

Data suggest that colorectal cancer (CRC) surveillance improves colon cancer survival and reduces incidence among high-risk individuals. It is currently recommended that patients with hereditary nonpolyposis colorectal cancer (HNPCC) have a colonoscopy every 1 to 2 years beginning between the ages of 20-25 and annually after age 40. This study evaluates the effect that genetic test results have on the use of colonoscopy in a high-risk population.

**Halbert C, et al. Colon cancer screening practices following genetic testing for hereditary nonpolyposis colon cancer (HNPCC) mutations.**

**Archives of Internal Medicine 2004;164:1881-1887.**

**Purpose:**

To determine whether receiving positive genetic test results for HNPCC had an effect on the use of colonoscopy.

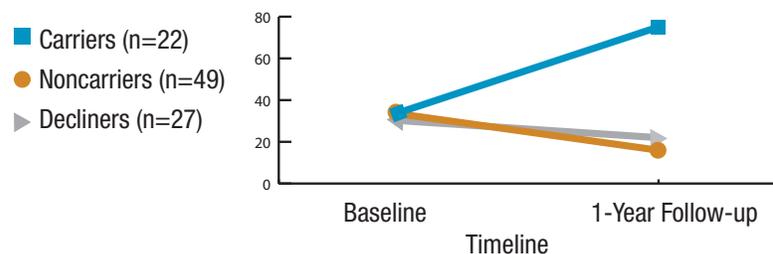
**Design and Methods:**

Eligible participants were asymptomatic and had a 25% risk of having the HNPCC mutation identified in their family. Participants were initially interviewed by telephone to obtain information about screening behaviors. The participants then received education about hereditary colon cancer and genetic testing and were provided with recommendations for colon cancer screening. Following disclosure of genetic test results, the participants were recontacted via telephone at 1, 6, and 12 months to assess screening behaviors.

**Results:**

Of ninety-eight eligible participants there were 22 mutation carriers (22%), 49 noncarriers (50%) and 27 individuals who had declined testing (28%). Before genetic counseling, colonoscopy rates were not significantly different between the groups. During the 12 months following genetic testing, 73% (16/22) of mutation carriers, 16% (8/49) of noncarriers and 22% (6/27) of decliners reported having a colonoscopy.

**Changes in Colonoscopy Use Following HNPCC Genetic Testing**



**Bottom Line:**

Mutation carriers were significantly more likely than noncarriers and decliners to have a colonoscopy following genetic testing. These results indicate that genetic testing for HNPCC mutations may motivate the use of colon cancer screening tests among mutation positive individuals resulting in reduced mortality and morbidity from this disease.

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Clinical Support, Healthcare Information and Customer Services: 800-4-MYRIAD (800-469-7423)



**MYRIAD**®

Myriad Genetic Laboratories, Inc.  
320 Wakara Way, Salt Lake City, UT 84108

For more information:  
[www.myriadpro.com](http://www.myriadpro.com) 800-4-MYRIAD (800-469-7423)