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Task Force Review Provides Promising Findings and Hard Questions About Efforts to Help Individuals Make Decisions About Health Screening

Screening procedures for **breast, cervical and colorectal cancer** are effective measures for detecting cancer at early stages and with appropriate treatment. However, for other cancer screening, the risks and benefits are not as clear. Specific strategies designed to improve informed decision making (IDM) around screening for cancer and other health risks are increasingly important because many people want to be involved in decisions about their health care, but much of the science related to cancer screening is complicated and difficult to communicate in a short office visit, some information is not accurate or user-friendly, and many persons at high risk don't have regular health care and must make screening decisions on their own.

A systematic review of published studies in the scientific literature covering population based interventions designed to improve informed decision making (IDM) for cancer screening, was conducted on behalf of the Task Force on Community Preventive Services by a team of experts including those from the Centers for Disease Control and Prevention (CDC) and National Cancer Institute (NCI). The Task Force review found that these approaches can improve knowledge about screening tests, and the risks and benefits associated with screening. However, there was insufficient evidence on the extent to which these interventions helped patients participate in decision making at the level they desire, result in decisions that are consistent with patient values and preferences, or improve screening rates themselves to allow the Task Force to recommend them for implementation. **It is important to note that a finding of insufficient evidence does not mean this set of interventions does not work, but that more research is needed to fully understand how the extensive health information available to the public can be harnessed to help people make appropriate decisions about whether to get screened, when to get screened, and how.**

Background on Informed Decision Making (IDM)

- In their review, the Task Force defined IDM to occur when an individual understand the nature of the disease or condition being addressed; understands what the clinical service entails, including risks, limitations, benefits, alternatives, and uncertainties; has considered his or her preferences as appropriate; has participated in decision making at a personally desirable level; and either makes a decision consistent with his or her preferences and values OR elects to defer a decision to a later time.
- IDM interventions include, but are not limited to, "decision aids" which are designed to help people make specific and deliberative choices among options (including electing not to have screening).
- IDM complements and supports shared decision making (SDM) which takes place within a clinical consultation but are different processes. SDM is a process in which both the patient and clinician share information, participate in the decision making process, and agree on a course of action. IDM can occur when an individual obtains and considers information about preventive services from any source, such as the Internet, without benefit of a consultation from a clinician. SDM is described fully in a [report from a working group of the U.S. Preventive Services Task Force](#)

Findings from the systematic review

- 10 studies met the Task Force inclusion criteria, with three of these studies providing data on more than one intervention arm. Therefore, for the purposes of the review, a total of 14 independent intervention arms were identified.
- There was generally consistent evidence that IDM interventions improved knowledge, beliefs, risk perceptions, or a combination of these (e.g knowledge about the disease, the test or the consequences of the test, accuracy of risk perceptions, or accuracy of beliefs).
- There was little or no evidence about whether IDM interventions resulted in participation in decision making at a level desired by individuals, result in decisions that are consistent with their values and preferences and whether

they affect screening rates, especially among high risk populations (e.g. older, non-white and low income). Further research is needed in these areas as well as on the presence and magnitude of barriers to and harms of IDM interventions and how they might be avoided.

What you can do with this finding

- Use the information from this review, along with resources from [Cancer Control PLANET](#), to find evidence based and research tested programs as well as local cancer control researchers with whom you are encouraged to work with in conducting additional research to address gaps in the evidence base.

Directions for future research

- What is the effect of IDM interventions on outcomes other than knowledge, beliefs, and perceptions of risk?.
- More high quality studies are needed that examine and report the impact of IDM interventions on individual's participation in decision making and whether this participation was at a level desired by the individual
- Develop methods that can be used to assess preferences in clinical encounters and to ensure patient decisions are congruent with individual preferences and values
- More research into cost and cost effectiveness or cost utility of IDM interventions
- More empirical work is needed to assess the impact of IDM among non-white, older and underserved populations
- More research is needed on whether IDM or SDM increases or decreases use of effective services

Publications:

American Journal of Preventive Medicine – [Am J Prev Med 2004; 26\(1\):67-90.](#).. A report on evidence and findings.

The Guide to Community Preventive Services (Community Guide) provides recommendations on population-based interventions to promote health and to prevent disease, injury, disability, and premature death, appropriate for use by communities and healthcare systems. For more information about the Community Guide (including links to publications and a variety of resources) see

www.thecommunityguide.org and for more information about the Task Force review of cancer prevention interventions see www.thecommunityguide.org/cancer/

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