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In addition, she added, "we don't know if those messages about family history and risk are resonating culturally with Latinos."

The data came from a 2005 telephone survey of more than 30,000 adults under 65 in California. They were asked how recently they had been screened for breast cancer (with mammography) and colon cancer (with a stool test, sigmoidoscopy or colonoscopy), as well as whether anyone in their family had ever had those cancers -- which would put them at higher

The researchers, led by Ninez Ponce of the University of California, Los Angeles, used U.S. Preventive Services Task Force guidelines at the time to determine if participants were getting screened according to recommendations.

That meant mammograms every two years for women starting at age 40, and colon cancer screening every one, five or ten years, depending on the method, for men and women 50 and older. (USPSTF guidelines now say breast cancer screening can be delayed until age 50 for average-risk women.)

In total, about 76 percent of women with no family history of breast cancer and 84 percent with a

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family history had been screened for the disease within the recommended window. Latinas with or without a family history of breast cancer were just as likely as white women to report recent screening

But for colon cancer, it was a different story. Fifty-one percent of all adults with no family history were screened according to guidelines, versus 71 percent who had a relative with colon cancer.

Compared with average-risk whites, Latinos with no family history of colon cancer were 26 percent less likely to say they had been screened. And those with a family history were 72 percent less likely than whites with a family history to get recommended screening.

In the U.S., Hispanics are no more likely than whites to be diagnosed with colon cancer or to die from it. The disease kills about 50,000 people each year nationwide.

"Our troubling finding was that knowledge of their family history of (colon cancer) did not close the Latino-white gap in (colon cancer) screening, but actually widened the disparity," the researchers report in Cancer.

That points to a need for better communication between doctors and Latin patients about family history and cancer risk, they say.

While language and cultural barriers may be keeping screening messages from getting across, Ponce and colleagues explain that some people may also postpone screening because of fear or denial, or underestimate their risk of cancer, even when a family member has been ill.

"There's a gap among people who have a known family history. We believe there's also a gap due to lack of knowledge about family history," Orom added in an interview with Reuters Health.

She said more research is needed to determine what's really behind lower rates of screening in Latinos before any changes can be made to address the disparity.

SOURCE: bit.ly/nu6FkZ Cancer, online August 25, 2011.

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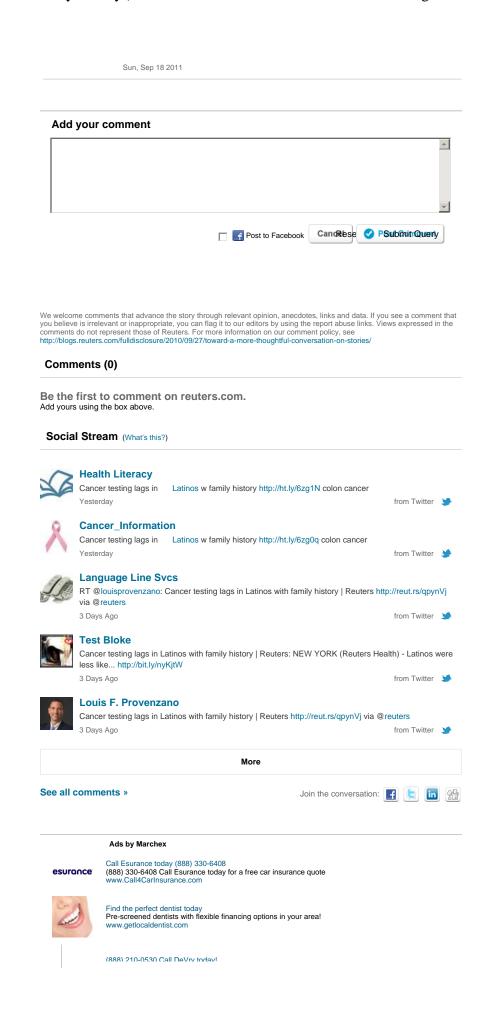
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