



Comparative effectiveness of two outreach strategies for cervical cancer screening



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ABSTRACT

Objective. Test-specific reminder letters can improve cancer screening adherence. Little is known about the effectiveness of a reminder system that targets the whole person by including multiple screening recommendations per letter.

Methods. We compared the effectiveness of a Pap-specific reminder letter sent 27 months after a woman's last Pap, to a reminder letter that included up to seven preventive service recommendations sent before a woman's birthday ("birthday letter") on Pap smear adherence from a natural experiment occurring in routine clinical care. Participants included 82,016 women from Washington State who received 72,615 Pap-specific letters between 2003 and 2007 and 100,218 birthday letters between 2009 and 2012. We defined adherence as having a Pap test within a six month window around the Pap test due date. Using logistic regression, we calculated adjusted odds ratios (OR) for adherence with 95% confidence intervals (CI) following the birthday letter with 1–2 recommendations, 3–5 recommendations, and 6–7 recommendations compared to the Pap-specific letter. All analyses were stratified by whether a woman was up-to-date or overdue for screening at the time she received a letter.

Results. Adjusted ORs showed reduced adherence following the birthday letter compared with the Pap-specific letter for up-to-date women whether the letter had 1–2 recommendations (OR = 0.37, 95%CI = 0.36–0.39), 3–5 recommendations (OR = 0.44, 95%CI = 0.42–0.45), or 6–7 recommendations (OR = 0.36, 95%CI = 0.32–0.40). We noted no difference in Pap-test adherence between letter types for overdue women.

Conclusions. In conclusion, for women regularly adherent to screening, an annual birthday letter containing reminders for multiple preventive services was less effective at promoting cervical cancer screening compared with a Pap-specific letter.

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Background

Cervical cancer is highly preventable through regular and appropriate screening. In 2012, National Healthcare Effectiveness Data and Information Set (HEDIS) data demonstrated that between 65% and 75% of women ages 21–64 received a Pap exam in the past three years (Quality & Experience, 2013). Cervical cancer screening is both underused and overused (50% of eligible women are screened more frequently than recommended) (Coronado et al., 2013; Korenstein et al., 2012; Almeida et al., 2013). One explanation for under- and overuse of Pap testing may be the rapid evolution of cervical cancer screening guidelines over the past decade. These changes include narrower screening

ages (starting at an older age and ending at a younger age) and wider screening intervals (from annual to every 3–5 years) (Moyer, 2012; Anon, 2009), and may lead to confusion among women and providers about screening frequency.

Reminders are one of the most effective interventions for increasing and maintaining Pap test adherence (Everett et al., 2011). Studies have shown reminder letters increase adherence to screening for breast (Jean et al., 2005; Saywell et al., 2004; Romaire et al., 2012; Kaczorowski et al., 2009), colon (Cronin et al., 2013; van Roon et al., 2011), and cervical cancers (Virtanen et al., 2014; MacLaughlin et al., 2014; Forbes et al., 2002). Most previous studies of reminders have evaluated the effectiveness of a letter or phone call that targets a single preventive service. For example, a 55-year old woman might receive three separate reminder letters for breast, colon, and cervical cancer screenings with three different due dates. Reminders for these screenings may co-occur with other recommended prevention activities such as cholesterol screening or

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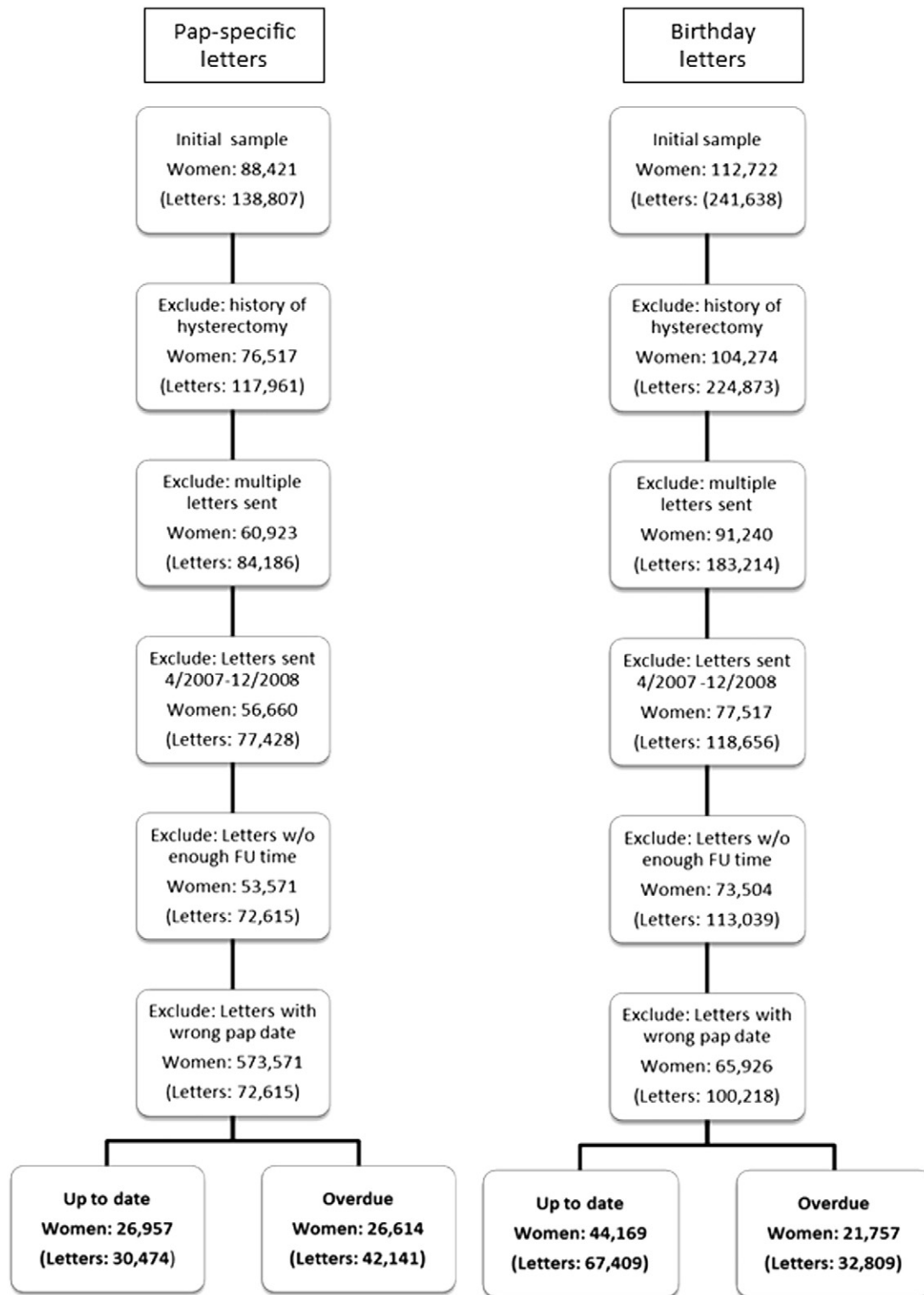


Fig. 1. Fig. 1 is a CONSORT-like diagram showing the number of women (and letters in parenthesis) in the initial sample and remaining after each exclusion criterion was applied. At the bottom of the figure are the final sample sizes of women (and letters) included by letter type and whether women were up-to-date or overdue for screening.

getting a flu shot, making it highly complex and costly for a provider or healthcare system to send individual reminders for each.

A consolidated reminder letter sent once per year that targets the whole person by including multiple preventive service recommendations might be more efficient and coordinated than sending multiple test-specific reminders. However, sending a single reminder letter annually would not be timed with due dates for preventive services. The

potential benefits and drawbacks of this type of reminder system are not well understood. We previously conducted an analysis comparing the effectiveness of a single reminder letter for multiple preventive services sent around the time of a person's birthday, to a reminder letter for mammography only sent right before a woman was due (Romaine et al., 2012). We found that the birthday letter resulted in poorer adherence to breast cancer screening compared with the mammogram-specific

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