

Review Explores Cancer Screening, Prevention, and Treatment in People with Mental Illness

December 11, 2015— A new report calls attention to cancer in people with mental illness, suggesting that healthcare system and societal factors are just as critical as individual lifestyle factors— linked to smoking and obesity—that lead to health disparities among this group. The report appears [early online in CA: A Cancer Journal for Clinicians](#) .

Reports indicate that nearly one in five adults (18.6%) suffered some form of any mental illness in the last year, and almost 10 million U.S. adults (4.1% of the population) had a serious mental illness (such as schizophrenia or bipolar disorder) in the past year. Despite the high prevalence of mental illness among adults, widespread recognition of the significant health disparities experienced by this population has occurred only in the last decade. People with mental illness die decades earlier compared with the general population, with most of the disparity the result of preventable and treatable chronic conditions, including cancer.

Individual lifestyle factors, such as smoking or limited adherence to treatment, are often cited as highly significant issues in shaping cancer risk among persons with mental illness. However, existing societal factors are also crucial contributors to this increased risk.

In the new report, researchers led by Lara C. Weinstein, MD, MPH of Thomas Jefferson University, Philadelphia, conducted a review summarizing existing literature on cancer prevention, screening, and treatment for people with mental illness.

They found that although multiple interventions are being developed and tested to address tobacco dependence and obesity in these populations, the evidence for effectiveness remains limited, and essentially all prevention interventions focus at the individual level.

Approaches that focus solely on “individual-level interventions have been criticized by some as ‘blaming the victim’ and can be particularly problematic for marginalized and stigmatized populations, such as those with experiences of mental illness, because they often fail to acknowledge the overwhelming environmental and societal barriers to good health,” write the authors.

The review provides a summary of key recommendations for medical clinicians to improve cancer prevention screening and treatment in people with mental illness. Those include:

- Address obesity among all people with mental illness, and strongly consider metformin for weight loss in people with schizophrenia and obesity or rapid weight gain
- Actively address tobacco use and dependence in all people with mental illness, and consider bupropion and varenicline in psychiatrically stable patients
- Provide a community health worker or peer counselor to help patients navigate the screening and treatment process
- Increase awareness of cancer screening in mental health service providers

- Consciously avoid the tendency to attribute physical symptoms that may indicate cancer to the patient's mental illness
- Involve staff from community-based social support, who often have long-term relationships with patients, early in the diagnostic and treatment process
- Engage people with mental illness in end-of-life treatment decisions

“We hope this review draws attention to the limitations of the current health care system to improve cancer control in this marginalized population,” said Dr. Weinstein. “Improving cancer prevention and control efforts in people with mental illness will require fully integrating medical and behavioral health care in settings that commonly provide services to this population, such as community mental health care sites, community service centers, and supportive housing, so that health interventions are brought to people’s doorsteps, reducing the access and engagement barriers that are contributing to existing disparities.”

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Article: Cancer Screening, Prevention, and Treatment in People with Mental Illness; *Cancer J Clin* 2016; doi: 10.3322/caac.21334

<http://onlinelibrary.wiley.com/doi/10.3322/caac.21334/abstract>
