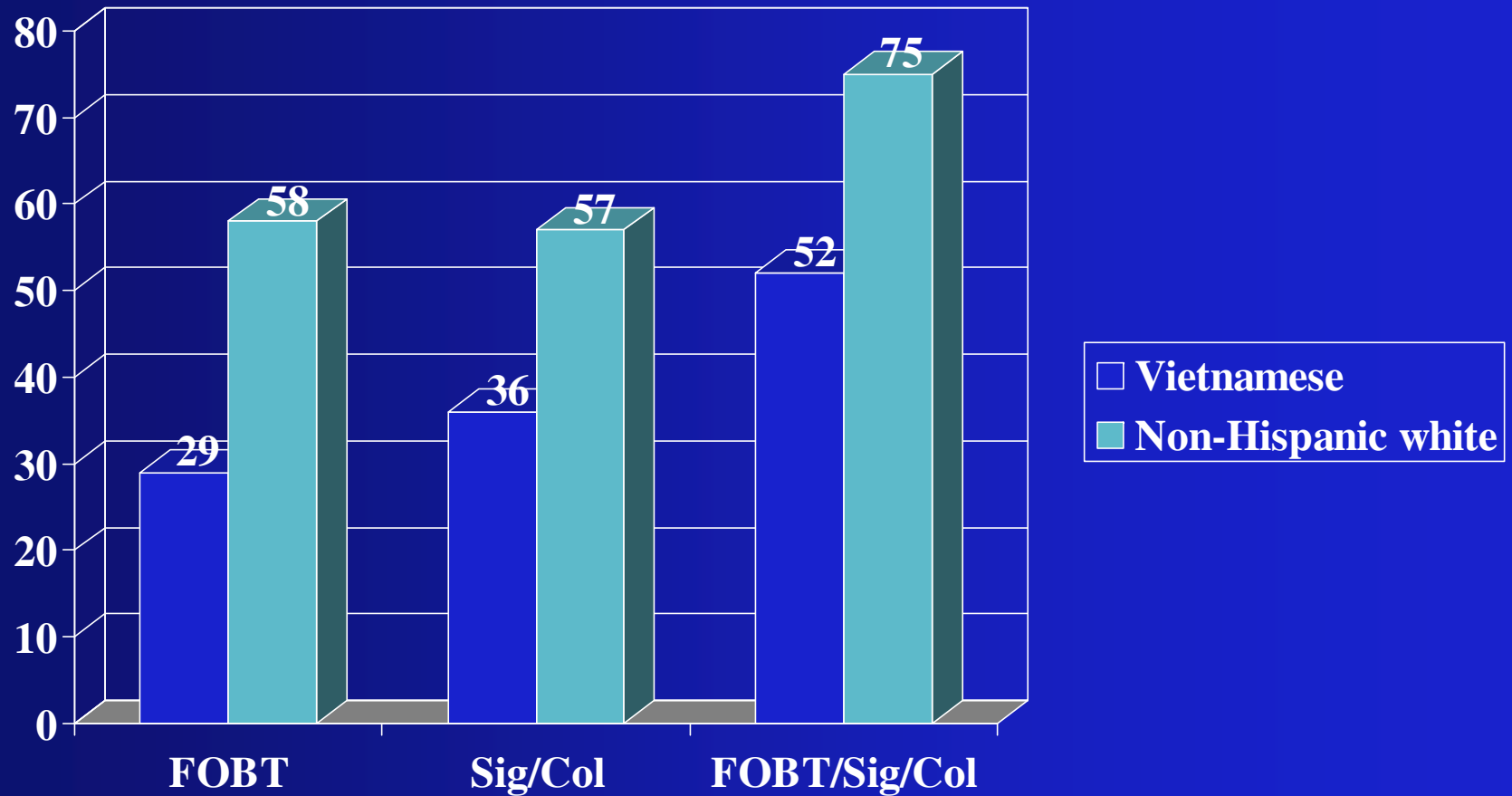
Ever had & Overdue: FOBT

Patients aged 40 years and older (Jenkins, 1990)



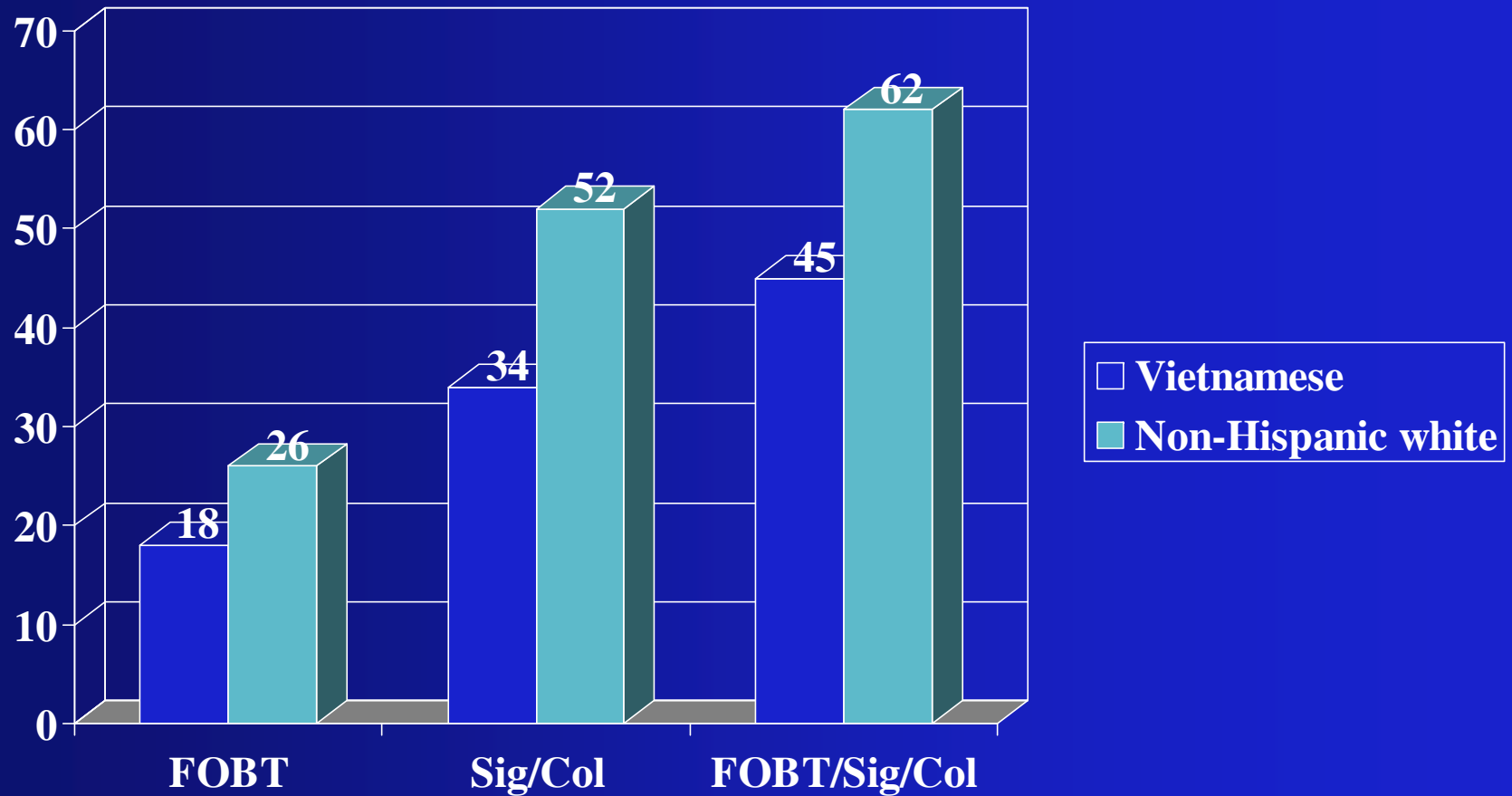
Ever screened: FOBT, Sig/Col, Any

Patients age 50 and older (Wong, 2004 submitted)



Up-to-date: FOBT, Sig/Col, Any

(Wong, 2004 submitted)



Study Aims

- To increase colorectal cancer screening rates among Vietnamese Americans aged 50 to 74
- To evaluate the effectiveness of an intervention focused on both the Vietnamese American public and their providers.
 - To identify factors associated with colorectal cancer screening among Vietnamese Americans

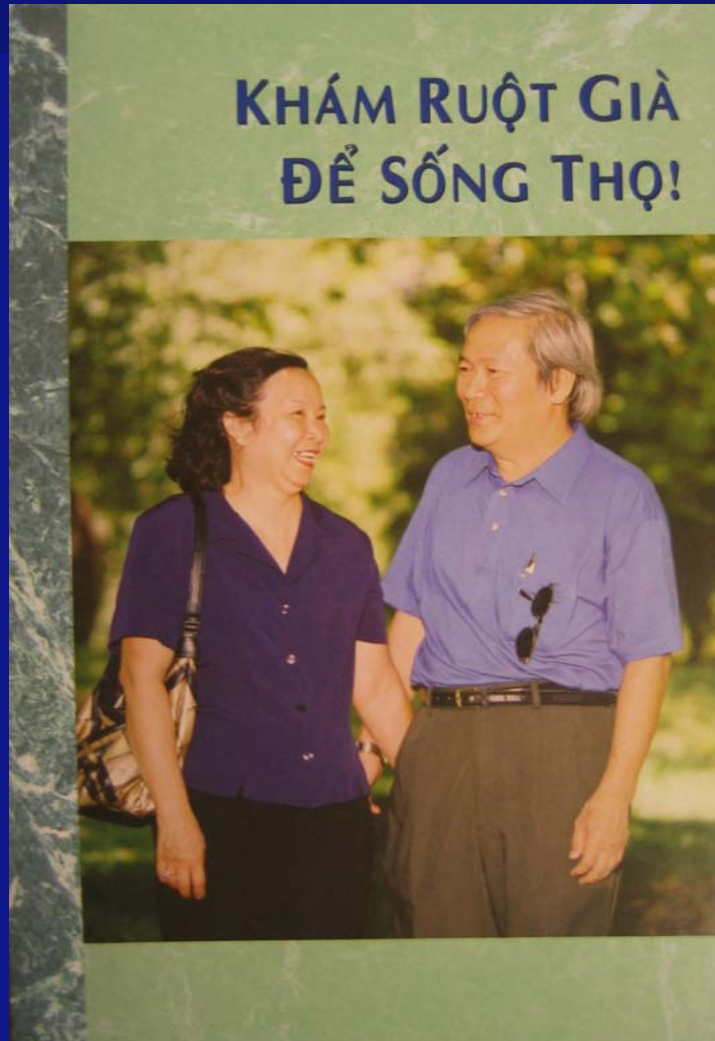
Public intervention

- Production and distribution of a booklet at
 - CBOs
 - Hospitals
 - Clinics
 - Health fairs
- Vietnamese-language media campaign
 - Newspapers
 - Radio
 - Television

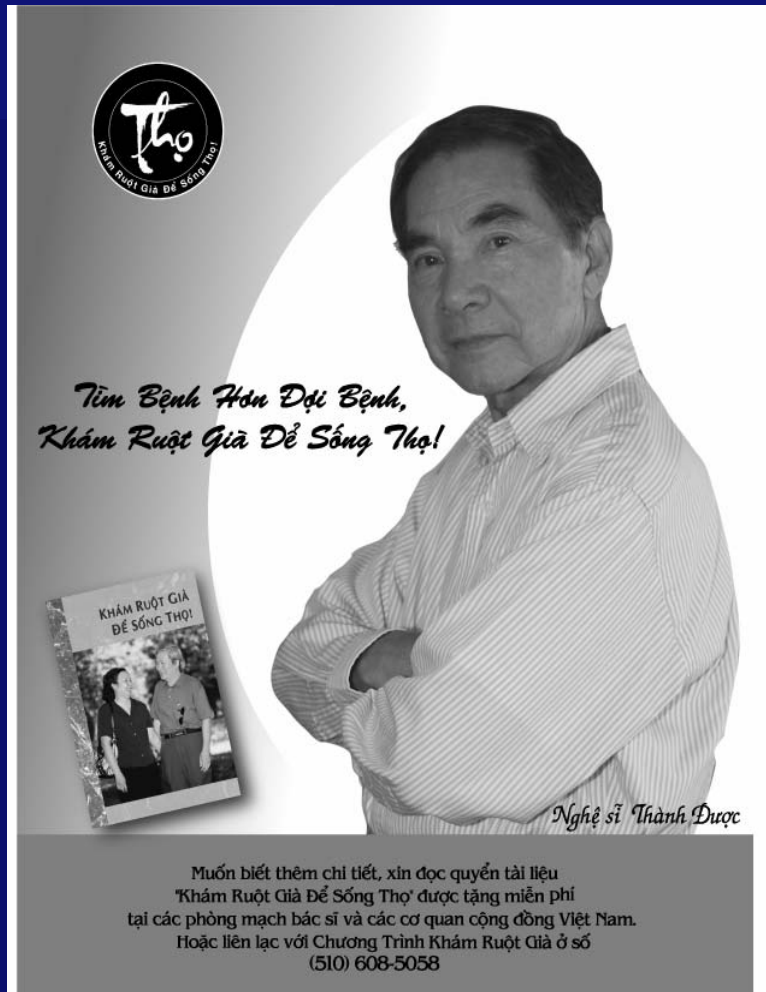
Provider intervention

- Continuing Medical Education seminars
- Distribution of
 - provider newsletters
 - provider videos
 - patient counseling booklet

For Long Life, Test The Colon!



Logo: Longevity



The advertisement features a black and white photograph of a middle-aged man with his arms crossed, wearing a striped shirt. In the top left corner is a circular logo with the word 'Thọ' in the center and 'Khám Ruột Già Để Sống Thọ' around the perimeter. Below the logo, the text reads 'Tìm Bệnh Hơn Dại Bệnh, Khám Ruột Già Để Sống Thọ!'. To the left of the man is a booklet titled 'KHÁM RUỘT GIÀ ĐỂ SỐNG THỌ!' showing two people. At the bottom right of the man's photo, it says 'Nghệ sĩ Thành Được'. At the bottom of the advertisement, there is a block of text: 'Muốn biết thêm chi tiết, xin đọc quyển tài liệu "Khám Ruột Già Để Sống Thọ" được tặng miễn phí tại các phòng mạch bác sĩ và các cơ quan cộng đồng Việt Nam. Hoặc liên lạc với Chương Trình Khám Ruột Già ở số (510) 608-5058'.

**Screening for a cancer
is better than waiting for
it to develop**

**For long life, Test the
colon!**

**For more information, please read
booklet "For Long Life, Test the
Colon" that was distributed free at
Vietnamese doctor's offices and
community-based organizations or
contact the Colon Screening Project
at : (510) 608-5058**

Ung thư ruột già là ung thư gây chết người đứng hàng thứ hai ở Hoa Kỳ. Mọi người đều có thể bị ung thư ruột già, nhưng từ 50 tuổi trở lên dễ mắc bệnh hơn!



**Tìm bệnh hơn đợi bệnh
Khám ruột già để sống thọ**



Chương trình khám ruột già
Trung Tâm Ung Thư Bắc Cali

Muốn biết thêm chi tiết, xin gọi
(510) 608-5058

Colon cancer is the second most common cause of cancer deaths in the United States. Anyone can get colon cancer, though people over the age of 50 are more likely to get it!

Screening for a cancer is better than waiting for it to develop.

For long life, Test the colon!

Logo: “THO” (Longevity)

Colon Screening Project

Northern California Cancer Center

For more information, please contact:

(510) 608-5058

Từ 50 tuổi trở lên chúng ta hãy làm hẹn khám ruột già cho dù vẫn cảm thấy khỏe mạnh



**Tìm bệnh
hơn đợi bệnh
Khám ruột già
để sống thọ**

 **Chương trình khám ruột già** | Muốn biết thêm chi tiết, xin gọi
Trung Tâm Ung Thư Bắc Cali | (510) 608-5058

**If you are age 50 or over,
you need to get tested
even if you feel healthy.**

**Screening for a cancer is
better than waiting for it to
develop.**

**For long life, Test the
colon!**

**Logo: “THO” (Longevity)
Colon Screening Project
Northern California Cancer Center
For more information, please contact:
(510) 608-5058**



Khám ruột già
có thể giúp chúng ta
phòng ngừa hữu hiệu
ung thư ruột già

**TÌM BỆNH HƠN ĐỢI BỆNH
KHÁM RUỘT GIÀ ĐỂ SỐNG THỌ**

 Chương trình khám ruột già | Muốn biết thêm chi tiết, xin gọi
Trung Tâm Ung Thư Bắc Cali | (510) 608-5058

**Screening can help find
and prevent
colon cancer effectively.**

***Screening for a cancer is
better than waiting for it
to develop.***

***For long life, Test the
colon!***

**Logo: “THO”: Longevity
Colon Screening Project
Northern California Cancer Center**


**For more information, please contact:
(510) 608-5058**

“Quý vị từ 50 tuổi trở lên, nên đi khám truy tầm ung thư ruột già định kỳ.

Đây là một bệnh nguy hiểm nhưng nếu khám phá sớm có thể chữa khỏi được.”

Bác Sĩ **Nguyễn Kim Khánh**
chuyên khoa về tiêu hóa.

**Tìm bệnh hơn đợi bệnh,
Khám ruột già để sống thọ!**

 Chương Trình Khám Ruột Già | Muốn biết thêm chi tiết, xin gọi
Trung Tâm Ung Thư Bắc Cali | **(510) 608-5058**

If you are age 50 and over, you should get colon cancer screening tests periodically.

This is a serious disease but it can be cured if it is detected early.”

Dr. Khanh Kim Nguyen, MD
Gastroenterologist

Screening for a cancer is better than waiting for it to develop.

For long life, Test the colon!

Logo: “THO” (Longevity)

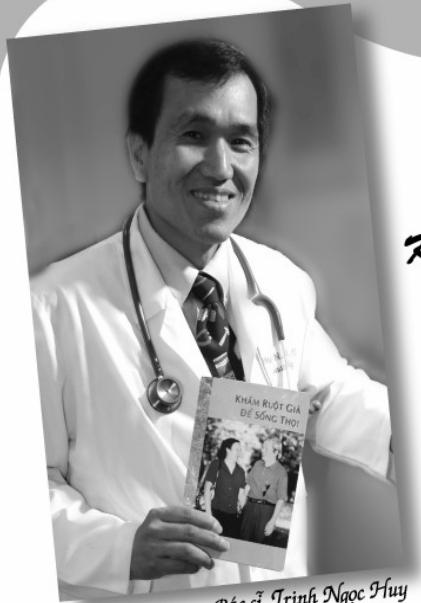
Colon Screening Project

Northern California Cancer Center

For more information, please contact:

(510) 608-5058

Ung thư ruột già thường xảy ra cho những người từ 50 tuổi trở lên. Nhưng bệnh có thể chữa khỏi nếu được tìm ra sớm bằng cách khám truy tìm ung thư ruột già định kỳ.



Bác sĩ Trịnh Ngọc Huy

*Tìm Bệnh
Hơn Dời Bệnh,
Khám Ruột Già
Để Sống Thọ!*



Muốn biết thêm chi tiết, xin đọc quyển tài liệu "Khám Ruột Già Để Sống Thọ" được tặng miễn phí tại các phòng mạch bác sĩ và các cơ quan cộng đồng Việt Nam. Hoặc liên lạc với Chương Trình Khám Ruột Già ở số (510) 608-5058

“Colon cancer occurs more often in persons age 50 and over. However, it can be treated successfully and even cured if it is detected early by periodic colon screening tests.”

Dr. Huy Ngoc Trinh, MD

***Screening for a cancer is better than waiting for it to develop.
For long life, Test the colon!***

Logo: Tho (Longevity)

For more information, please read booklet “For Long Life, Test the Colon” that was distributed free at Vietnamese doctor’s offices and community- based organizations or contact the Colon Screening Project at : (510) 608-5058

**“Tôi bị ung thư ruột già nhưng nhờ tìm ra bệnh sớm nên đã được chữa khỏi.
Tôi thành thật khuyên quý vị, từ 50 tuổi trở lên, nên đi khám ruột già định kỳ để sống vui sống thọ”**

Lê Tiến Cán



**Tìm bệnh hơn đợi bệnh,
Khám ruột già để sống thọ!**

 Chương Trình Khám Ruột Già | Muốn biết thêm chi tiết, xin gọi
Trung Tâm Ung Thư Bắc Cali | **(510) 608-5058**

“ I got colon cancer, but treatment was effective and it was cured because it was detected early.

I strongly recommend that if you are age 50 and over, you should get periodic colon cancer screening tests for a happy and long life.”

Mr. Can Tien Le

**Screening for a cancer is better than waiting for it to develop.
For long life, Test the colon!**

**Logo: “THO”: Longevity
Colon Screening Project
Northern California Cancer Center**

**For more information, please contact:
(510) 608-5058**

Evaluation

- **Quasi-experimental design**
- **Intervention area:**
Alameda and Santa Clara Counties,
California
- **Control area:**
Harris County, Texas

Survey questions

- 1) have ever heard of
- 2) have ever had
- 3) if had, date of the most recent test
- 4) If Dr. recommends a test, will have one
- 5) If Dr. will not mention a test, would ask for one

For fecal occult blood test, sigmoidoscopy, or colonoscopy

Measurements

- 1) Recognition
- 2) Receipt
- 3) Currency
- 4) Intention and,
- 5) intention to screen in recommended intervals

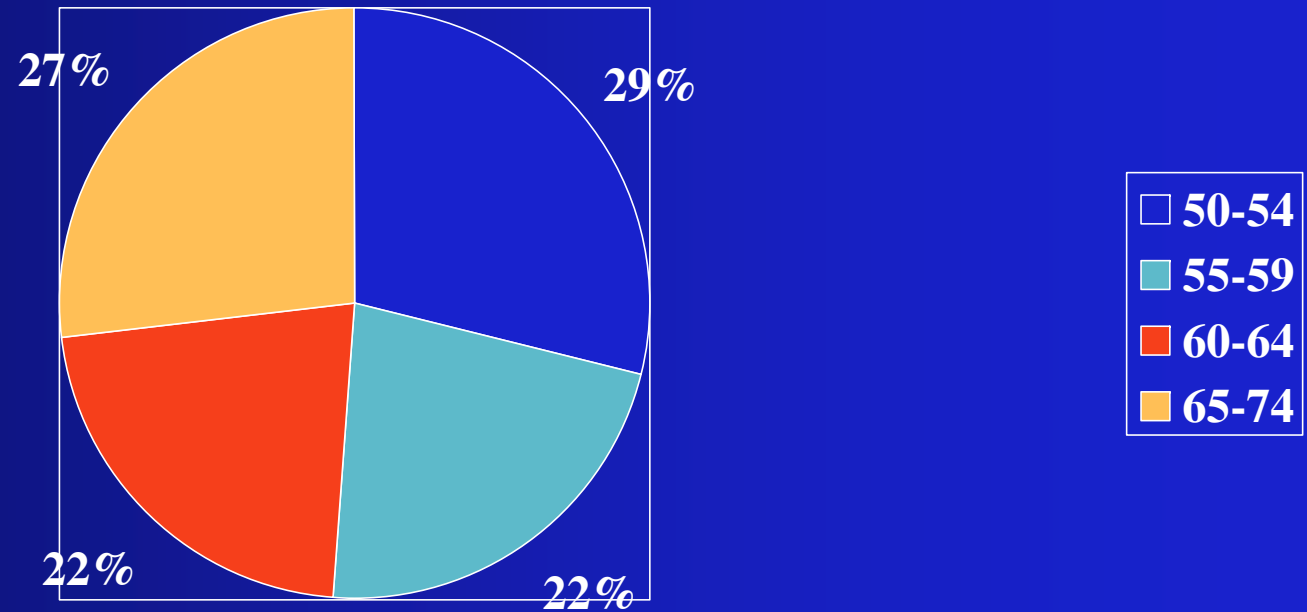
defined as

- 1) Having heard of
- 2) Having ever had,
- 3) Being up-to-date for
- 4) Willing to accept doctors' recommendation or would ask for test if doctor does not mention it
- 5) Willing to have test in recommended intervals

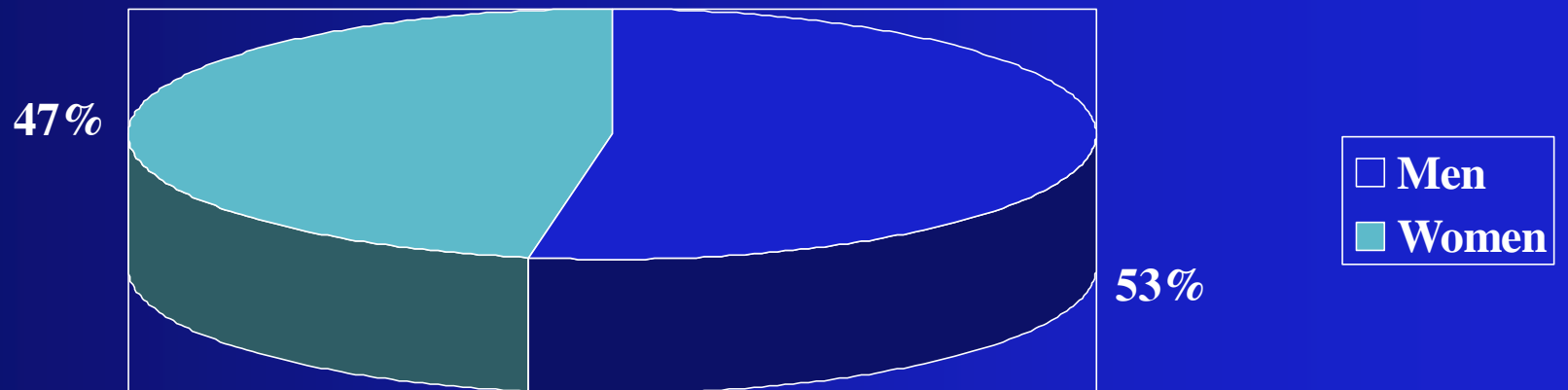
Preliminary Results

- Demographics
- Healthcare characteristics
- Knowledge of and attitudes toward colon cancer and screening
- Colorectal cancer screening rates

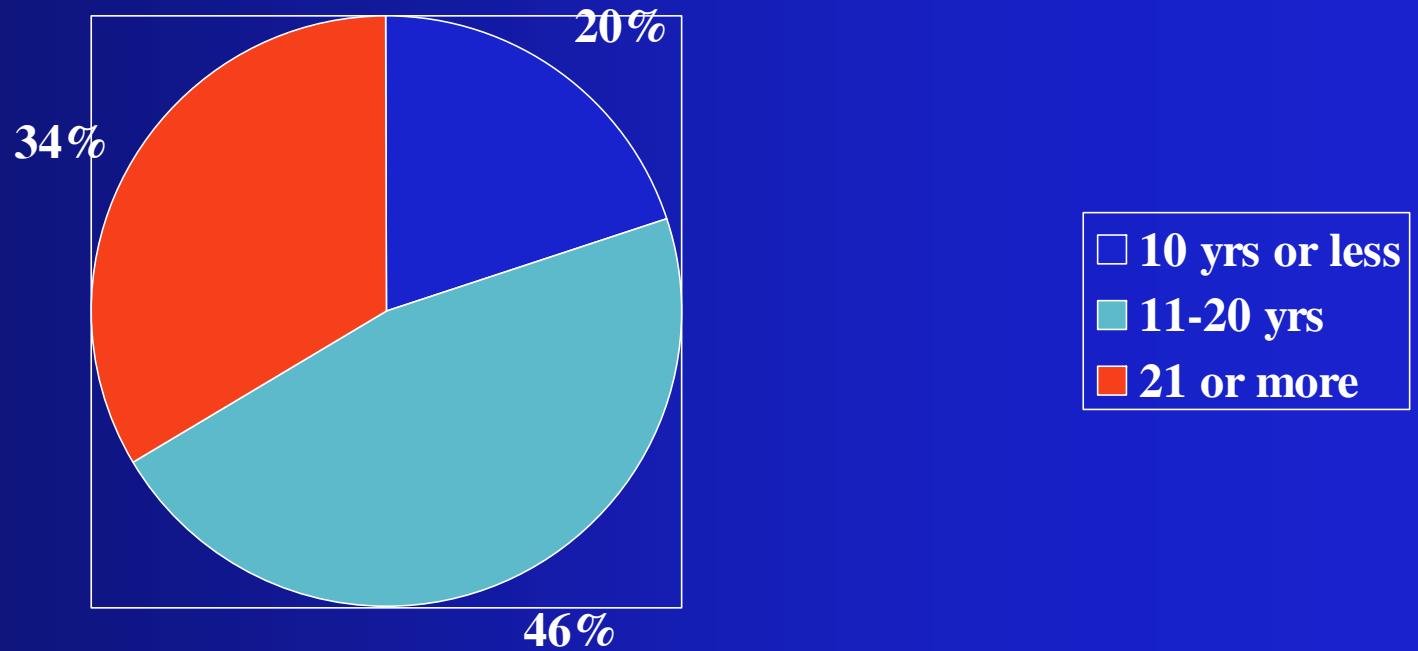
Demographics: Age (years)



Demographics: Gender

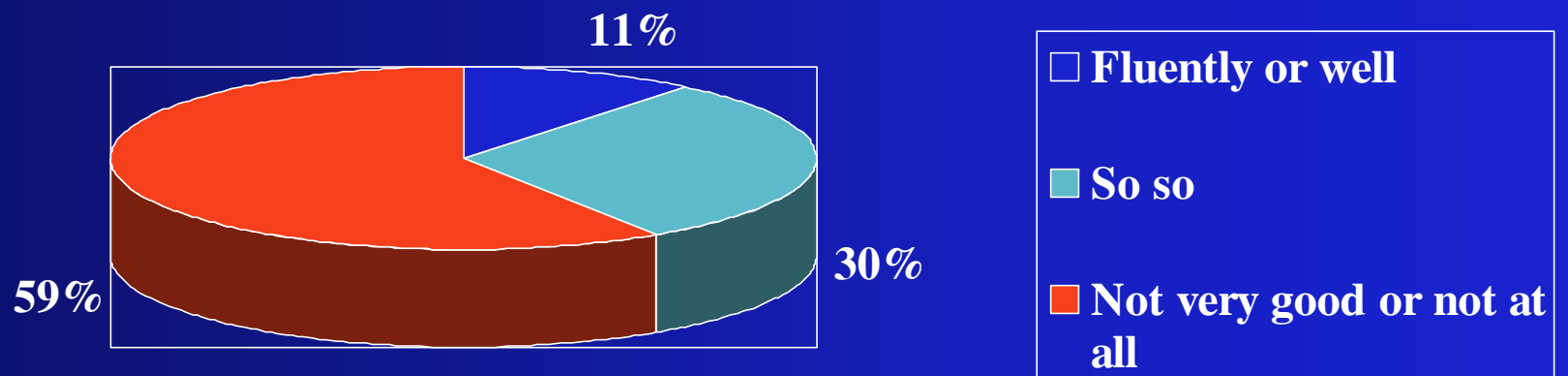


Demographics: Years in U.S.

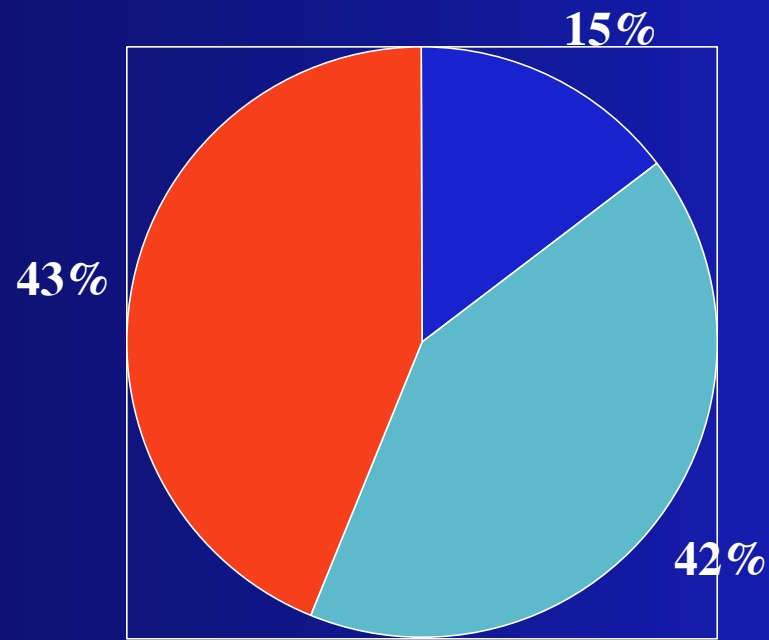


Demographics: English Language Proficiency

Speaks English

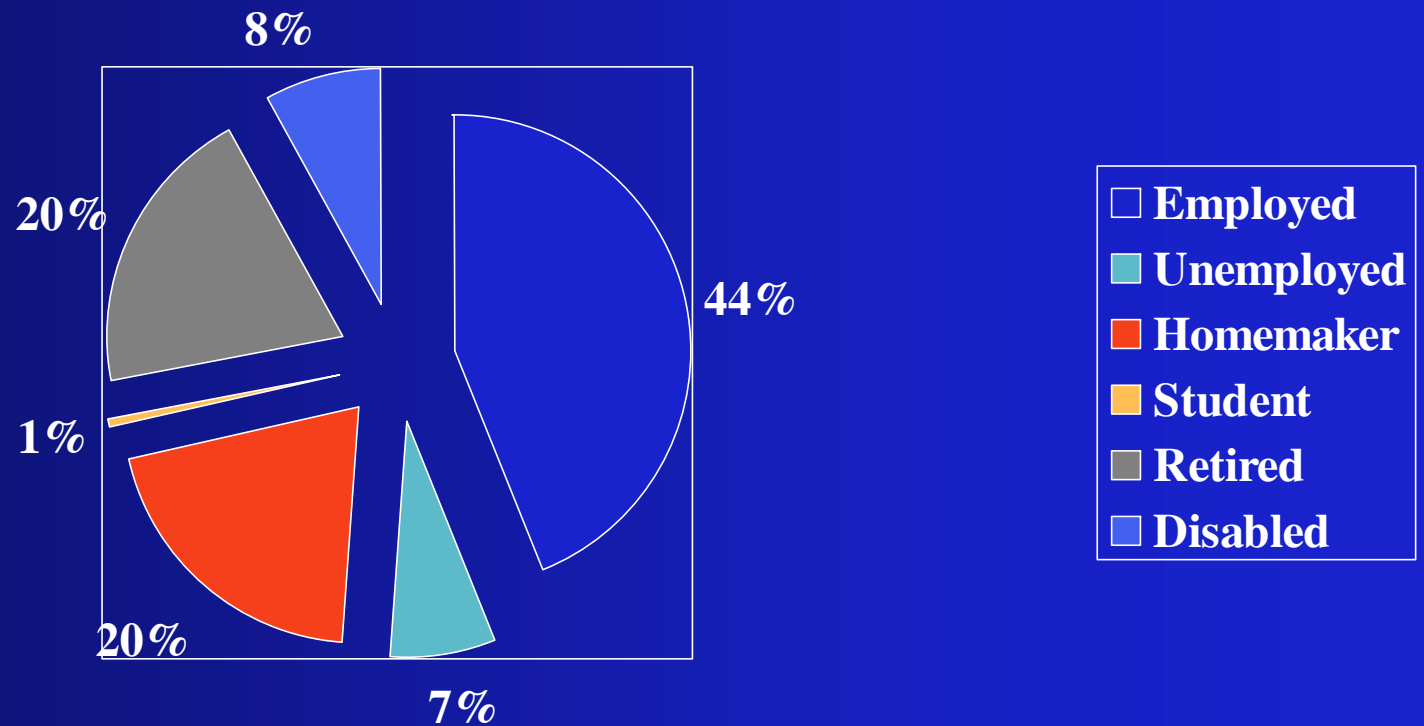


Demographics: Education

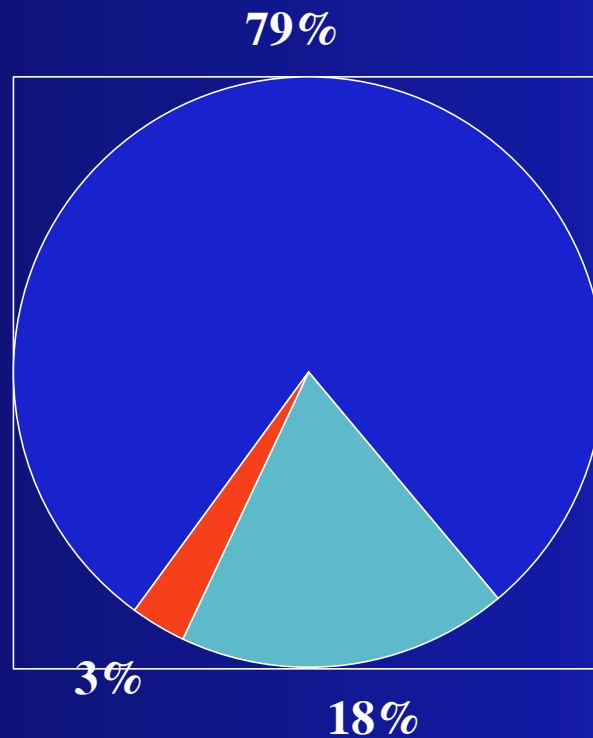


- College graduate
- High school graduate or some college
- Less than high school graduate

Demographics: Employment status

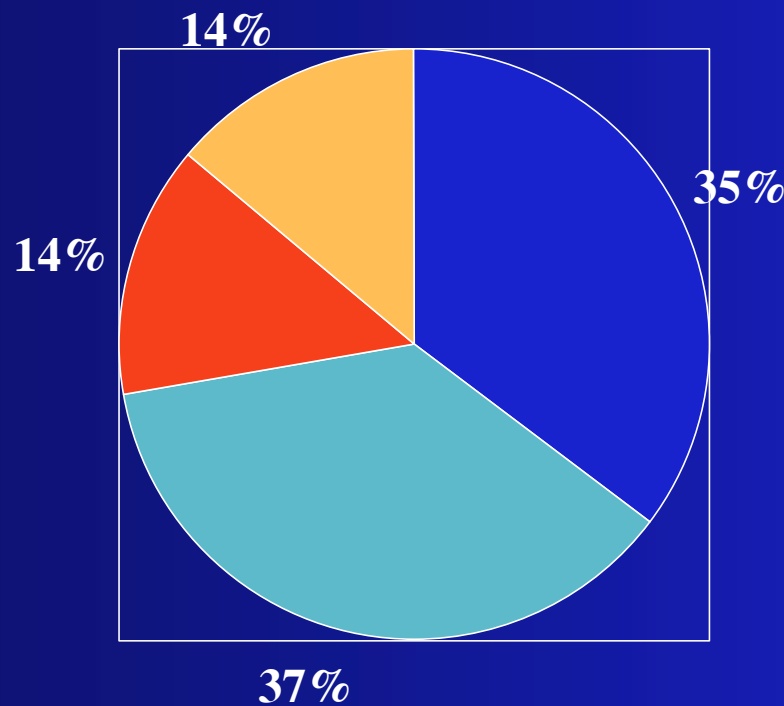


Demographics: Marital Status



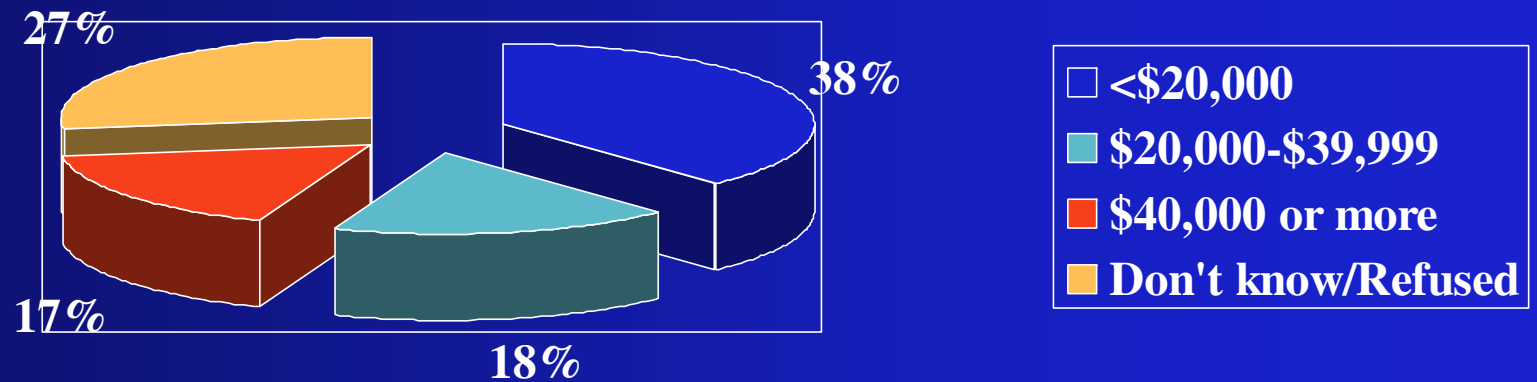
- Married or living with a partner
- Separated/widowed/divorced
- Never Married

Demographics: Health Insurance

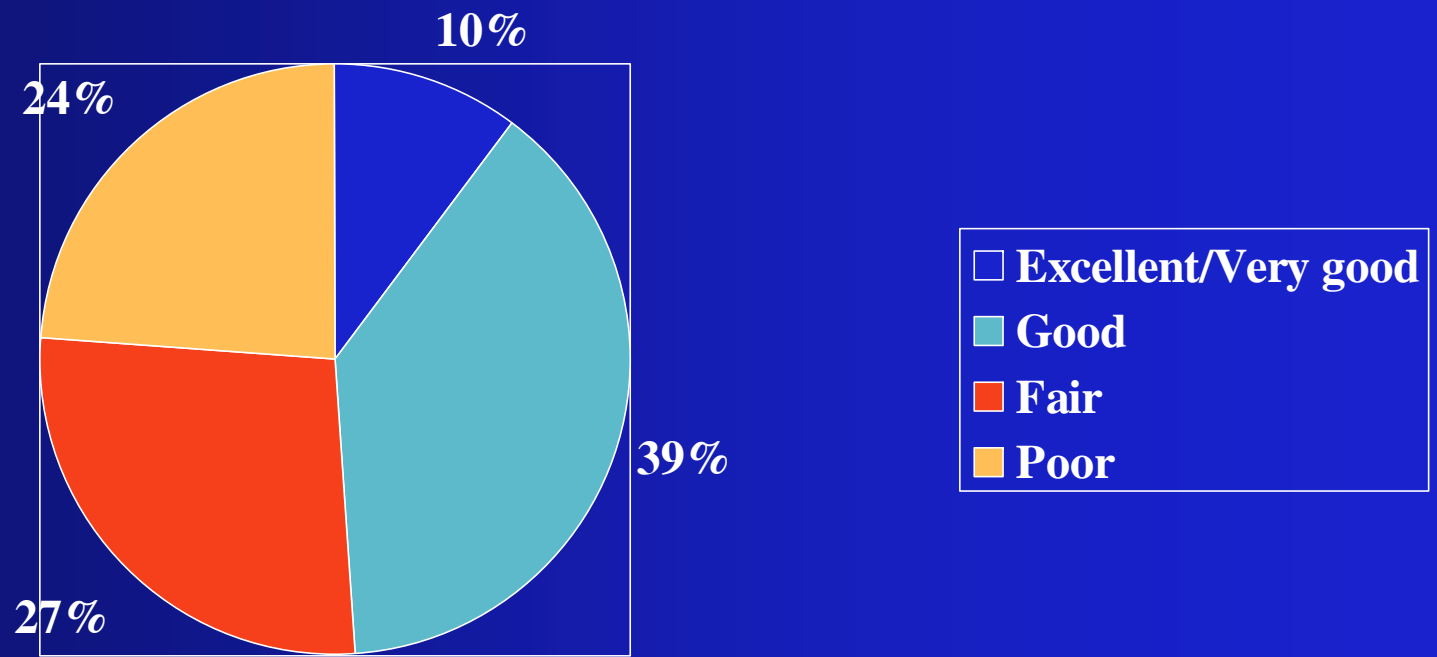


- Private
- Public
- No insurance-received indigent care from counties
- None

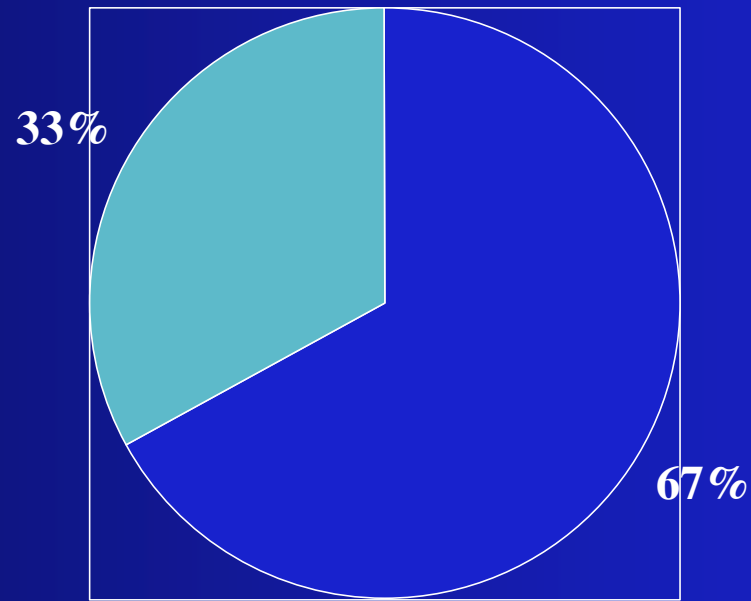
Demographics: Annual Household Income



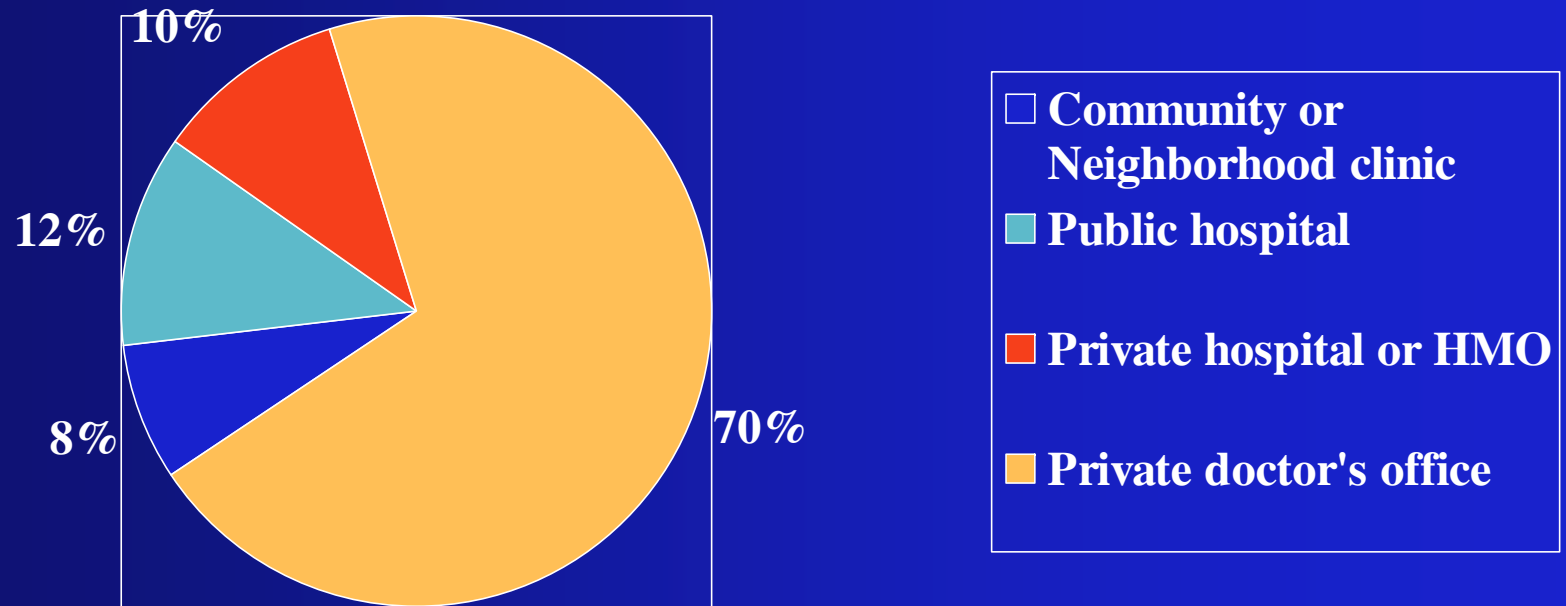
Healthcare characteristics: Health status



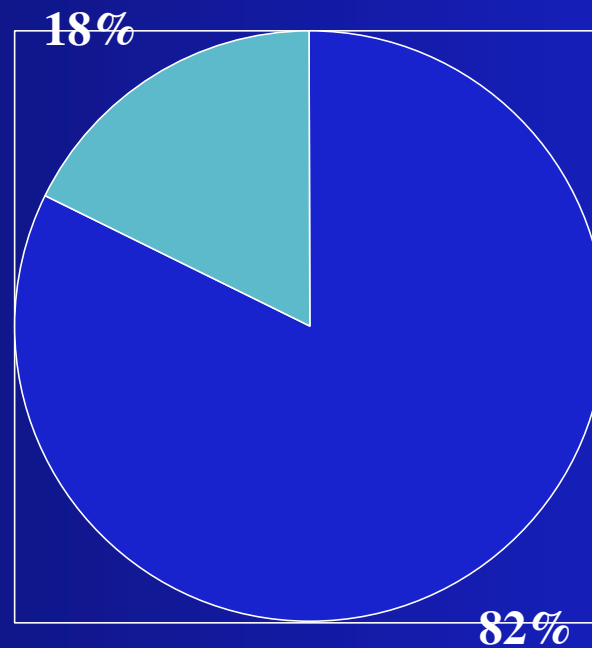
Healthcare characteristics: Had a particular place of care



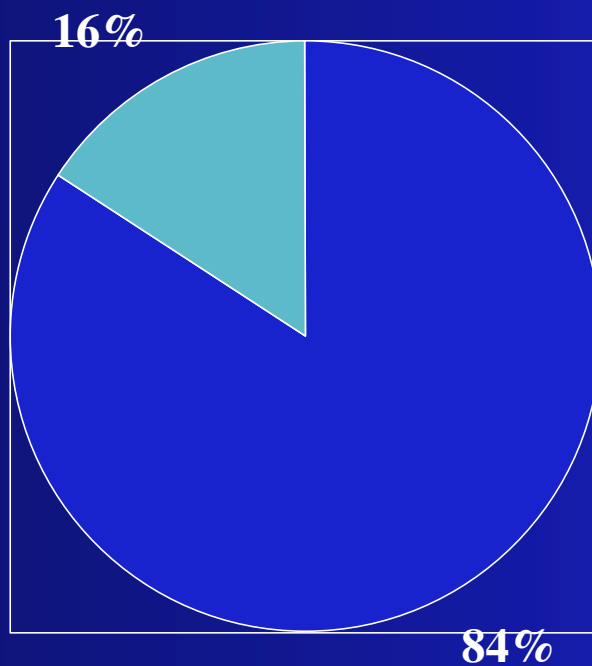
Healthcare characteristics: A particular place of care is



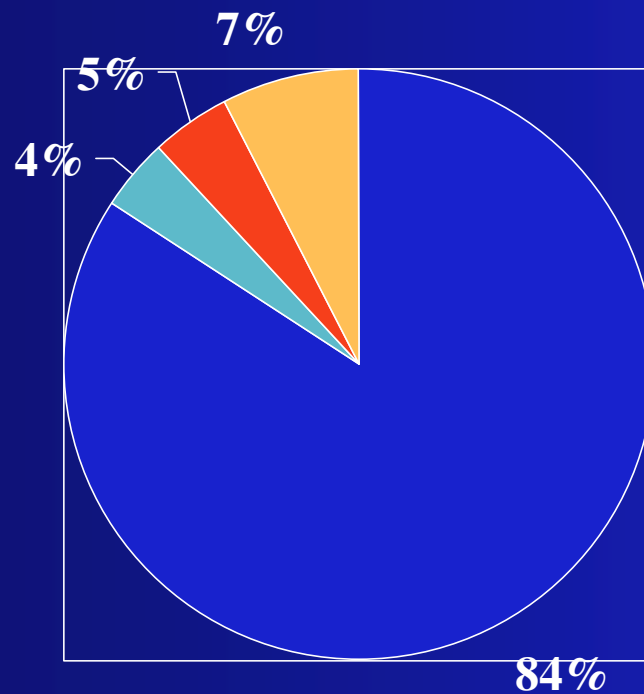
Healthcare characteristics: Had a personal doctor



Provider ethnicity



Language concordance and access



- Had Vietnamese speaking doctor
- Used an interpreter
- Had no interpreter but spoke English well or were interviewed in English
- Had no interpreter and did not speak English well

Knowledge of and attitudes toward colorectal cancer and screening

	N	%
Knew of someone with colon cancer	144	23
Had ever heard of colon cancer	638	74
Had heard of colon polyp	434	50
Believed colon cancer can be cured	565	88
Were worry about colon cancer	261	41
Had ever thought might get colon cancer	220	34

Knowledge and Attitudes (Cont.)

	N	%
Thought need FOBT if feeling healthy	373	43
Were afraid FOBT might find cancer	123	14
Thought need sig or col if feeling healthy	311	36
Were afraid sig or col find cancer	114	13
Thought sig or col painful	330	38
Thought sig or col prep troublesome	325	37

Colorectal Screening Rates

- among Vietnamese Americans aged 50 to 74 were generally low.

Colorectal Screening Rates: Recognition: Having ever heard of

	FOBT	Sig	Col
Recognition	55%	40%	36%

Colorectal Screening Rates: Receipt: Having ever had

	FOBT	Sig	Col	Any test
Receipt	48%	20%	26%	62%

Colorectal Screening Rates: Last test were done because

	FOBT	Sig	Col
Routine	76%	56%	52%
Symptoms	10%	18%	21%
Follow up	10%	24%	25%

Colorectal Screening Rates: Intention

	FOBT	Sig	Col
If doctor recommends test, will have one	85%	76%	75%
If doctor not mention test, would ask for one	26%	20%	21%
Intention to screen in recommended intervals	14%	10%	13%

Colorectal Screening Rates: Currency-- Being up-to-date

	FOBT	Sig	Col	Any test
Currency	25%	16%	23%	46%

Summary

- Overall colorectal screening rates among Vietnamese Americans were low.
- Public health intervention focusing on the Vietnamese American public and healthcare providers are needed to increase colorectal screening rates in this population.

For Long Life, Test The Colon!

