Editorial Calls for Comprehensive Approach to Cancer Screening

ATLANTA – May 9, 2012– An editorial by Marcus Plescia, MD, MPH, director of the Division of Cancer Prevention and Control at the Centers for Disease Control and Prevention (CDC), calls for a more organized and comprehensive approach to increase cancer screening participation among those who are insured or are likely to become insured through the Patient Protection and Affordable Care Act. The editorial, which appears in the American Cancer Society journal, *CA: A Cancer Journal for Clinicians*, says public health has a responsibility to lead a national approach to cancer control that is comprehensive, strategic, and organized, and that a system to improve cancer screening could act as a model for other clinical preventive services.

Despite efforts to increase screening for breast and cervical cancers, rates have not improved in almost a decade. Meanwhile, screening rates for colorectal cancer are unacceptably low. Lack of insurance has traditionally been the main factor preventing adults from obtaining cancer screening. And while the Patient Protection and Affordable Care Act will help address this, access to health insurance and medical care are not the only factors that limit participation in cancer screening. Many people who currently have health insurance and regular access to medical care are not being screened.

Dr. Plescia says the infrastructure to promote and ensure cancer screening in the United States must be expanded to achieve desired screening goals. Efforts could include the development of centralized data systems for cancer screening, which could be used to develop more organized, systematic approaches.

While most patients are offered screening tests when they visit a medical provider for unrelated reasons, evidence-based interventions, including reminders to clients and providers to ensure that individuals are screened on time, have been shown to increase cancer screening rates. Screening registries have been found to improve the follow-up of patients with positive screening tests. But widespread implementation of these approaches has been challenging in a fragmented health care system. In a recent study of primary care physicians' practices, only 40% reported that they had a system in place to remind patients to come in for breast or cervical cancer screenings.

"In an era of health care reform, public health has opportunities to ensure that participation in cancer screening is widespread and equitable," concludes the editorial. "Given the magnitude of cancer morbidity and mortality… public health has a responsibility to lead a national approach to cancer control that is comprehensive, strategic, and organized."

Article: Plescia M., Richardson L.C., and Joseph D. New roles for public health in cancer screening [published online ahead of print May 9, 2012]. CA Cancer J Clin. 2012. doi: 10.3322/caac.21147.