DEVELOPMENT AND VALIDATION OF A SIMPLE QUESTIONNAIRE FOR THE IDENTIFICATION OF HEREDITARY BREAST AND COLORECTAL CANCER IN PRIMARY CARE

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Background. A previous study in Porto Alegre has shown that a family history suggestive of these syndromes may be prevalent at the primary care level. Development of a simple instrument, easily applicable in primary care units, would be helpful in underserved communities in which identification and referral of high-risk individuals is difficult. Methods. A simple 7-question instrument about family history of breast, ovarian and colorectal cancer, FHS-7, was developed to screen for individuals with an increased risk for hereditary breast cancer syndromes. FHS-7 was applied to 9218 women during routine visits to primary care units. Two consecutive samples of 885 women and 910 women who answered positively to at least one question and negatively to all questions were included, respectively. The sensitivity, specificity, positive and negative predictive values were determined. Results. Of the women reporting a positive family history, 211 (23.8%) had a pedigree suggestive of a hereditary breast and/or breast and colorectal cancer syndrome. Using as cut-point one positive answer, the sensitivity and specificity of the instrument were 87.6% and 56.4%, respectively. Concordance between answers in two different applications was given by a intra-class correlation (ICC) of 0.84 for at least one positive answer. Temporal stability of the instrument was adequate (ICC = 0.65). Conclusions. A simple instrument for the identification of the most common hereditary breast cancer syndrome phenotypes, showing good specificity and temporal stability was developed and could be used as a screening tool in primary care to refer at-risk individuals for genetic evaluations.