Study shows Hodgkin lymphoma survivors lack post-treatment screening for other cancers

EurekAlert

A population-based study of 2,071 Hodgkin lymphoma (HL) survivors over 15 years has discovered that while many survivors had multiple X-rays and CT scans years after treatment was finished, they often did not receive recommended cancer screening tests.

The study, available online ahead of print publication in the July issue of the American Cancer Society journal *Cancer* (www.interscience.wiley.com [1] DOI 10.1002/cncr.25053), followed the survivors for up to 15 years after their HL diagnosis by evaluating physician visits, imaging studies, and the use of routine and HL-specific cancer screening tests.

Survivors had CT scans at a rate three times greater than in the general population, even 10 to 15 years after their original diagnosis. "It is not clear why the CT scans were ordered, but they certainly did not appear to be an efficient way to detect relapse, particularly this long after treatment was finished," says principal investigator David Hodgson, a radiation oncologist at the Princess Margaret Hospital Cancer Program, University Health Network, and investigator at the Institute of Clinical Evaluative Sciences.

Most HL patients never experience a relapse. For those who do, they usually know something is wrong before their doctor does. It is uncommon to detect relapse with CT alone in a patient who is feeling well.

"For these patients, the telephone, not the CT scanner, is the most important technology," says Dr. Hodgson. "Oncologists need to advise their patients what symptoms should prompt them to seek medical attention and physicians have to be able to evaluate them in a timely way to decide if imaging is needed."

Despite frequent contact with both specialists and primary care providers, many survivors did not receive recommended cancer screening tests. Among those who met criteria for routine screening, 62.5% were not screened for colorectal cancer, 32.3% were not screened for breast cancer and 19.9% were not screened for cervical cancer (Pap test).

"Our results indicate that the optimal follow-up care did not happen, even though most patients had visits with both a primary care provider and an oncologist in years two through five. So there are opportunities to improve post-treatment surveillance for relapse and late effects."

Of particular concern is the finding that 87.1% of young women potentially at high risk of breast cancer because of prior radiation therapy were not screened. In the

past decade, clinical practice guidelines have recommended that some patients start breast cancer screening before the usual starting age.

Says Dr. Hodgson: "Most HL patients are cured, but they can be at risk many years later of developing secondary cancers or other late effects of their initial treatment. This is why quality of follow-up care post-treatment is so important. And, increasingly, it is also important for other survivors as cure rates for several forms of cancer improve."

SOURCE [2]

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http://www.mdtmag.com/news/2010/06/study-shows-hodgkin-lymphoma-survivors-lack-post-treatment-screening-other-cancers?qt-most_popular=0

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