

Is FIT the Answer to Increasing Colorectal Cancer Screening Uptake in the Filipino Community? Results From a Conjoint Analysis Survey

Austin Crochetiere, MD; Marie Lauzon, MS; Antwon Chaplin, BA; Christopher V. Almario, MD, MSHPM Department of Medicine, Karsh Division of Gastroenterology and Hepatology, Cedars-Sinai, Los Angeles, CA

INTRODUCTION

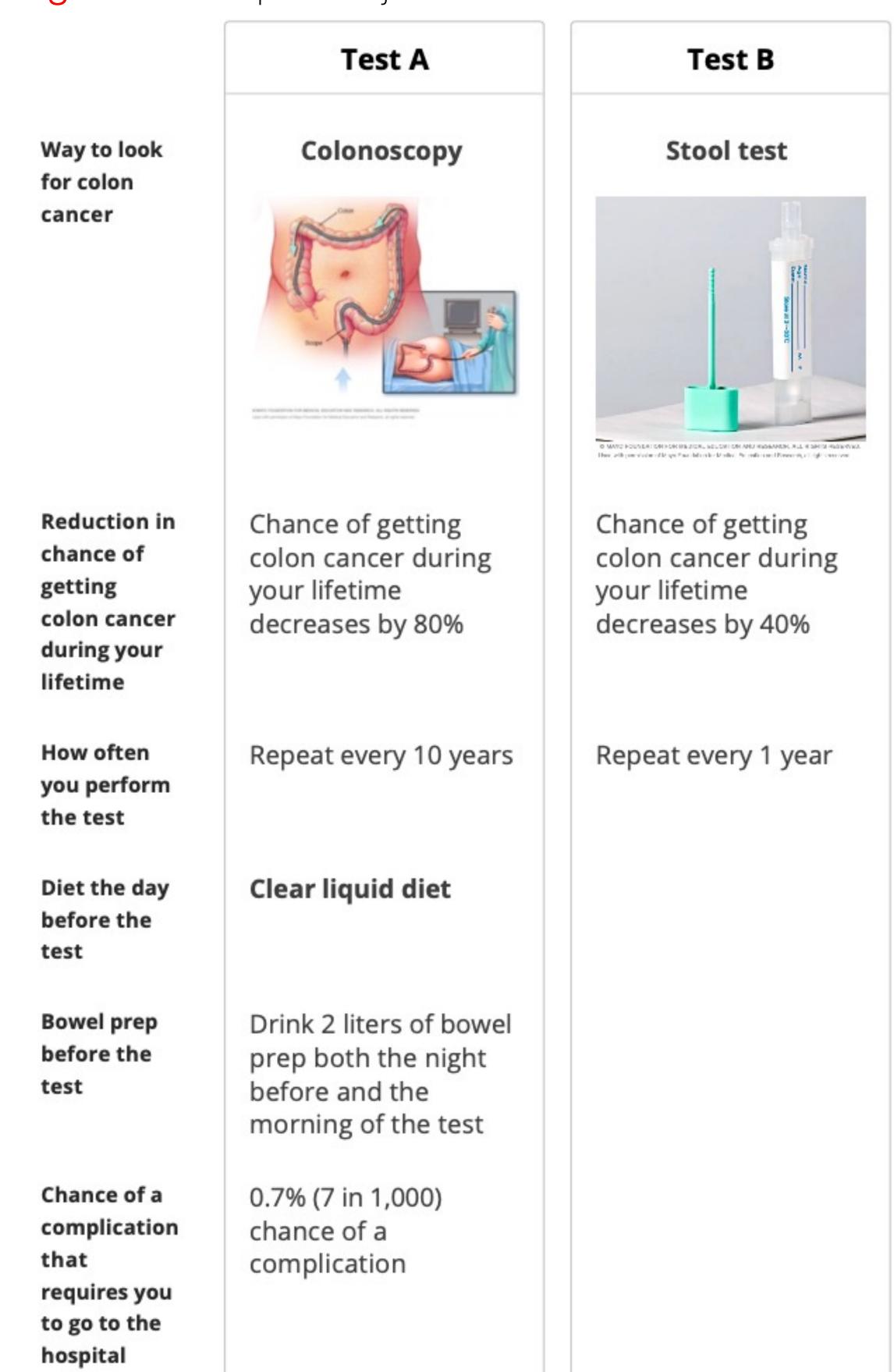
- While colorectal cancer (CRC) is preventable, it remains a major public health threat as the third most common and deadliest cancer in the US.
- Asian Americans are the fastest growing major racial/ethnic group in the US, with Filipinos comprising the 3rd largest group.
- While >80% of Filipinos have insurance rates, education levels, and incomes that exceed the general US population, they have lower CRC screening rates and worse outcomes vs. non-Hispanic Whites.
- To begin to address this disparity, we used conjoint analysis to determine Filipinos' preferences for FIT vs colonoscopy.

METHODS

- Cross-sectional, self-administered, online survey of Filipino adults aged ≥40 years at average risk for CRC and who had not been previously screened.
- Participants were shown a random set of nine side-by-side profiles of hypothetical CRC screening tests and asked to choose their preferred test (Figure 1).
- We performed simulations using the conjoint analysis data to determine each individual's preferred screening test (annual FIT or colonoscopy every 10 years).
- We then performed logistic regression to explore whether demographics or clinical factors predicted decision making on FIT vs colonoscopy.
 - Variables with p<.20 from bivariate analyses were included in the regression model.

METHODS (CONT)

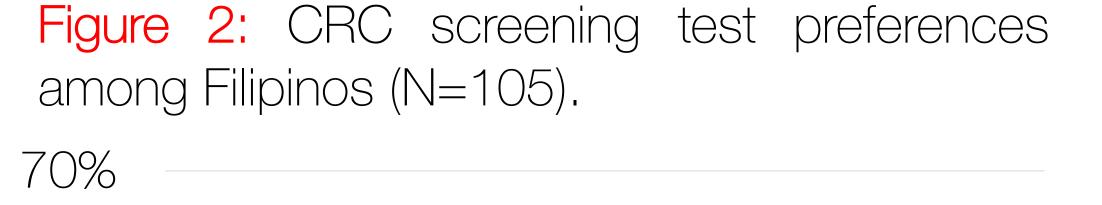
Figure 1: Sample conjoint exercise.

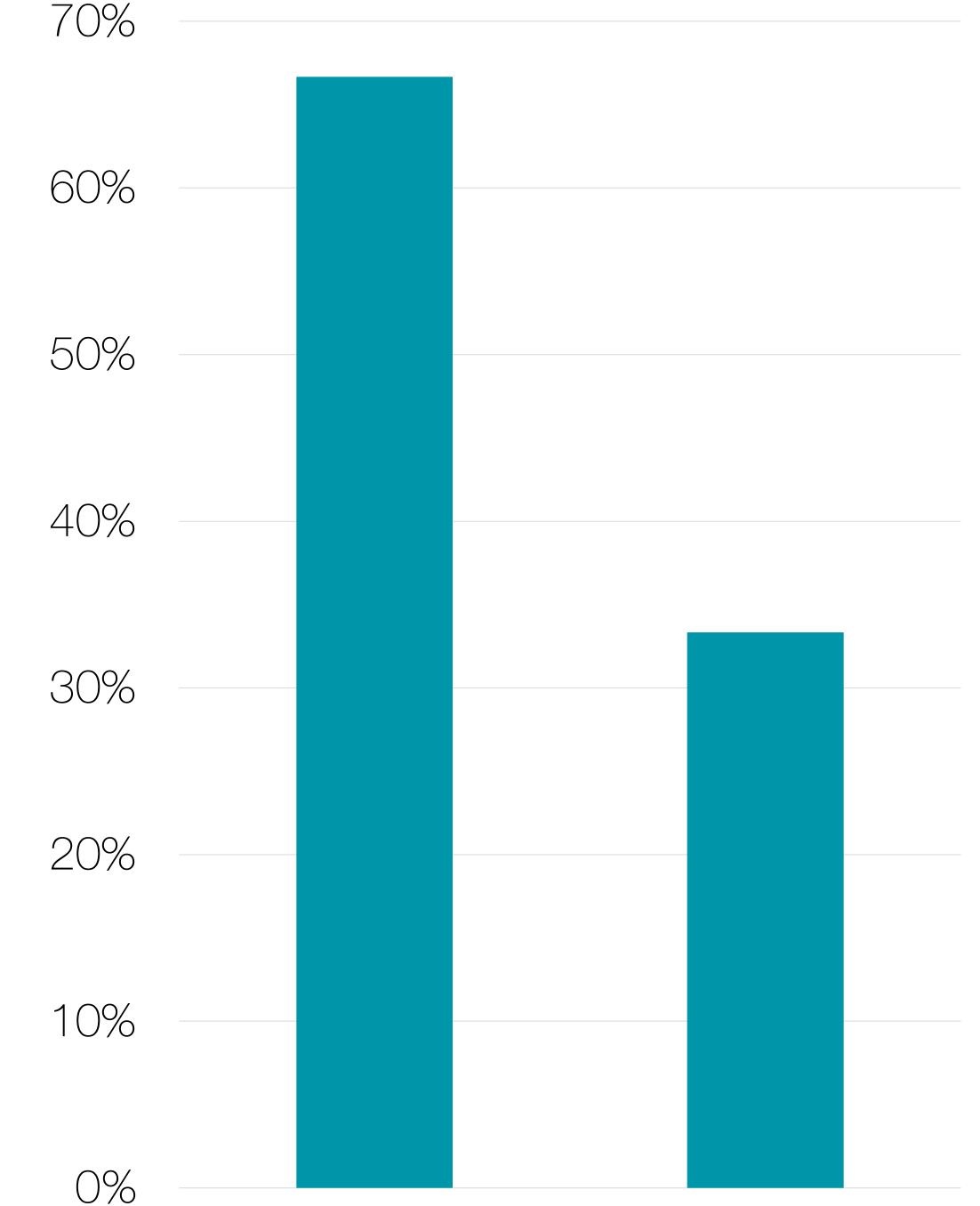


RESULTS

- 105 Filipinos completed the survey.
- 74% of participants were female; 85% of respondents were 40-49y.
- We found that 67% of participants preferred annual FIT while 33% preferred a colonoscopy every 10 years (Figure 2).
- In regression analysis, no variables were significantly associated with individual's preference for FIT over colonoscopy (Table 1).

RESULTS (CONT)





FIT every

year

Table 1: Regression analysis on preferring FIT every year over colonoscopy every 10 years.

Variable	n (% of row)	aOR [95% CI]
Sex:		
Male	21 (77.8%)	Ref
Female	49 (62.8%)	0.61 (0.20, 1.86)
Marital status:		
Married/living w/ partner	53 (62.4%)	Ref
Not married	17 (85.0%)	2.65 (0.61, 11.44)
Total household income:		
≤\$100,000	34 (79.1%)	Ref
>\$100,000	31 (62.0%)	0.72 (0.24, 2.20)
Prefer not to say	5 (41.7%)	0.23 (0.05, 1.12)
Employment status:		
Not working	19 (82.6%)	Ref
Employed or student	51 (62.2%)	0.36 (0.10, 1.31)
US region:		
NE/S/MW	15 (83.3%)	Ref
West	55 (63.2%)	0.70 (0.15, 3.21)
Has non-first degree relative or friend diagnosed with CRC	11 (44.0%)	0.42 (0.15, 1.16)

DISCUSSION

• 2 in 3 Filipinos prefer annual FIT over colonoscopy every 10 years for their CRC screening.

Colonoscopy every

10 years

- This finding is discordant with current CRC screening utilization in the US where colonoscopy is the most common test; this may in part explain suboptimal CRC screening rates in the Filipino community.
- Demographics and clinical factors are poor predictors of decision making on CRC screening.
- To improve CRC screening uptake in the Filipino community, our data suggest that community-based interventions should either focus primarily on FIT or employ a choice-based approach (ie, FIT or colonoscopy).

FUNDING

This study was supported by a grant from Cedars-Sinai Cancer.