

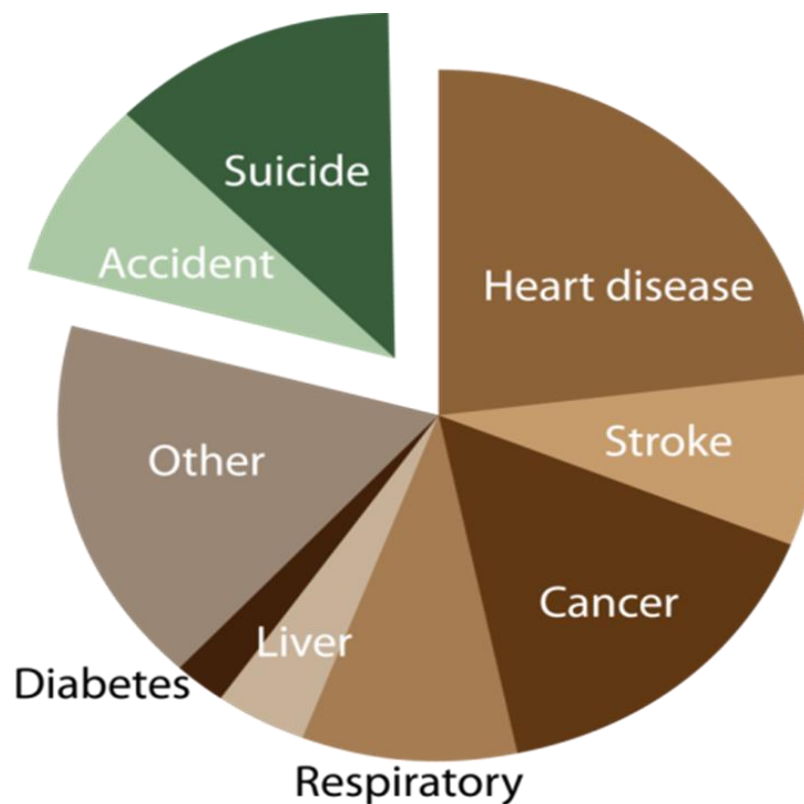


Talking to people living with severe mental illness about bowel cancer

Professor Lisa Brophy

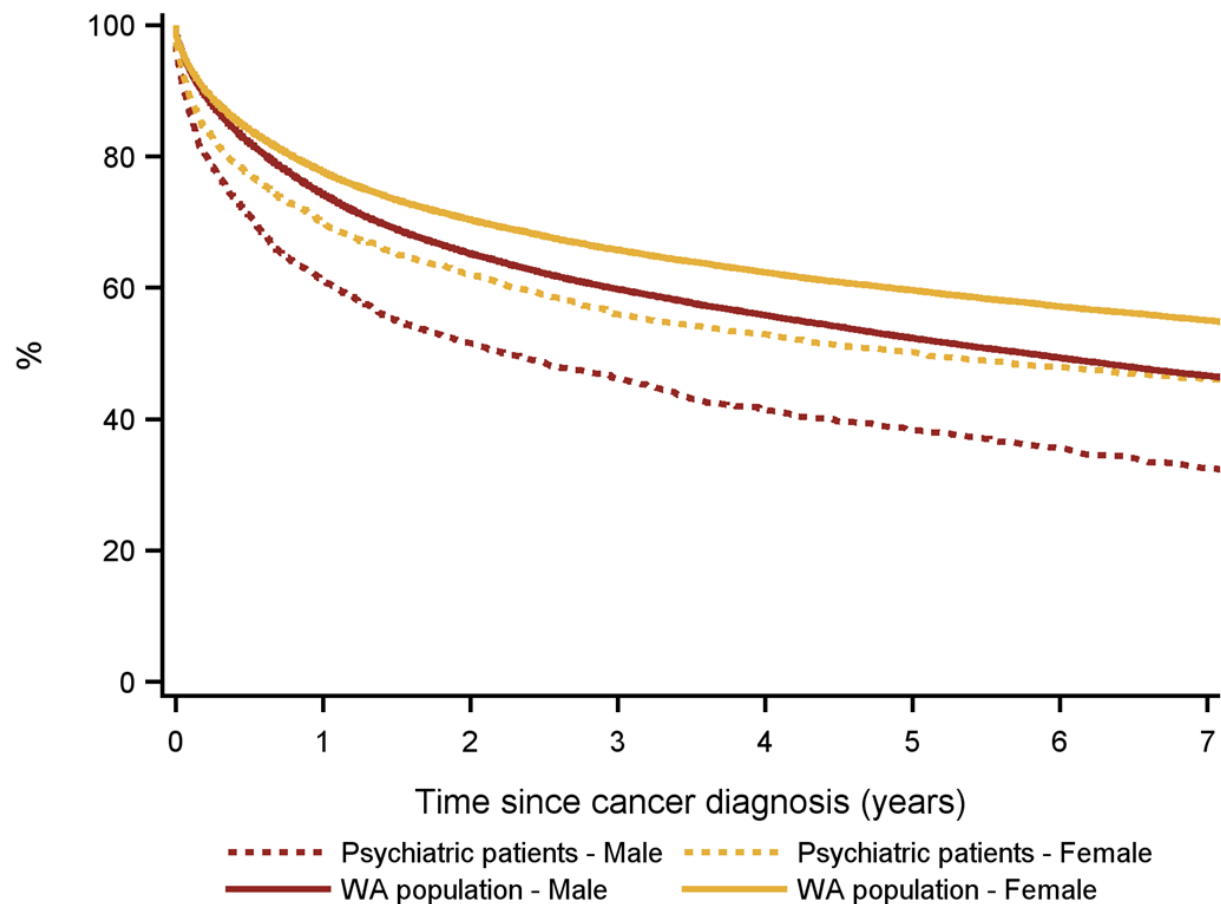
Equally Well Conference – March 2019

Causes of death



Hancock K, Lawrence D, Kisely S.
British Medical Journal 2013;346:f2539

Cancer survival



Kisely et al . Arch Gen Psychiatry. 2012 Dec 17.
[Epub] DOI:10.1001/jamapsychiatry.2013.278

Colorectal (or bowel) cancer

- Second only to lung cancer as a cause of cancer death in Australia
- the incidence of bowel cancer has nearly doubled over the last 30 years
- An estimated 17,500 people were diagnosed with bowel cancer in Australia in 2016
- Research has shown that cancer incidence rates in people with SMI are similar to those in the general population, but that cancer mortality is higher

Severe mental illness and cancer

- Possible explanations include:
 - Poor or low cancer screening participation rates in those with SMI;
 - delays in presentation or diagnosis leading to more advanced disease at diagnosis
 - sub-optimal post-diagnosis management

Our study

- What is the impact of the National Bowel Cancer Screening Program on colorectal cancer outcomes for people over the age of 50 with severe mental illness?
- The team:

Professor Steve Kisely
Doctor Susan Jordan

The University of Queensland
The Council of the Queensland
Institute of Medical Research
University of Western Australia

Associate Professor David
Lawrence

University of Sydney
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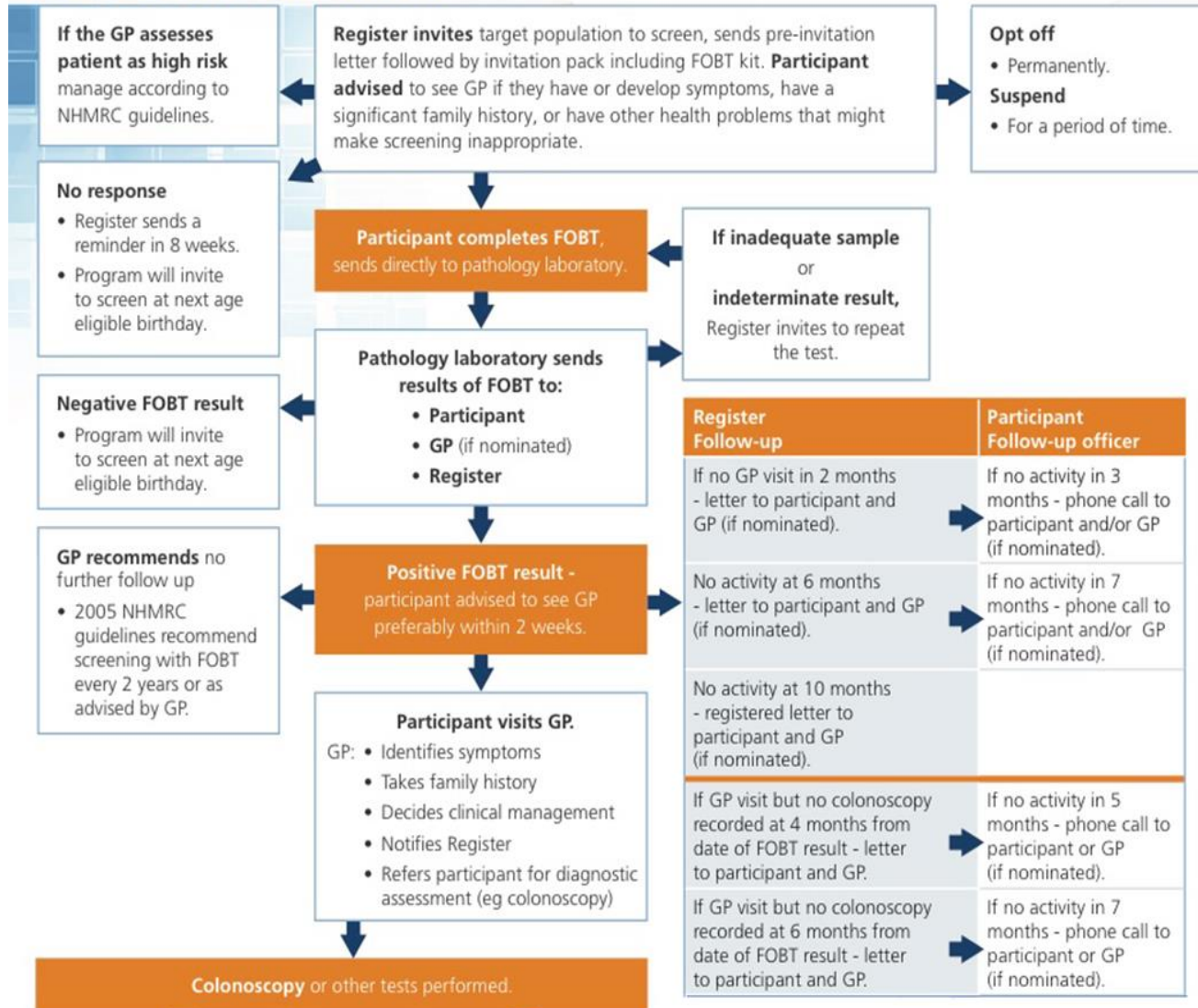
Associate Professor Grant Sara
Doctor Bradley Kendall
Professor Lisa Brophy

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Doctor Melinda Protani

The University of Queensland
The University of Queensland



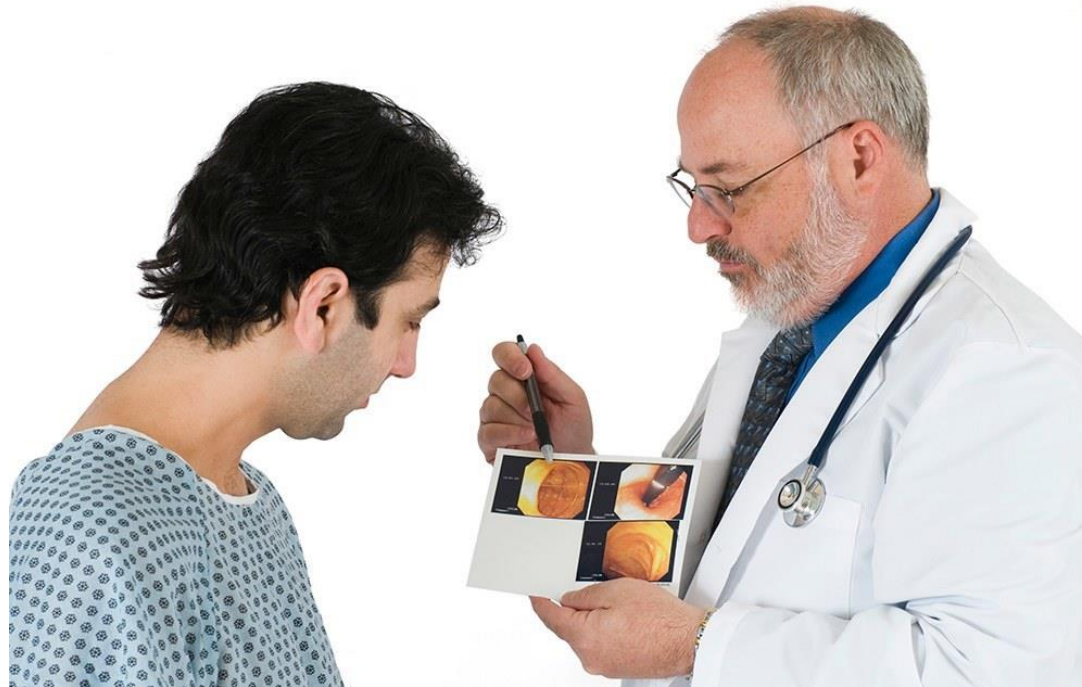
NATIONAL BOWELCANCER SCREENING PROGRAM



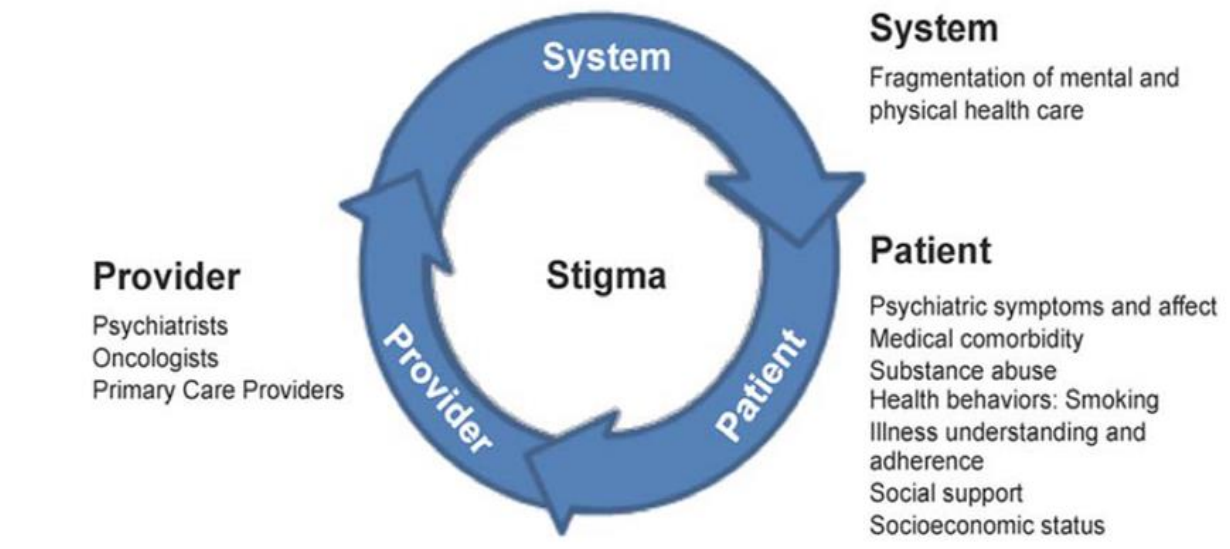
Barriers, challenges and enablers to screening ?



Barriers and challenges to getting the best care and treatment



Influencing Factors



Cancer Care



Outcomes



Irwin KE, et al. Cancer 2014;120:32

Our aims

- Among people eligible for the NBCSP (>50 years) we aim to:
 - Compare NBCSP participation rates between those with and without SMI
 - Determine whether people with SMI with a positive NBCSP screen have diagnostic colonoscopy as often as those from the general population
 - Calculate and compare CRC mortality rates in those with and without SMI Overall; and According to participation in the NBCSP .
 - Amongst NSW residents diagnosed with CRC assess whether those with SMI
 - Are diagnosed at a later cancer stage
 - Receive surgery, or chemo- & radio-therapy, as often as those without SMI after adjusting for cancer stage at presentation.
 - Experience any change in the above following the NBCSP

Our aims (cont'd)

- Investigate the experience of people living with SMI and colorectal cancer from NSW (and their peer supporters) in relation to the barriers and enablers to screening, diagnosis and optimal care
 - We will conduct a focus group/s in NSW – in the hope of ensuring this project hears the voices of people with lived experience
 - The consultation will be co-facilitated by a person with lived experience

Our hypotheses

1. With respect to the Australia's National Bowel Cancer Screening Program (NBCSP), people living with SMI:
 - a. Have lower participation rates in screening
 - b. After a positive FOBT are less likely to receive a subsequent colonoscopy
2. With respect to bowel cancer diagnosis, people with SMI:
 - a. Are more likely to present with more advanced cancer
 - b. Are less likely to receive specialised interventions such as resection or chemotherapy.
 - c. Disparities in mortality will be less for people with SMI who participate in the NBCSP

In conclusion

Our study will have the capacity to determine where along the colorectal (bowel) cancer care pathway, from screening to end of life care, disparities for people living with SMI are occurring.

This will enable targeted interventions to be implemented to improve outcomes.

The study will enable to voices of people either with experience of SMI and bowel cancer or people with lived experience in advocacy and peer support roles to be heard as experts through experience.

The study addresses the National Advisory Council on Mental Health's call for person-centred collaborative practice to address inequities in the physical health of people with mental illness, as well as Cancer Australia's focus on populations who experience poor & unwarranted variations in cancer outcomes.



Thank you

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