Risky translation: The promise and pitfalls of discussing health risks with the public

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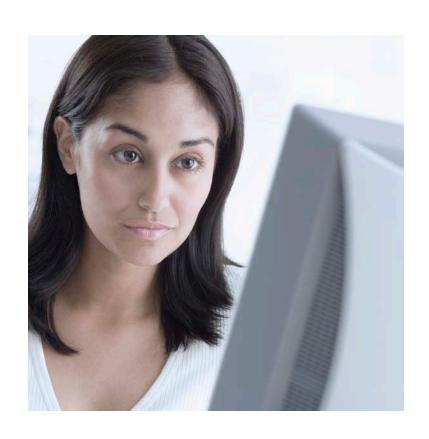
Translation is critical but difficult







What is risk?



Objective

RR

RRR

odds

OR

HR

NNT

NNH

AR

ARR

Attributable risk

What is risk?



Subjective
Danger
Hazard
Uncertainty
Certainty
All-or-nothing
Frightening
Severe

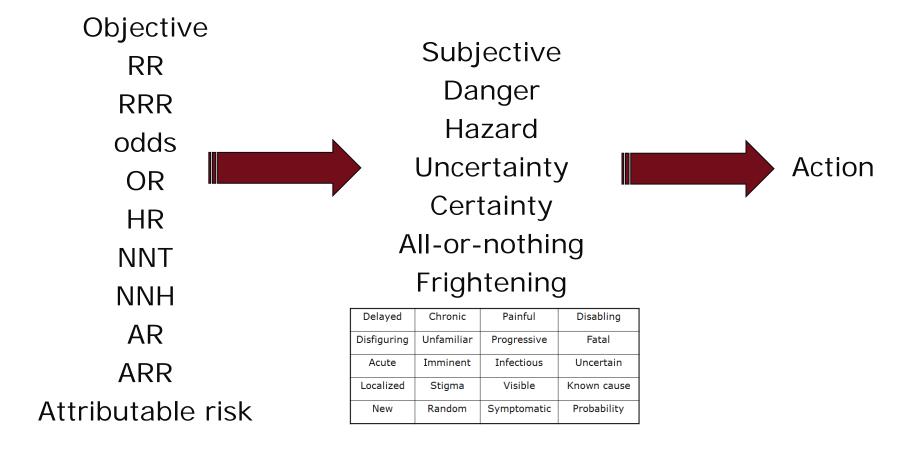
Han et al, *Health Expectations*, 2009 Holmberg, *Health, Risk & Society*, 2010 Reyna, *Medical Decision Making*, 2008 Slovic, *The Perception of Risk*, 2000

What is risk?

Delayed	Chronic	Painful	Disabling
Disfiguring	Unfamiliar	Progressive	Fatal
Acute	Imminent	Infectious	Uncertain
Localized	Stigma	Visible	Known cause
New	Random	Symptomatic	Probability

Slovic, *The Perception of Risk*, 2000 Weinstein, *Society of Behavioral Medicine*, 2003

The challenge



What does it mean and what should I do?



Applicability across multiple domains

Internet-based breast cancer risk assessment tool

Health economics of colorectal cancer

Risk Perceptions and Communication

Genetic basis of nicotine addiction

But wait, there's more!

Applicability across multiple domains

Internet-based breast cancer risk assessment tool

NIH NCATS #UL1TR000448 and the Barnes Jewish Hospital Foundation

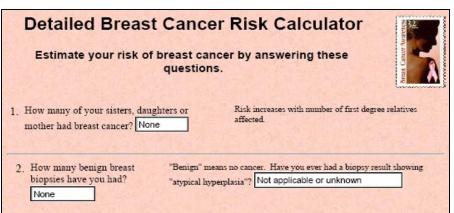
Health economics of colorectal cancer

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But wait, there's more!

Internet-based cancer risk assessment







Waters et al., Journal of Medical Internet Research, 2009 www.yourdiseaserisk.wustl.edu www.cancer.gov/bcrisktool/http://www.chiprehab.com/CVD/index.php www.halls.md/breast/risk.htm

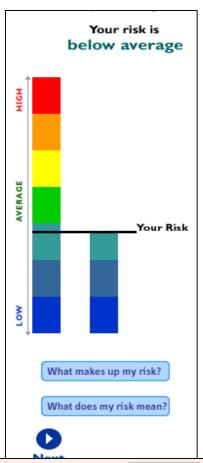
...but their output varies...

5 Year Risk

- > This woman (age 52) 3.7%
- > Average woman (age 52): 1.4%

Explanation

Based on the information provided (see below), the woman's estimated risk for developing invasive breast cancer over the next 5 years is 3.7% compared to a risk of 1.4% for a woman of the same age and race/ethnicity from the general U.S. population. This calculation also means that the woman's risk of NOT getting breast cancer over the next 5 years is 96.3%.



Calculate Results
using
NSABP model 2
click for Gail Model
and NSABP formula info.

Your chance of being diagnosed with breast cancer is <u>estimated</u> to be: 22.5% within lifetime (to age 90).

4.8% within 15.4% within 5 years, 20 years, 8.4% within 22.5% within 10 years, 30 years,

Your true risk could be somewhere within a range around these estimates.

Study aim and design

What is the effect of an internet-based breast cancer risk assessment tool on key social cognitive precursors of behavior change, when optimal risk communication strategies are used?

- Experimental design with 1 month follow-up
- 132 women with no prior cancer history (target N=200)

Breast Cancer Risk Factors Table

The table below shows the relative risk of breast cancer for many factors. The relative risk compares the risk of breast cancer for people who have the factor to those who do not. Factors are grouped based on the strength of the scientific evidence for each risk.

Established and probable have the strongest evidence behind them and are recognized
as linked (or not linked in some cases) to breast cancer.

Risk Categories

KISK Categ	ories					
Strong	Moderate	Weak	No increase or	Weak	Moderate	Strong
increase	increase	increase	decrease	decrease	decrease	decrease
Established and Probable Factors Generally recognized as linked (or not linked in some cases) to breast cancer.		Risk of breast cancer for people with the factor compared to those without the factor				
Age				Strong increase in risk		
Being fema	le			Strong increase in risk		
	BRCA2 gene			Strong increase in risk		
	ory of breast of					
	one immedi	,	member	Strong increase in risk		
One imm	ediate family	member		Moderate in	crease in risk	
	(benign brea	ast condition	n)			
 Atypical 				Strong incre	ease in risk	
 Usual 				Moderate in	crease in risk	
Personal history of cancer (including invasive breast cancer, DCIS, Hodgkin's disease and other cancers)			Strong increase in risk			
Childbearin	g					
 Not havin 	g children			Moderate increase in risk		
Having a first child after age 35			Moderate increase in risk			
Age at first period < 12 years			Weak increase in risk			
Age at men	opause > 55	years		Weak increase in risk		
Alcohol con	sumption (or	ne or more	drinks/day)			
 No daily 	multivitamin v	with folate		Weak increase in risk		
With daily multivitamin with folate			No increase in risk			
Ashkenazi Jewish heritage			Weak increase in risk			
Birth control pills (current or recent use only)			use only)	Weak increase in risk		
Being tall				Weak increase in risk		
Postmenopausal hormone use (current or recent use only)						
 Estrogen 	Estrogen only			Weak increase in risk		
Estrogen + progestin		Moderate increase in risk				
Breastfeeding			Weak decrease in risk			
Tamoxifen and raloxifene daily for 5 years of more			Strong decrease in risk			
(prescription drugs for those at higher risk)						
Weight gair						
 Premeno 	Premenopausal		No increase or decrease in risk			
Postmenopausal			Moderate increase in risk			
Physical activity						
Premenopausal			No increase or decrease in risk			
Postmenopausal			Weak decrease in risk			

Results: Breast Cancer

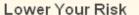


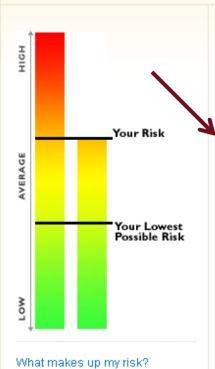
Your risk is Above Average compared to a typical woman your age.

Above average risk doesn't mean you'll definitely get breast cancer. It's just an estimate based on your risk factors, some of which you may not be able to change. If you have any concerns, talk to a doctor.

Screening Tip

Beginning at age 20, get screened regularly. More >>





What does my risk mean?

You have 3 things you can do to lower your risk.

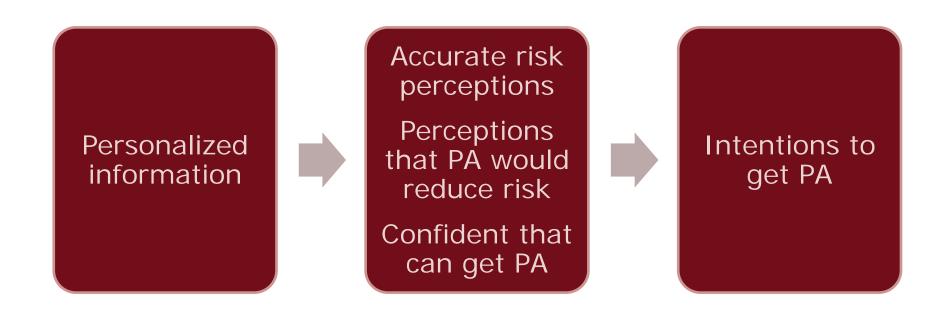
To see what your risk could be, click on a box and watch your risk drop.

- Avoid birth control pills. Ask a doctor about the risks and benefits.
- Drink less than 1 serving of alcohol a day.
- Increase your physical activity. Work towards at least 30 minutes a day.

Watch your weight. While your weight gain doesn't increase your risk right now, it's still important to keep your weight in check.

Breast cancer has few controllable risk factors. But it's still important to know your risk and how these factors relate to it. Choose a healthy lifestyle to protect against breast cancer as well as other diseases. And don't forget to follow the screening recommendations.

Results



But...



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NIH NCI #U54 CA155496 and the Barnes Jewish Hospital Foundation

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The solution

Capitalize on what we already know

Delayed	Chronic	Painful	Disabling
Disfiguring	Unfamiliar	Progressive	Fatal
Acute	Imminent	Infectious	Uncertain
Localized	Stigma	Visible	Known cause
New	Random	Symptomatic	Probability

The solution: Health economics?

Quality of life (QALYs, DALYs)

Delayed	Chronic	Painful	Disabling
Disfiguring	Unfamiliar	Progressive	Fatal
Acute	Imminent	Infectious	Uncertain
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The solution: Health economics?

Years of life lost (YLLs)

Delayed	Chronic	Painful	Disabling
Disfiguring	Unfamiliar	Progressive	Fatal
Acute	Imminent	Infectious	Uncertain
Localized	Stigma	Visible	Known cause
New	Random	Symptomatic	Probability

The solution: Health economics?

Cost

Delayed	Chronic	Painful	Disabling
Disfiguring	Unfamiliar	Progressive	Fatal
Acute	Imminent	Infectious	Uncertain
Localized	Stigma	Visible	Known cause
New	Random	Symptomatic	Probability

Study aim and design

Compare economic health indicators (Cost, Quality of Life, Life Years) to usual care (probability of developing CRC) in increasing social-cognitive precursors of physical activity.

- Experimental design
- General population (N=816, Survey Sampling International)

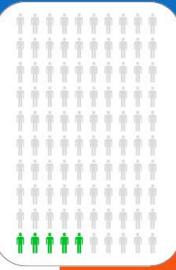
Mallory Leung calculations

National Health Interview Survey (NHIS), including mortality linked files

Medical Expenditure Panel Survey Household Component (MEPS-HC)

Usual care

What does colon cancer mean to you?



The average person has a 5% CHANCE of getting colon cancer at some point in their lifetime.

This means that 5 out of 100 people will get colon cancer.

30 minutes of physical activity, 5 days a week, can LOWER YOUR CHANCES of getting colon cancer!

Get active. Prevent colon cancer!

Learn what you can do: www.cdc.gov/physicalactivity/strategies





Cost—Negative frame

What does \$10,000 mean to you?



People who get colon cancer SPEND OVER \$10,000 in out-of-pocket medical costs.

30 minutes of physical activity, 5 days a week, can lower your chances of getting colon cancer and help you AVOID SPENDING OVER \$10,000!

Get active. Prevent colon cancer. Avoid spending money!

Learn what you can do: www.cdc.gov/physicalactivity/strategies



Years of life—Negative frame

What does losing 10 years of life mean to you?



People who get colon cancer LIVE 10 FEWER YEARS than people who do not get colon cancer.

30 minutes of physical activity, 5 days a week, can lower your chances of getting colon cancer and help you AVOID LOSING 10 YEARS OF LIFE!

Get active. Prevent colon cancer. Avoid losing years of your life!

Learn what you can do: www.cdc.gov/physicalactivity/strategies



Quality of life—Negative frame

What does 7 years of bad health mean to you?



People who get colon cancer live 7 MORE YEARS

IN BAD HEALTH than people who do not get colon cancer.

30 minutes of physical activity, 5 days a week, can lower your chances of getting colon cancer and help you AVOID LIVING 7 YEARS IN BAD HEALTH!

Get active. Prevent colon cancer. Avoid living in bad health!

Learn what you can do: www.cdc.gov/physicalactivity/strategies





Results

Health economic indicator

Affect/Emotions
Intentions

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ACS #MRSG-11-214-01-CBBP; NCI CPFP:

Barnes Jewish Hospital Foundation

But wait, there's more!



www.nbcnews.com/id/23919596/ns/health-addictions/t/cant-quit-smoking-blame-your-genes/

Several quantitative and qualitative studies

Experiment with collegeaged smokers

Revealing genetic etiology did not change beliefs.

Focus groups with sociodemographically diverse adult smokers

"Is this true?"... "Sounds like some B.S."

Smoking and Genetics

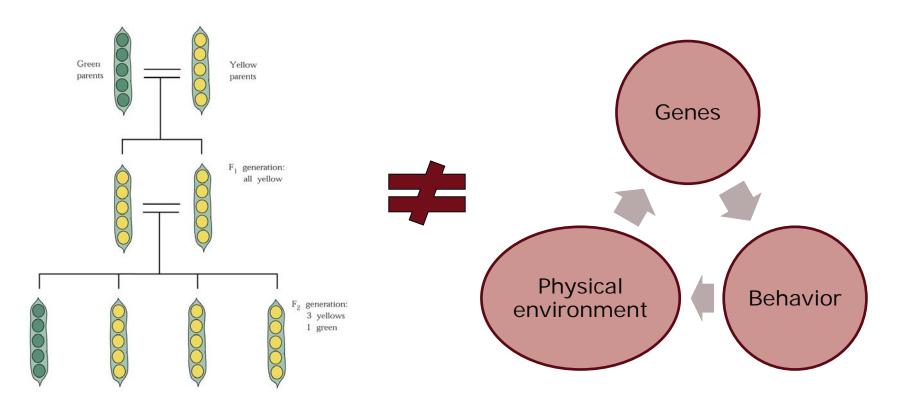
Intervention with sociodemographically diverse adult smokers

Intervening on causes of skepticism was ineffective.

Population-based survey of the correlates of multifactorial beliefs

MF beliefs associated with cancer screening.

Lay and expert beliefs are not concordant



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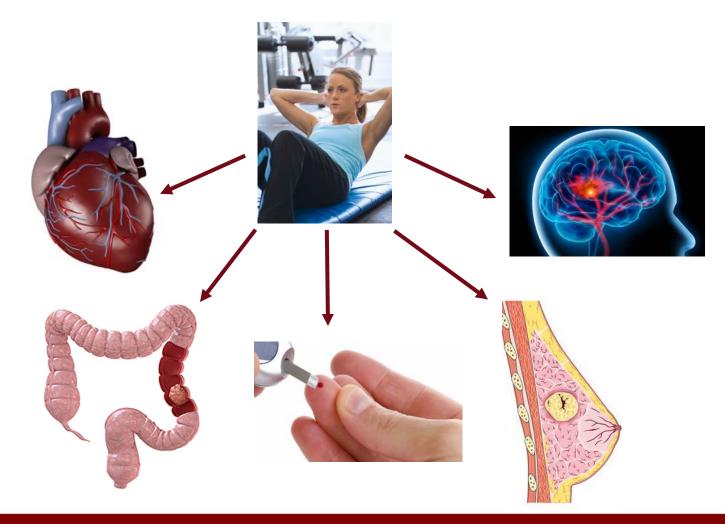
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NCI R01 CA190391

Traditional disease-focused communication



Wellness-focused communication



Promise in the Pitfalls



Thank you!

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Acknowledgements

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