

4th European Colorectal Cancer Days, 29–30 May 2015 Brno, Czech Republic.

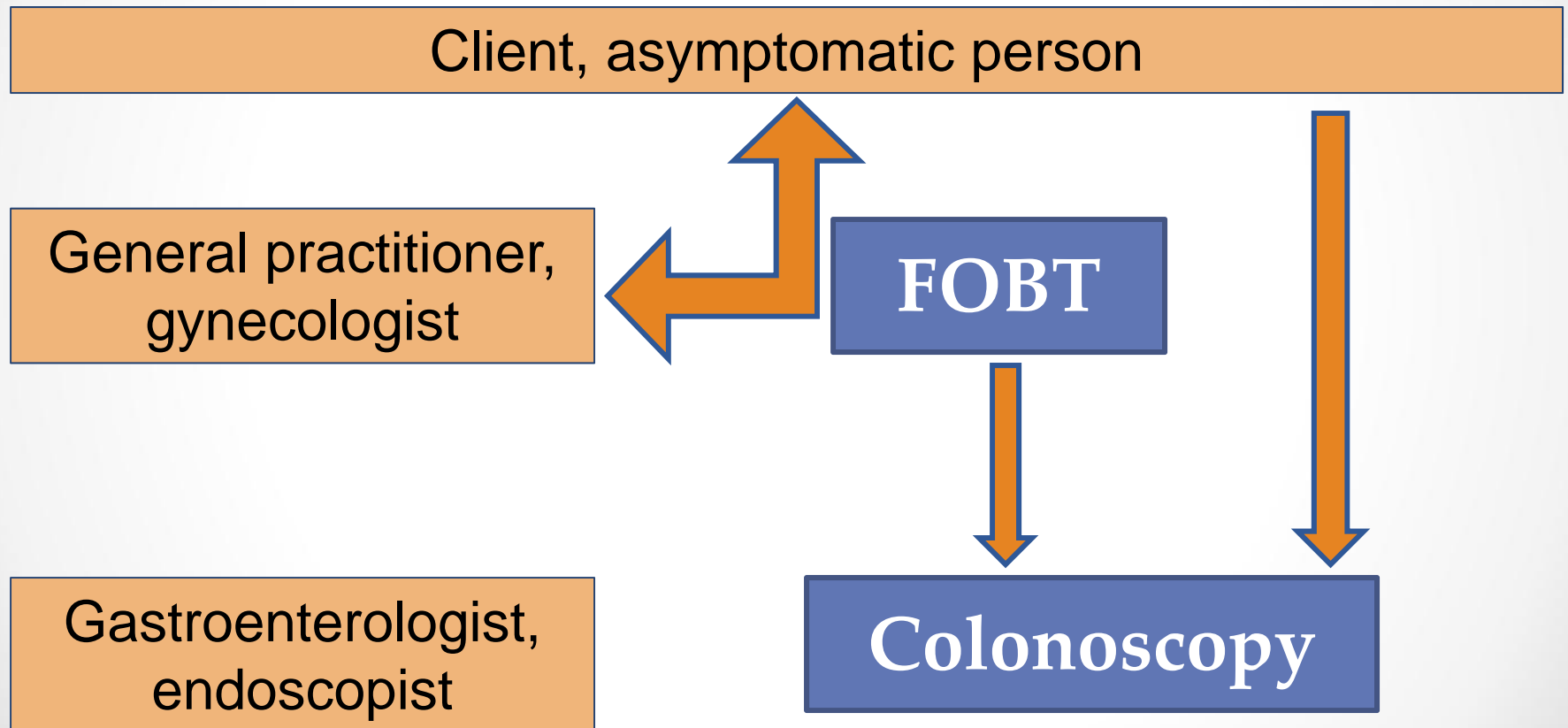
# CRC screening from the viewpoint of its clients and patients – results of survey

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# Colorectal cancer screening in the Czech Republic



# Background

- Results of colorectal screening programs presented from the viewpoint of stakeholders, care providers and endoscopists are common
- **Studies describing the viewpoint of clients – the target population are rare**
- Interview/questionnaire with direct care provider (GP, endoscopy) may be skewed

# Aims

- I.: To acquire independent opinion from the viewpoint of CRC screening target population
  - How I get an information regarding the CRC screening?
  - Why I participated (or did not) in the screening?
- II.: To discover the troublesome points in the screening from the practical view of the clients

# Methods

- Anonymous questionnaires distributed to relatives of pregradual university students and to students of The University of the Third Age Masaryk University Brno (aged over 50)
- Pilot study – two surveys 2013, 2015
- Before/after the implementation of personalized invitations

# Questionnaire

- Demography and CRC in family
- The sources of CRC program information
- Reasons for non-participation in the screening
- Practical troubles with screening tests realization
- Circumstances that can stimulate the participation

# Results

## Demographics

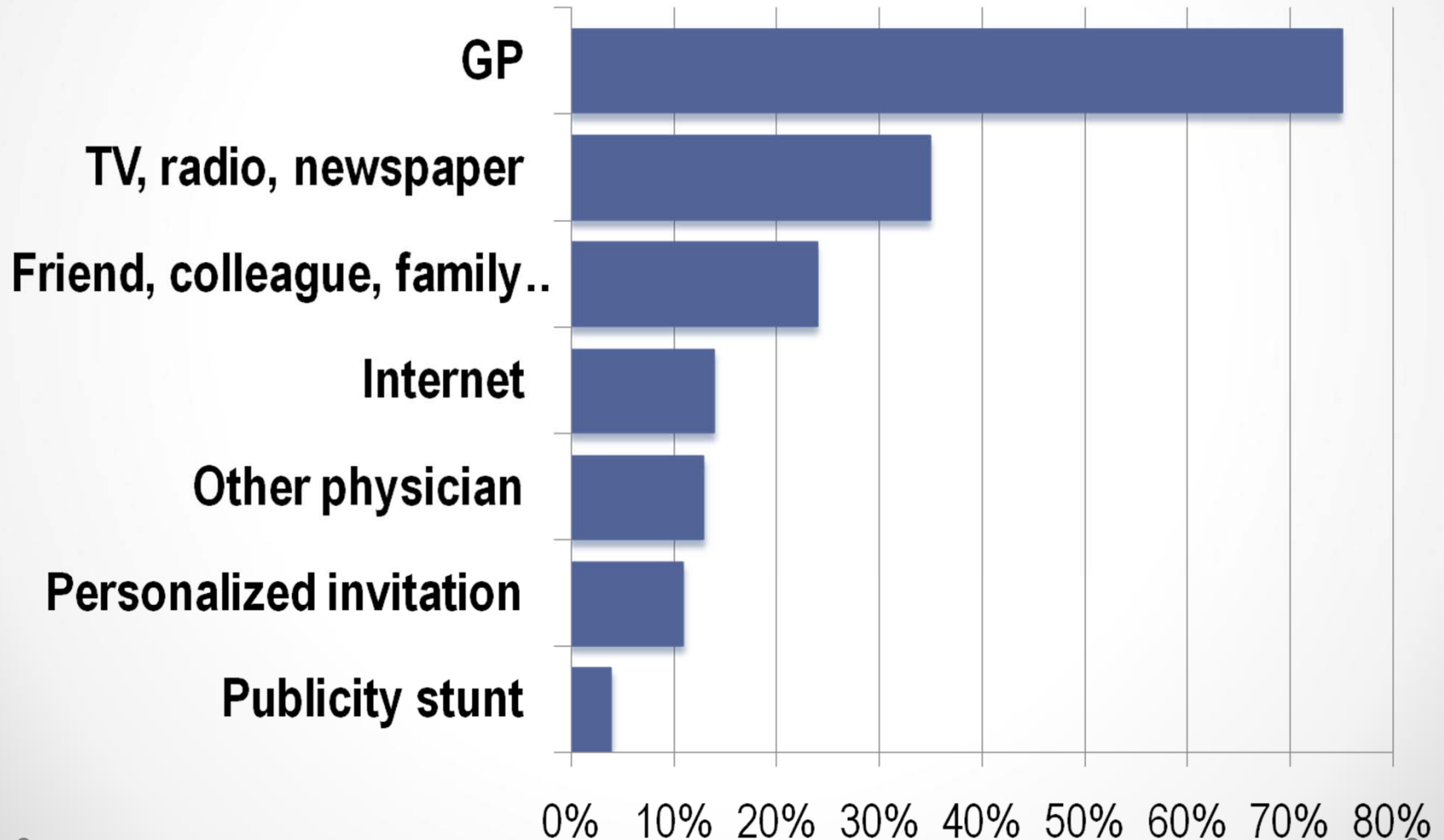
- Completed questionnaire from 325 persons:
  - 28% male, 72 % female,
  - average age 65 years
- 110 relatives of students (response rate 31%)
- 215 students of U3A (direct pathway of questionnaires)
- CRC in family history in 50 (15,4%) of them

# Sources of information

- 9 persons (2,7%) never heard about CRC screening
- Information sources from:
  - Colleague, friend, family member– 25 %
  - Doctor – 75%
  - TV, radio – 35%
  - Internet – 14 %
  - Publicity stunt– 4 %
  - Personalized invitation – 11 % (25/215)



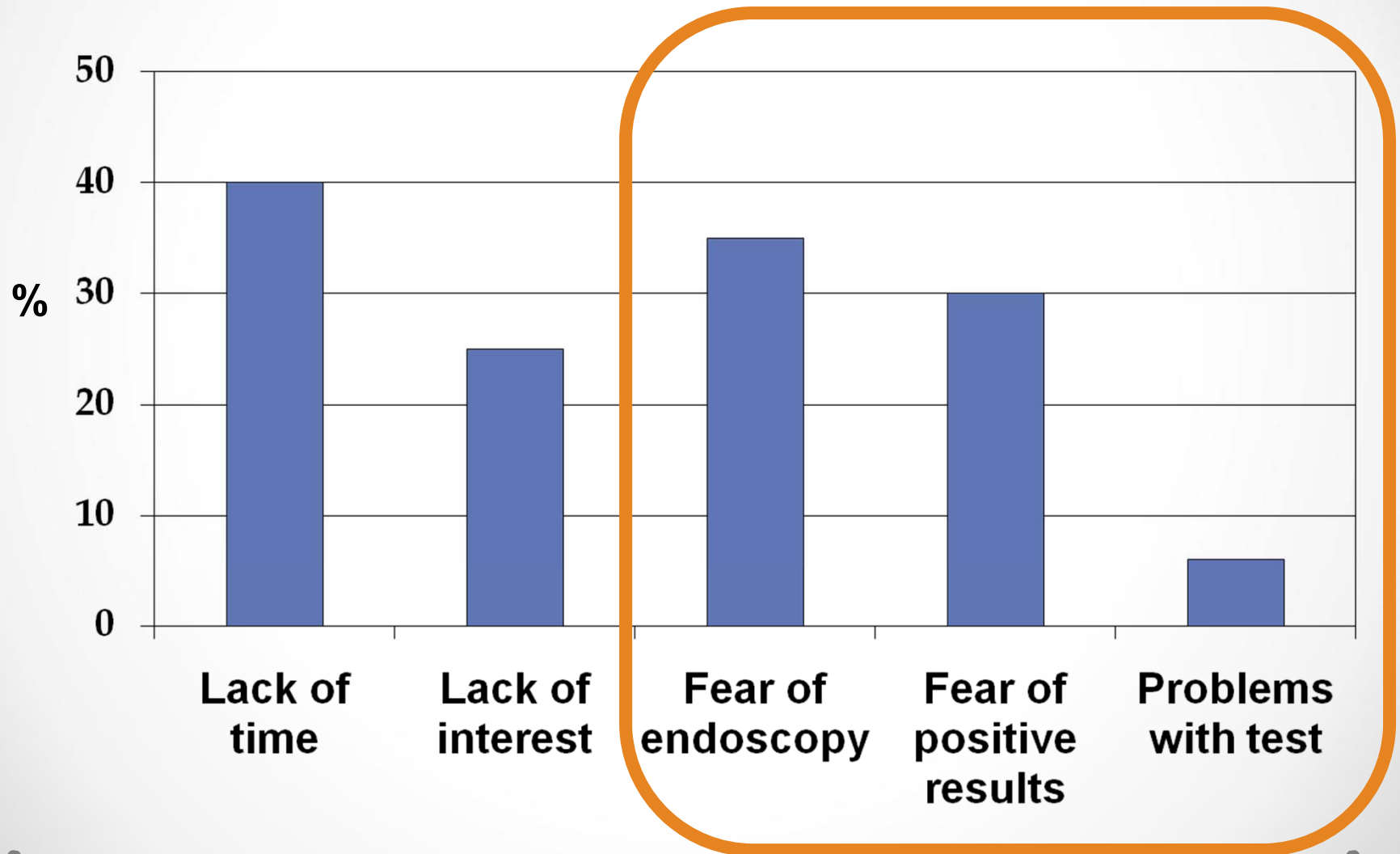
# Sources of information about CRC screening



# Reasons for non-participation in screening

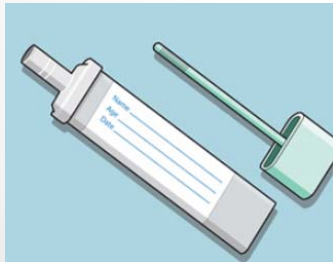
- 52 (16%) responders did not participate in screening, their reasons were:
  - Lack of time– 40% (21)
  - Lack of interest in preventive examination 25% (13)
  - Fear of endoscopy– 35% (18)
  - Fear of positive result– 30% (16)
  - Non familiarity with the test performance– 6% (3)

# Non – participation 16% (n=52)



# Referred troubles with FOBT

- 248 (76%) persons with FOBT experience,  
(in 68 (27%) + followed by colonoscopy)
  - Inhibitions to manipulate with stool 19 ( 8%)
  - Inappropriate toilet bowl 36 (14 %)
  - Difficulties in sample set manipulation 9 (3%)

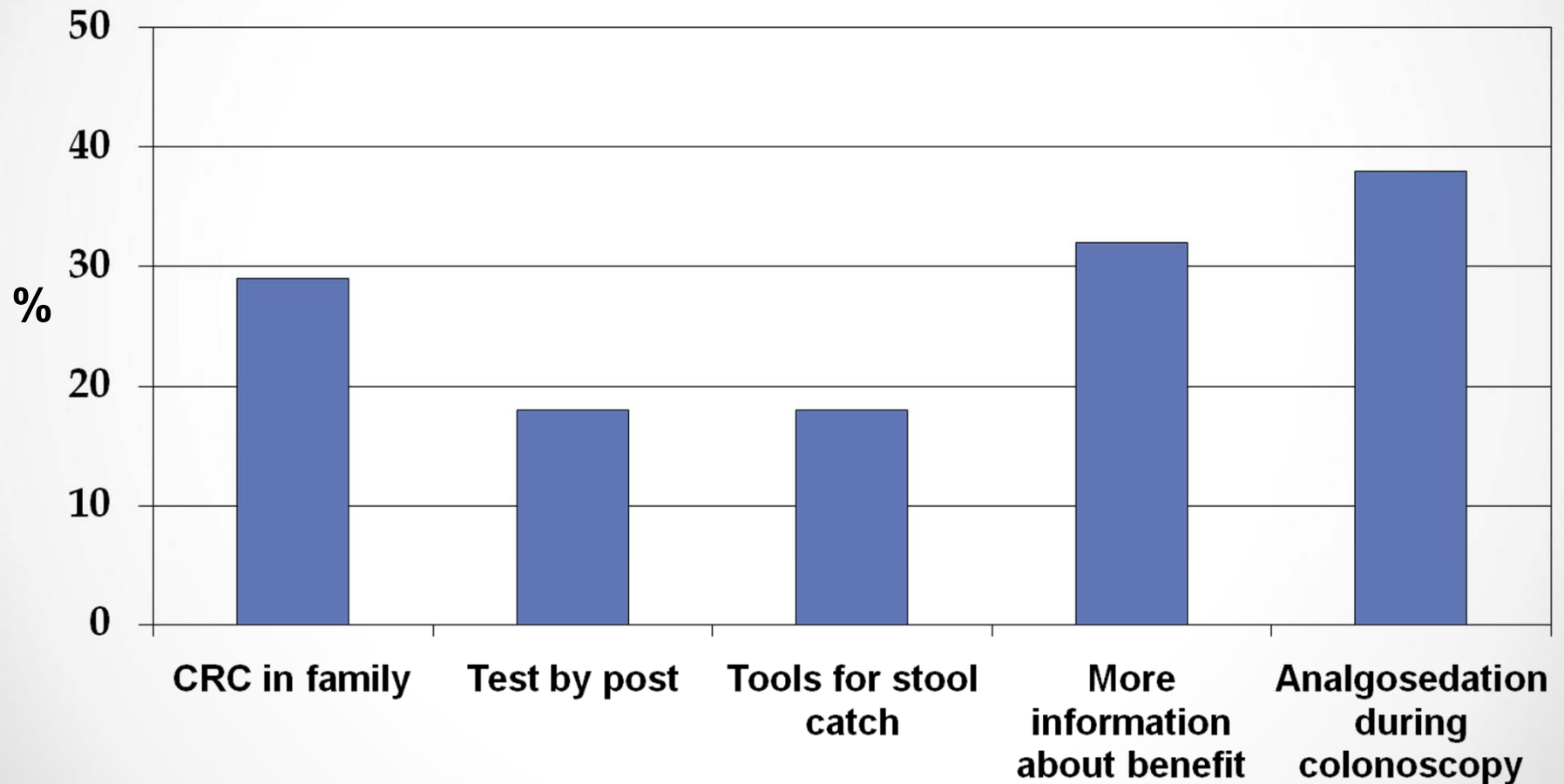


# Referred troubles with colonoscopy

- 85 patients, (17x primary colonoscopy)
- Fear of colonoscopy and fear of bowel preparation 70% (35%)
- Fear of positive result on endoscopy 53%



# What can stimulate my participation?



# Conclusions

- One half of clients experience the screening tests with no troubles
- Fear of colonoscopy and fear of positive result on test were the main referred problems for participation in regular screening
- One quarter of responders feel technical problems with stool catch

# Suggestion for aiming of support

- Decrease the fear of examination
- Tools for easy stool catch
- Preference of primary colonoscopy with analgo-sedation







Thank you for your attention

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