

Joseph Akanuwe, Prof Niro Siriwardena, Dr Sharon Black, Prof. Sara Owen
Community and Health Research Unit, University of Lincoln

Introduction

- Cancer risk assessment tools are designed to predict cancer risk using risk factors and symptoms of individuals.
- These tools could prompt investigations and referral for specialist attention, leading to early diagnosis and treatment and a potential reduction in the high mortality of cancer.

Results

- We retrieved 481 papers from the initial database search. After sifting titles and abstracts,
- 72 full text papers remained, of which 48 studies were excluded because these did not meet the inclusion criteria.
- The remaining 24 studies were included in the review. These included: randomised controlled trials (2); cohorts (11), survey (2); case control (3); qualitative (3), critical reviews (1) and other unspecific designs (2).
- This review found limited evidence on: novel cancer risk assessment tools being used; perceptions of users and outcomes of using the tools.
- While there was some evidence pointing to the usefulness of cancer risk assessment tools, there was limited evidence on how best to communicate cancer risk to patients when using a cancer risk assessment tool.

Aims

- We aimed to scope the evidence relating to the use of cancer risk assessment tools for early detection of cancer in primary care.

Data extraction process

Six databases searched using specific search terms

481 papers from initial database search

48 studies excluded because they did not meet the inclusion criteria

72 papers after title and abstract sift

24 full-text articles analysed for eligibility

Methodology

- Using the framework proposed by Arksey and O'Malley, we conducted a systematic scoping review of the literature published in the English language from 2004 to 2015 to ensure relevance to current practice.
- Our search strategy included specific search terms which were used to search six electronic databases: Medline; CINAHL; Scopus; Cochrane; Science Direct and Psych INFO. A narrative approach was used to synthesis the papers identified.

Limitations

- Only studies conducted in the English language were selected for the review. Any relevant studies reported in languages other than English might have been excluded.
- No quality of assessment of studies

Conclusion

- The evidence available on the use of cancer risk assessment tools in primary care was limited.
- Further research is needed to explore how best cancer risk can be communicated to patients when using a cancer risk assessment tool in primary care consultations.