

Collaborating to Address Barriers to Colon Cancer Screening in Patients with Schizophrenia and Schizoaffective Disorder

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PROBLEM DESCRIPTION /

- People with schizophrenia have a significantly higher mortality risk from colon cancer than the general population (RR = 1.69, 95%CI 1.60 -1.80)¹
- Current guidelines recommend screening with a fecal immunochemical test every 2 years from age 50 -74.²
- In July 2022, SJHC Family Medicine Centre/ Urban Family Health Team cared for 87 patients with either schizophrenia or schizoaffective disorder (SSD) who were eligible for colon cancer screening.
- At that time 51.8% of patients with SSD were up to date with colon cancer screening. This is compared to 71.7% of patients without SSD. A 20.1% difference in screening rates.

AIM

- To increase the rate of colon cancer screening to 66% in patients with schizophrenia and schizoaffective disorder (SSD) at SJHC UFHT by and to reduce the difference in screening rates to less than 13% from 20%.
- To develop effective processes and partnerships that address screening barriers and to spread these solutions broadly.

METHODS

Change idea 1: Led a focus group including a colon cancer screening tutorial with West Toronto ACTT to educate and to learn perceived challenges and barriers. The goal was to also generate change ideas to promote screening in this population. (June 29, 2023)

Change Idea 2: Engaged ACTT to support patients to complete their FIT by mailing kits to ACTT instead of patients. (Began publicizing June 28, 2023)

Change Idea 3: Developed a partnership with Acute Respite Care Program (ARC) to support patients with bowel prep for colonoscopy.

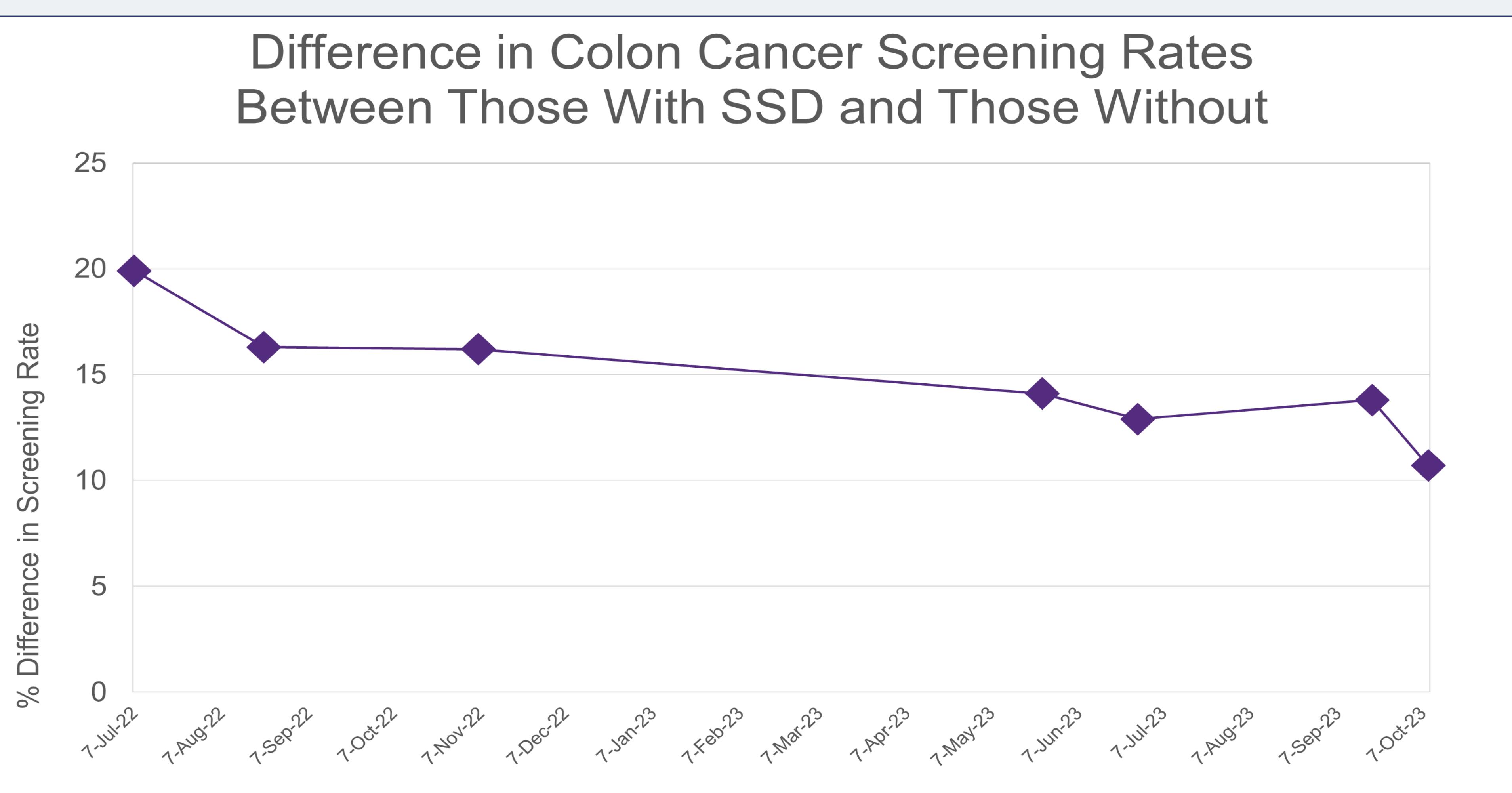
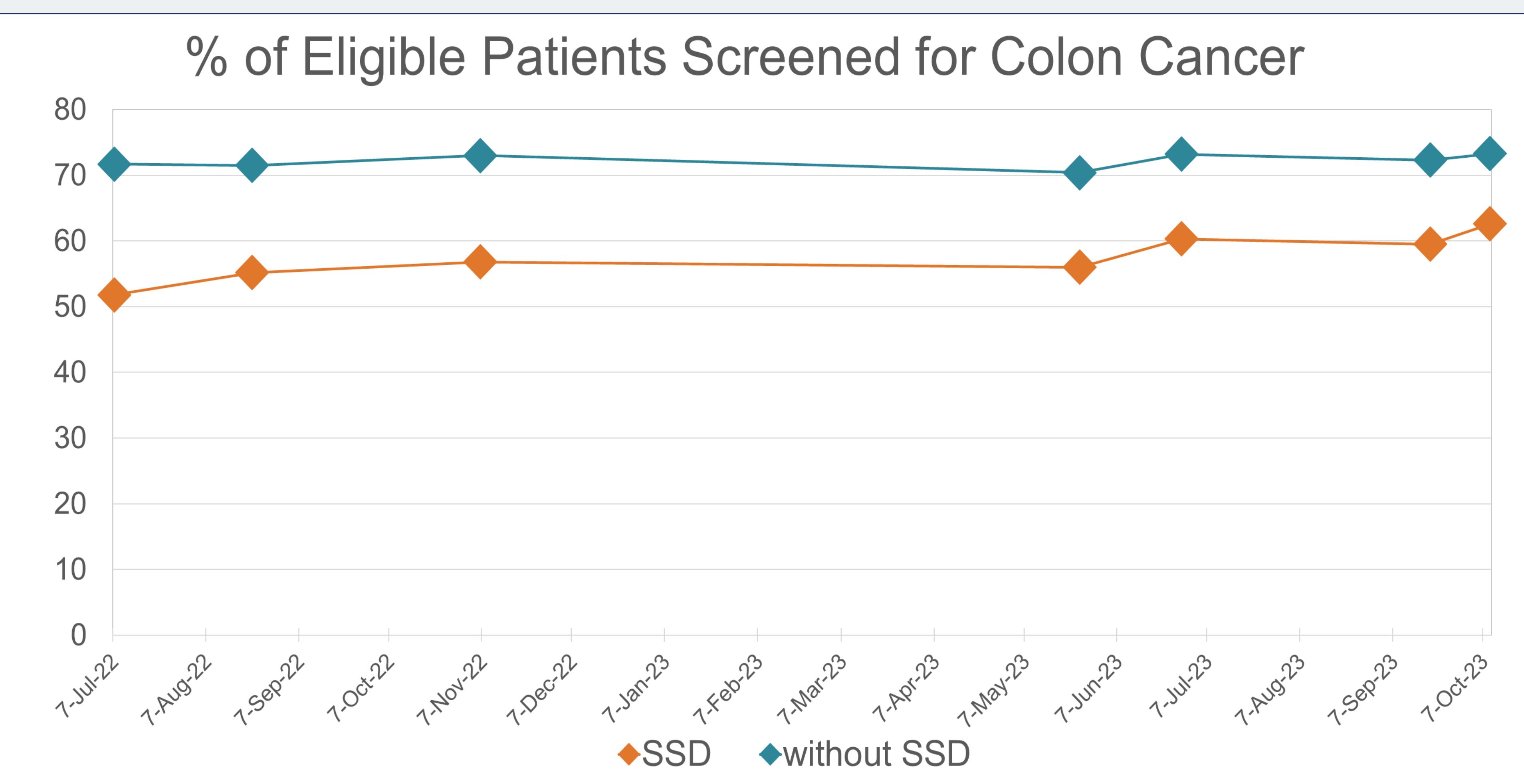
Developed a step by step guide for case managers to help refer to ARC and support patients with their bowel prep.

Change Idea 4: Interviews with patients with schizophrenia to understand barriers and facilitators to completing FIT kits and to generate any further change ideas.

RESULTS

Process Measures as of Oct 9, 2023

- 2 patients interviewed
- 10 West Toronto ACTT members participated in the focus group and had FIT training
- 0 fit kits mailed to and received by ACTT
- 1 patient completed bowel prep at ARC but they ate before their scope - unsuccessful
- 2 colonoscopies completed with adequate bowel prep without ARC support
- 2 new change ideas generated :
 - Family MDs do rectal exam to collect stool for FIT
 - Opportunistic FIT/FOBT/colonoscopy when admitted to hospital for other reasons.



DISCUSSION

- Working with an interdisciplinary team beyond the confines of the Family Health Team is an excellent approach to targeting colon cancer screening efforts in difficult to reach populations.
- 6 months into the project 62.6% of patients have been screened for colon cancer. The difference between those screened with SSD and those without has been cut in half. We have made good progress towards our aim.
- Some of this improvement was related to patients aging out of eligibility, dying or leaving our practice. The number of patients eligible for screening among our target population reduced from 87 to 75.
- Some improvement happened just by raising awareness of the issue and flagging that the project was going to be done
- Change ideas only began to be implemented at the end of June so there has been limited time to actually see the full impact this collaboration will yield

NEXT STEPS

- We would like to spread these initiatives beyond the patients cared for by both the SJHC UFHT and West Toronto ACTT.
 - Our family doctors are encouraged to share our materials with case managers from other organizations.
 - Our ACTT case managers are encouraged to suggest to other family doctors they mail their FIT kits to ACTT and to make them aware of ARC for colonoscopy bowel prep when needed.
- We encourage Regional Cancer Programs to run colon cancer screening tutorials for other community case managers who care for patients with SSD.
- We look forward to learning other ideas from our patients and spreading their ideas for change

REFERENCES

- ¹Ni L, Wu J, Long Y, et al. Mortality of site-specific cancer in patients with schizophrenia: A systematic review and meta-analysis. *BMC Psychiatry*. 2019;19(1). doi:10.1186/s12888-019-2332-z
- ²Colorectal Screening Recommendations - Cancer Care Ontario. <https://www.cancercareontario.ca/en/guidelines-advice/cancer-continuum/screening/resources-healthcare-providers/colorectal-cancer-screening-summary>.