

Family communication impacts attitude about genetic counseling/testing for breast cancer

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Whether or not relatives talk about the family's history of cancer significantly impacts attitudes and knowledge about genetic counseling and testing for those at moderate risk of developing breast cancer, according to a new preliminary study presented today at the American Society for Preventive Oncology meeting in Bethesda, Md.

Prior research has shown that African Americans participate less often in genetic counseling and testing for the genes that put women at risk for breast cancer than Caucasians. Also, African Americans are often diagnosed with a later stage of breast cancer and thus are more likely to die from the disease.

“It's important to understand the many reasons for these differences so we can better address them,” said Kristi D. Graves, Ph.D., a clinical psychologist in the Cancer Control program at the Lombardi Comprehensive Cancer Center, part of Georgetown University Medical Center. “In this study, we evaluated the impact of socio-cultural variables on knowledge and attitudes about BRCA 1/2 counseling and testing. We hope to use this information to better understand why there's a difference in testing uptake among black and white women.”

Researchers conducted telephone interviews with 105 women who had a negative breast biopsy history and one or more relatives with breast and/or ovarian cancer (75 Caucasians, 30 African Americans). The

researchers assessed cancer history, perceived risk, worry, medical mistrust, cancer fatalism, family/physician communication, race-based experiences, and knowledge and attitudes toward BRCA 1/2 testing.

After controlling for education, income, and socio-cultural variables like medical mistrust and cancer fatalism, Graves said, “We didn’t find a statistical difference in knowledge or attitudes between African-American and Caucasian women. We did observe a difference, however, among women who said their families discussed their cancer history versus those families who didn’t discuss cancer. We asked the women if they had talked with their relatives about the family’s history of breast cancer. The more family members the women talked with, the greater the level of knowledge about genetic counseling and testing.

“We also found that those who felt more vulnerable because they perceived a greater risk of developing breast cancer had less positive attitudes about genetic testing,” Graves said.

Next, Graves will examine if the women in this study decide to take part in genetic counseling and testing after they receive educational materials.

Source: Georgetown University Medical Center

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