

Publication

Frequency of a positive family history of colorectal cancer in general practice: a cross-sectional study

JournalArticle (Originalarbeit in einer wissenschaftlichen Zeitschrift)

ID 4487886

Author(s) Plath, Jasper; Siebenhofer, Andrea; Koné, Insa; Hechtner, Marlene; Schulz-Rothe, Sylvia; Beyer, Martin; Gerlach, Ferdinand M.; Guethlin, Corina

Author(s) at UniBasel Koné, Insa;

Year 2017

Title Frequency of a positive family history of colorectal cancer in general practice: a cross-sectional study

Journal Family Practice

Volume 34 Number 1

Pages / Article-Number 30-35

Mesh terms Adult; Colonic Polyps, epidemiology, genetics; Colorectal Neoplasms, epidemiology, genetics; Cross-Sectional Studies; Female; General Practice, statistics & numerical data; Germany, epidemiology; Humans; Kidney Neoplasms, epidemiology, genetics; Male; Medical History Taking; Middle Aged; Nuclear Family; Ovarian Neoplasms, epidemiology, genetics; Pedigree; Prevalence; Stomach Neoplasms, epidemiology, genetics; Urethral Neoplasms, epidemiology, genetics; Uterine Cervical Neoplasms, epidemiology, genetics

Evidence on the frequency of a positive family history of colorectal cancer (CRC) among individuals aged <55 years is lacking. General practice setting might be well suited for the identification of individuals in this above-average risk group.; To determine the frequency of a reported positive family history of CRC among patients aged 40 to 54 years in a general practice setting.; We conducted a cross-sectional study in 21 general practices in Germany. Patients aged 40 to 54 years were identified by means of the practice software and interviewed by health care assistants using a standardized four-item questionnaire. Outcome was occurrence of a positive family history of CRC, defined as at least one first-degree relative (FDR: parents, siblings, or children) with CRC. Further measurements were FDRs with CRC / colorectal polyps (adenomas) diagnosed before the age of 50 and occurrence of three or more relatives with colorectal, stomach, cervical, ovarian, urethel or renal pelvic cancer.; Out of 6723 participants, 7.2% (95% confidence interval [CI] 6.6% to 7.8%) reported at least one FDR with CRC and 1.2% (95% CI 0.9% to 1.5%) reported FDRs with CRC diagnosed before the age of 50. A further 2.6% (95% CI 2.3% to 3.0%) reported colorectal polyps in FDRs diagnosed before the age of 50 and 2.1% (95% CI 1.8% to 2.5%) reported three or more relatives with entities mentioned above.; One in 14 patients reported at least one FDR with CRC. General practice should be considered when defining requirements of risk-adapted CRC screening.

Publisher Oxford University Press ISSN/ISBN 0263-2136; 1460-2229 edoc-URL https://edoc.unibas.ch/66915/

Full Text on edoc No;

Digital Object Identifier DOI 10.1093/fampra/cmw118 **PubMed ID** http://www.ncbi.nlm.nih.gov/pubmed/27920116

ISI-Number WOS:000397100800006

Document type (ISI) Journal Article