

Title: Acceptability of stool-based DNA colorectal cancer (CRC) screening among Black/African American patients served by a Federally Qualified Health Center (FQHC)

Authors: Evan Keiser, MD1; A. Michelle Corbett, MPH2; Onyema Chido-Amajuoyi, MD, MPH3; Allison Antoine, MPH2; Carrie Stehman, MA2 ; Isabella Dorn, MPH4; David Goines,5; Noelle K. LoConte, MD FASCO6

1. University of Wisconsin School of Medicine and Public Health, Department of Medicine;
2. Center for Urban Population Health
3. University of Texas MD Anderson Cancer Center,
4. Outreach Community Health Center
5. Progressive Community Health Centers 6. University of Wisconsin Carbone Cancer Center

Link: https://ascopubs.org/doi/10.1200/JCO.2024.42.16_suppl.10530

Citation: Evan Keiser et al. Acceptability of stool-based DNA colorectal cancer (CRC) screening among Black/African American patients served by a Federally Qualified Health Center (FQHC). JCO 42, 10530-10530(2024). DOI:10.1200/JCO.2024.42.16_suppl.10530

Scientific Abstract:

In 2023, out of all cancers, CRC was projected to have the 3rd highest incidence and mortality in the United States (US). As of 2014, Black Americans had >20% higher incidence of CRC than White Americans. After the COVID-19 pandemic, home based CRC screenings are being more frequently used. Awareness and confidence in genetic testing has been found to be less in Black Americans compared to other populations. To understand acceptability of stool-based DNA testing for CRC in this population, we conducted focus groups in Milwaukee, WI.

Between 06/2023-10/2023, 10 focus groups from 2 FQHCs were facilitated, further separated by age and gender. During 90-minute focus groups, facilitators shared educational materials including an instructional video on the use of stool DNA tests and fact sheets about colonoscopy and FITs. Posed questions explored awareness of, experience with, and opinions about each modality. Thematic analysis was performed utilizing NVivo.

There was limited awareness of CRC risk and screening. Colonoscopy was identified as the preferred screening method in all groups except younger men. Younger men (50%) and younger women (47%) preferred stoolbased DNA testing compared to older cohorts (22%, 21%), Respectively. Relative accuracy and convenience of modalities were cited as important by several groups. Examination of DNA was not a pervasive concern.

Use of other team members such as community health workers could help bridge gaps to increase CRC screening. More focus groups will be conducted with other racially diverse FQHC patients to assess CRC screening preferences.

Key Takeaways:

- 1) Stool based DNA testing was generally acceptable in this population
- 2) There were differences in preferred screening test by age and gender
- 3) Health literacy and shared decision making remains critical in CRC screening
- 4) Team based care is a tool for increasing CRC screening

Written Lay Abstract:

Each year, 150,000 people are diagnosed with colorectal cancer. 50,000 people with colorectal cancer die each year. Black Americans are also more likely to have colorectal cancer compared to White Americans. There is a stool test that can be done at home to screen for colorectal cancer, but scientists want to know if Black populations would want to use this home test. Scientists want to know this because past studies found that Black populations may not have as much confidence in or awareness about similar genetic tests compared to other populations.

For this study, the scientists talked to 79 Black people during 10 group interviews. In the 90-minute interviews, the scientists shared information about the colorectal cancer stool test and showed a video on how to use the test. The scientists asked questions about awareness, experience with, and opinions about the home test and other colorectal screening tests, such as colonoscopy.

In interviews, Black Americans shared that the home stool test was acceptable to use. About half of younger people in these interviews would prefer to use the home stool test to screen for colorectal cancer. Older people in these interviews preferred to have a colonoscopy. Black Americans cared about how accurate and convenient the screening tests were.

This research tells us that home stool tests could be used by Black populations to screen for colorectal cancer. Community health workers could share information about these home tests to increase awareness. In future studies, the scientists will interview different populations about their preferences for colorectal cancer screening.

Colorectal Cancer Screening among Black Americans

Colorectal Cancer

Access to stool test kits can increase screening. We want to know Black populations' opinions and knowledge of this test.



What did we study?

We interviewed 79 Black individuals to ask about awareness, experience with, and opinions about home testing for colorectal cancer.



Black Americans shared that they:



Would use home tests to screen for colorectal cancer

Care about how **accurate and convenient** the test is

Older individuals **preferred to have a colonoscopy**

What's next?

Community health workers can **raise awareness** by sharing information about home stool kits.

Future research needs to ask different populations about their preferences for screening.

Research Abstract



Keiser et al. JCO 2024.



Carbone Cancer Center
UNIVERSITY OF WISCONSIN
SCHOOL OF MEDICINE AND PUBLIC HEALTH