Preparing for a Direct to Consumer Marketing Campaign for *BRCA1* and *BRCA2* Testing: A Three State Public Health Collaboration

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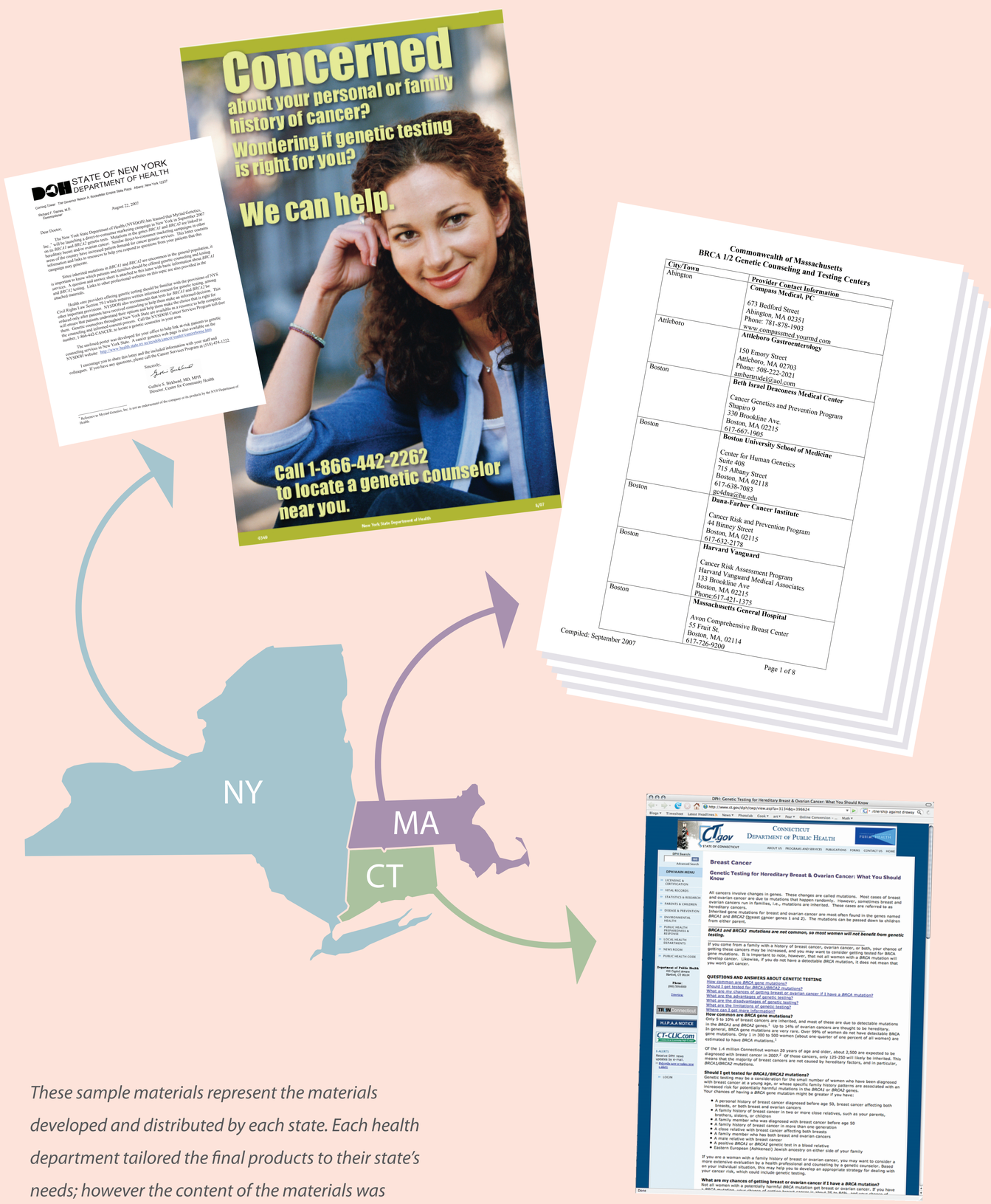
Background

The public's interest in genomics and its link to adult-onset disease is growing. Media sources frequently publicize this expanding field and direct-to-consumer (DTC) marketing campaigns for genetic tests have begun across the country. These campaigns aim to raise public awareness about the availability of tests that can identify genetic mutations that may increase an individual's risk for common, chronic disease. The public health community must be prepared with accurate, up to date and unbiased information for providers, the general public, and those truly at high risk. Additionally, health care clinicians need to be aware of the genetics resources in their community, such as genetic counseling services, so that their patients can make well-informed decisions.

The state health departments in New York, Connecticut and Massachusetts collaborated on a response to a DTC marketing campaign for *BRCA-1* and *BRCA-2* testing. The anticipated increase in interest in cancer genetic testing was seen as an opportunity to educate both the public and health care clinicians about indications for consideration of testing and other issues.

Three States: One Public Health Message



These sample materials represent the materials developed and distributed by each state. Each health department tailored the final products to their state's needs; however the content of the materials was based on the same template.

Indications for *BRCA1* and *BRCA2* testing

Genetics professionals in each state were consulted to provide an up-to-date and detailed list of indications for use in educational materials. This list reflects those chosen by at least one of the three states to be a reason to consider testing:

- A personal history of:
  - Breast cancer at a young age (younger than age 50) or ovarian cancer at any age
  - Bilateral breast cancer or two or more primary tumors of the breast
  - Breast and ovarian cancer (in the same individual)
  - Breast cancer in a male
  - Invasive breast cancer that is "triple negative" (negative for ER, PR & Her/2neu)
  - Eastern European (Ashkenazi) Jewish ancestry on either side of the family
- A maternal or paternal family history of:
  - Two or more individuals in the family (parent, child, sibling, grandparent, aunt/uncle) with breast and/or ovarian cancer
  - One or more close male relatives with breast cancer
  - Early onset breast or ovarian cancer (before age 50) in a close relative
  - Confirmed BRCA1 or BRCA2 mutation

Making Progress

- Over 20,000 physicians have been sent materials in all three states.
- Over 105 genetic counseling centers have registered contact information to their respective state health department.
- Over 75 New York State residents have called 1-866-442-2262 looking for a genetic counselor in their area.
- Over 2,000 people have accessed Connecticut's health department cancer genetics web page.
- Outside organizations, including the American College of Obstetrics and Gynecology Region II/NY, the MA Ovarian Cancer Awareness Coalition and the CT Medical Society, have incorporated selected materials into their own newsletter and/or website.

Moving Forward With a Common Goal

- A survey of genetic counselors is in development to assess referral patterns since 9/07 and to evaluate whether health department efforts have had significant impact.
- Funding for a survey of clinicians is being sought to assess the impact of the educational materials and whether referral patterns for genetic counseling or testing have changed.
- Connecticut will launch 2 new Behavioral Risk Factor Surveillance Survey (BRFSS) questions in 2008:
  - How would you describe your overall knowledge about genetic testing for breast and ovarian cancer?
  - Have you seen or heard an advertisement about a genetic test to determine a woman's risk for breast or ovarian cancer in the past 6 months?
- All three states are actively seeking funding to create or enhance their public health genomics infrastructure.

This effort is an important first step towards establishing public health planning in response to the expanding field of genomics. These three states came together in a short time frame and with limited resources to share ideas and help provide their communities with needed information.