

Immigrant Patients Less Likely to Report Family History of Cancer

Atlanta 2007/12/10 -Immigrants in the United States may be less likely to report a family history of cancer, which may lead to inadequate screening and cancer prevention strategies according to a new study. Dr. Heather Orom of the Barbara Ann Karmanos Cancer Institute in Detroit and colleagues argue that as a result of being less likely to report a family history, family history may not be as strong a predictor of cancer risk in immigrant populations. The study is published in the January 15, 2008 issue of *CANCER*, a peer-reviewed journal of the American Cancer Society.

Cancer prevention guidelines recommend earlier and more frequent screening for individuals with a family history of certain cancers. Therefore, knowledge and timely reporting of cancer history can impact access to cancer prevention and screening services. Previous research has identified lower rates of reporting cancer family history among African Americans, Hispanics, and Asian Americans than among Whites in the U.S. However, the current study is the first to examine whether an individual's immigrant status, in conjunction with race/ethnicity, plays a role in this under-reporting.

Dr. Orom and co-investigators studied data from 5,010 respondents to the 2005 Health Information Trends Survey. After controlling for race/ethnicity, other sociodemographic variables, and cancer knowledge, foreign-born respondents were about one-third as likely to report a family history of cancer as US-born respondents. The authors found that those who were single, male, or without health coverage were also less likely to report a family history of cancer.

The low rate of cancer history reporting did not change as immigrants became more integrated into American culture with time. The authors suggest that this may be due to fewer opportunities to learn about family health histories afforded to immigrants due to separation from relatives, as well as cultural norms that inhibit family communication about cancer diagnoses.

The investigators conclude that information regarding family history of cancer may not be as accurate an indicator of risk for foreign-born patients as it is for US-born patients. Dr. Orom suggests, "that some immigrants might not have a family history of cancer even though they have a genetic disposition for cancer, in part, because they are from countries in which people are more likely to die at a relatively young age of causes other than cancer, and are not exposed to the same degree of behavioral and environmental risk for the disease. In addition, due to under-diagnosis of cancer in many immigrants' countries of origin, lack of awareness of familial risk, and communication barriers in families, foreign-born patients may not be aware of their true family history of cancer." The authors note that failing to take into account that immigrants may have genetic risk without family history could lead to insufficiencies in cancer screening and prevention for immigrants and ethnic minorities.

This study was also co-authored by Drs. Michele Coté, Willie Underwood, and Ann Schwartz of the Barbara Anne Karmanos Institute and Hector González of Wayne State University.

Article: "Family History of Cancer: Is it an Accurate Indicator of Cancer Risk in the Immigrant Population?"
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