

# HEALTHY ARIZONA WORKSITES PROGRAM (HAWP) PRESENTS:

# CANCER AND GENETICS: IS CANCER A GENETIC DISEASE AND CAN TESTING HELP?





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#### HEALTHYAZWORKSITES.ORG



#### WEBINAR HOUSEKEEPING

#### **WELCOME**

All lines have been muted.

Please type any questions into the chat or Questions panel and we will do our best to answer them all at the end.

All handouts and a copy of the presentation slides are available in the Handouts panel.

Please complete the survey that will be emailed out after the presentation

A recording will be added to the library of HAWP webinars on our website within 48 hours.

Special thanks to our supporting partner Dignity Health for their generous support in making this webinar possible.



# PLEASE ENTER YOUR QUESTIONS IN THE CHAT.

# Cancer and Genetics: Is Cancer a Genetic Disease and Can Testing Help?

Kim Brussow, MS, CGC Certified Genetic Counselor November 19, 2020





#### **Objectives**

- What is an inherited predisposition to cancer?
- What to expect from genetic counseling and testing?
- Who is appropriate for genetic counseling and testing?
- How might genetic testing alter cancer screenings or treatment?
- Discuss benefits and risks of genetic testing

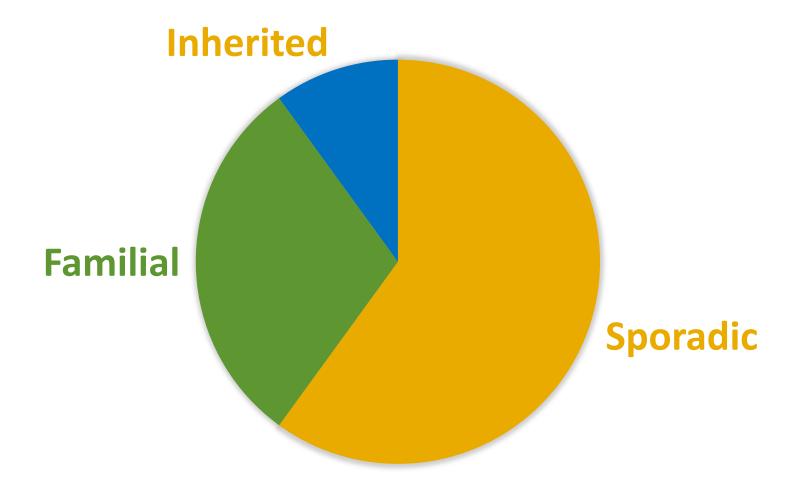


#### **Cancer Risk Factors**





#### Cancer and Inheritance





#### What is an inherited predisposition to cancer?

- Increased risk to develop certain types of cancer due to a change (or mutation) in the genetic code
- Mutation can be passed on from either parent
- Can be passed on to either sons or daughters
- Types of cancers in family can provide clues





#### When to suspect an inherited predisposition to cancer

- Early age at diagnosis
- Multiple family members with the same type of cancer
- Multiple cancers in one individual
- Specific types of cancers clustering in family
- Ancestry
- Certain types of cancer:
  - Ovarian cancer
  - Triple negative breast cancer
  - Pancreatic cancer

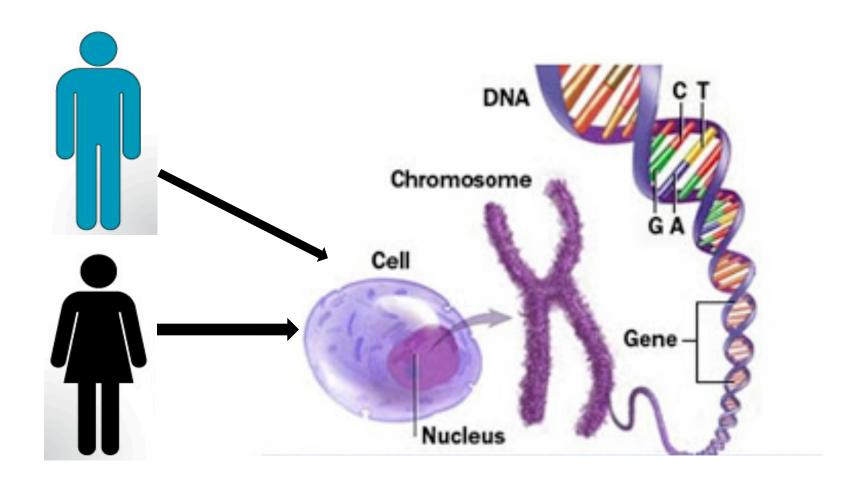


## Who should have genetic counseling/testing?

Individual with Cancer	Multiple Cases in the Family	Young R (≤ 45/50 yr at diagnosis)	Diagnosis at Any Age
Colorectal	✓	✓	
🙏 Colon Polyps	✓		✓10 or More Polyps
Breast	✓	✓	✓ Male Breast Cancer
Ovarian	✓		✓
Endometrial	✓	✓	
A Gastric	✓	✓	
Pancreatic	✓	✓	✓
Melanoma	✓	✓	
Prostate	✓		✓ Metastatic
Kidney	✓	✓	



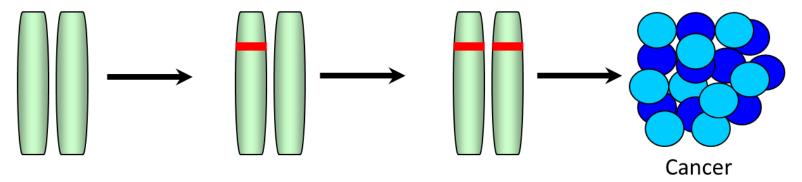
#### Genetics 101



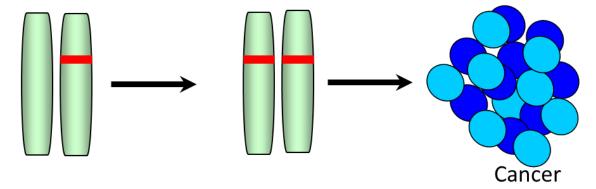


## **Cancer Development**

#### **Sporadic Cancer**

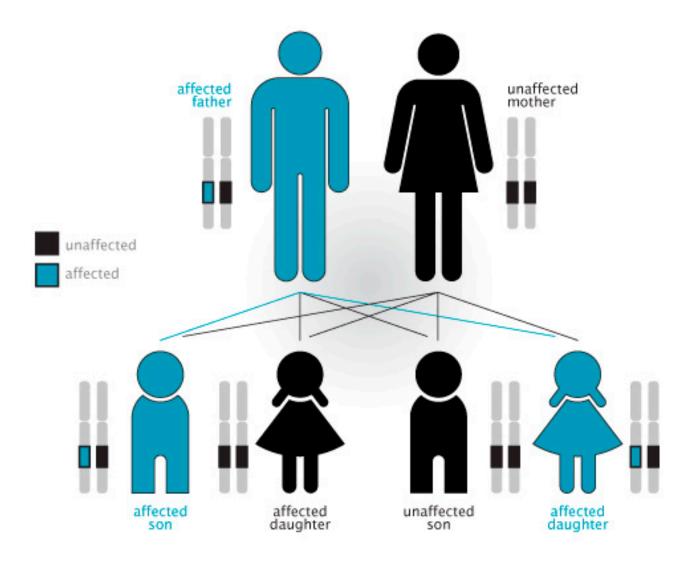


#### **Hereditary Cancer**





#### **Autosomal Dominant Inheritance**





#### Possible Genetic Test Results

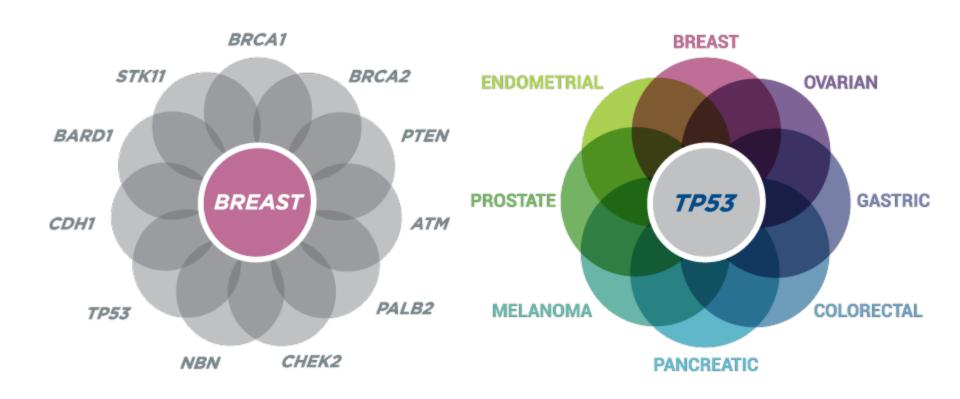
Positive

Negative

Variant of Uncertain Significance



## Relationships of Genes and Types of Cancers





#### What to Expect with Pre-Test Genetic Counseling

- Collection of detailed, three-generation family history
- Evaluate and discuss patient's risk of developing cancer and/or risk of inherited predisposition to cancer
- Review possible genetic test results, limitations of genetic testing, implications of genetic test results for the patient and their family members
- Discuss insurance considerations/coverage
- Discuss risks, benefits and limitations of genetic testing with patient to help facilitate informed consent

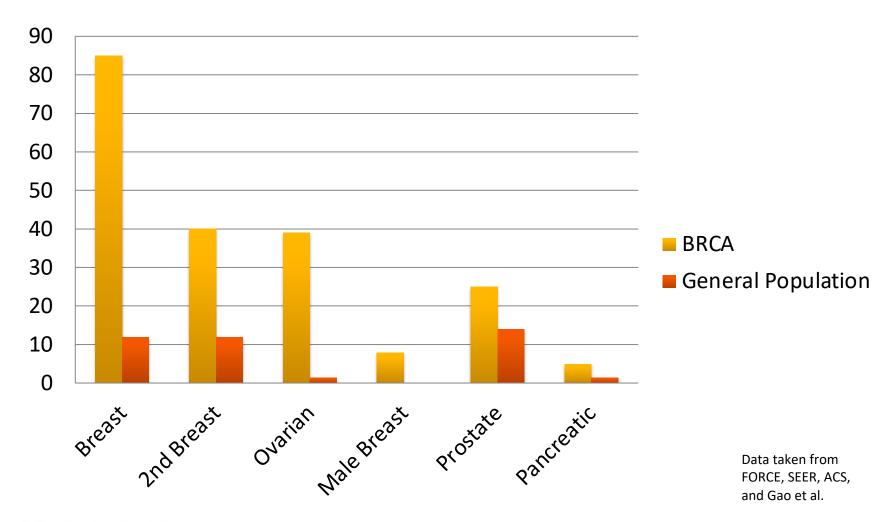


### What to Expect with Post-Test Genetic Counseling

- Reviewing significance and impact of the results to patient and family
- Test implications, including (as appropriate) management, risk reduction, screening options, prevention methods, lifestyle modifications, implications for relatives, referral to clinical trials and support services
- Emotional impact of results and referrals for those who need additional psychosocial support
- Dissemination plans, such as who should receive copies of results and how to discuss the results with relatives



# Hereditary Breast and Ovarian Cancer Syndrome (HBOC) *BRCA1* & *BRCA2*



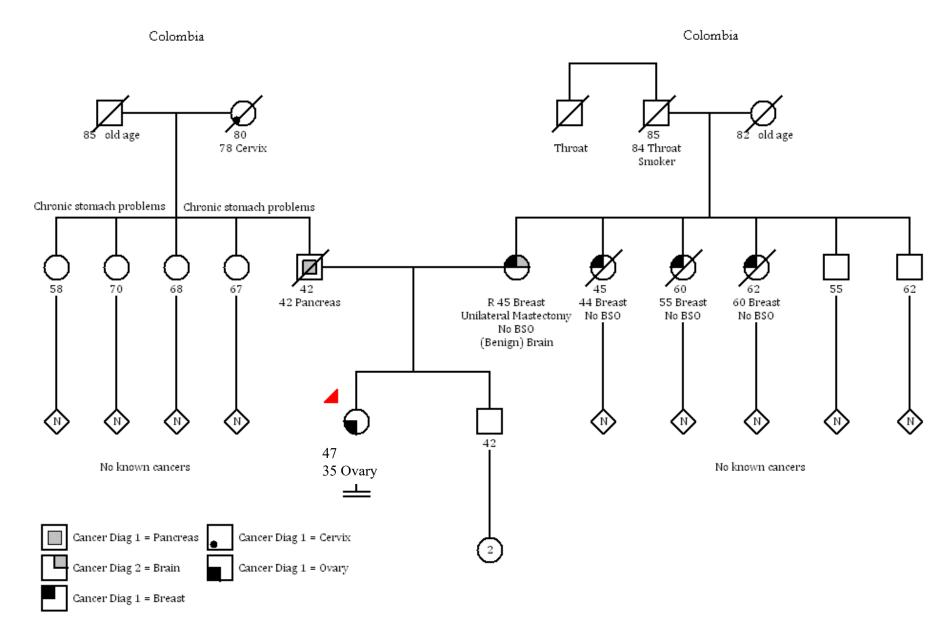


#### Case Example: Jane

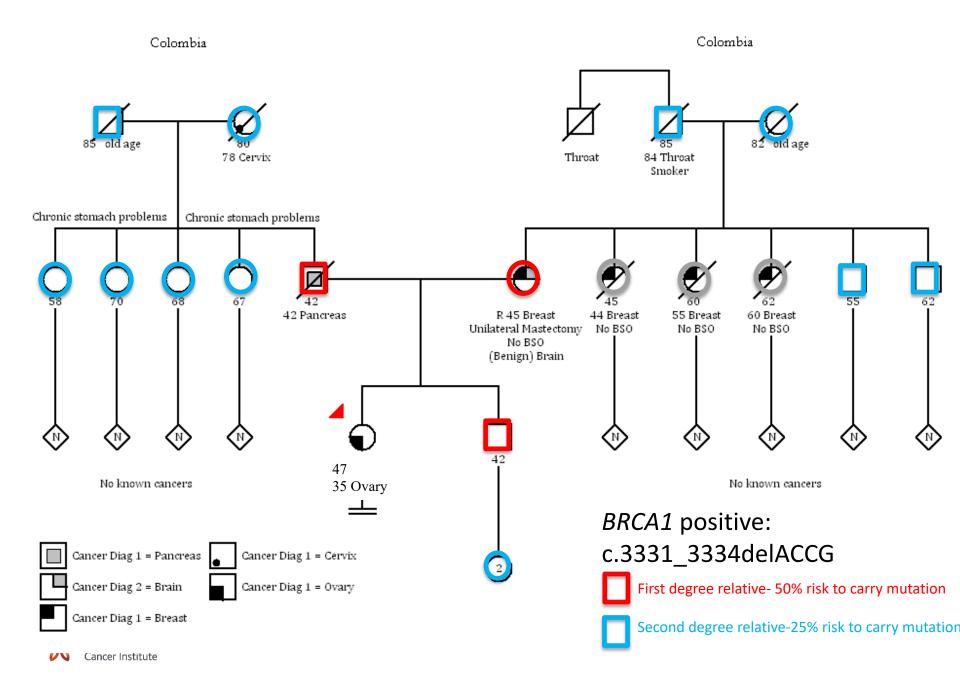
- 47 year old female
- Considering breast reduction
- Breast surgeon noted:
  - Personal history of ovarian cancer, 35
  - Family history of breast cancer
- Prior to scheduling surgery, Jane sent for genetic counseling
  - Clarify risks to determine best surgery
  - Considering: reduction vs mastectomy











#### Case Example: Jane

- BRCA1 management can consist of:
  - Breast Cancer Management:
    - Annual mammograms and breast MRI beginning at 25
    - Consider a prophylactic mastectomy
    - Consider chemoprevention
  - Ovarian Cancer Management
    - Recommend ovary removal once child bearing complete
  - Pancreatic Cancer Management
    - Consider pancreatic cancer screening (specialized MRI)





#### Advances in Genetic Testing

- Multi Gene Panels
  - 'Clinically actionable' vs "Kitchen Sink"
  - Longer discussion of risks, benefits and limitations
    - Higher rate of inconclusive results
    - What to do with the information?
  - Results may not influence medical management due to lack of available guidelines
- Can be especially useful if considering multiple predisposition syndromes
- More recently have become standard of care

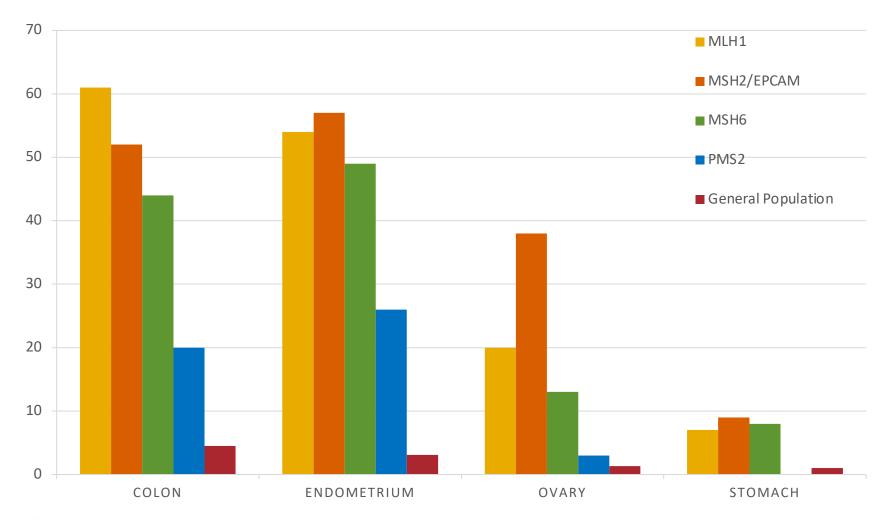


## Pros and Cons of Panel Genetic Testing

Benefits	Risks	Limitations
More information	•More information	• Is testing indicated?
<ul> <li>May find out other cancer risks are increased</li> </ul>	<ul> <li>May not want to know about other cancer risks</li> </ul>	<ul><li>Who is the best person to test?</li></ul>
Benefit from increased screening	<ul> <li>May not be interested in pursuing screening/surgery</li> </ul>	<ul> <li>New tests will become available in the future</li> </ul>
<ul> <li>Consider risk reducing surgery</li> </ul>	<ul> <li>Results may cause stress, concern for family</li> </ul>	<ul> <li>For some genes, more information is needed about cancer risk</li> </ul>
<ul> <li>Provide information for family</li> </ul>	<ul> <li>Family may not want to know</li> </ul>	Uncertain results



## Lynch Syndrome Cancer Risks

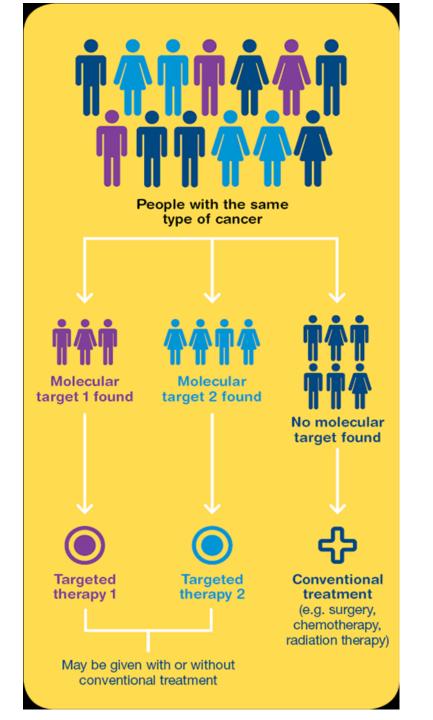




#### Somatic Genetic Testing to Guide Treatment

- Somatic mutations are changes that happen after a person is conceived
  - Not passed down to children
- Done after someone has been diagnosed with cancer
  - Information on an exact diagnosis
  - Information about the prognosis of the cancer
  - If treatments are available for cancer with that specific mutation
- Sometimes, this testing may detect a mutation in the tumor that is also inherited, resulting in additional genetic testing







# GINA: Genetic Information Nondiscrimination Act of 2008

- Title I: Prohibits genetic discrimination in health insurance.
  - Makes it illegal for health insurance providers to use or require genetic information to make decisions about a person's insurance eligibility or
  - Went into effect on May 21, 2009.
- Title II: Prohibits genetic discrimination in employment.
  - Makes it illegal for employers to use a person's genetic information when making decisions about hiring, promotion, and several other terms of employment.
  - Went into effect on November 21, 2009.



#### Resources

- National Cancer Institute:
  - www.cancer.gov
- National Institute of Health: Genetics Home Reference
  - www.ghr.nlm.nih.gov/handbook/mutationsanddisorders/predisposition
- Genetic Information Nondiscrimination Act
  - www.ginahelp.org
- Facing Hereditary Cancer Empowered
  - www.facingourrisk.org/



#### Thank You!

For more information about cancer prevention, treatment, screening, or to request a speaker for your worksite on any cancer-related topic,

call: 602.699.3366







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# THANK YOU FOR WATCHING!