

Increasing Cancer Screening: Client Reminders - Cervical Cancer

Summary Evidence Table - Studies From the Updated Search Period

Study	Location Intervention Comparison	Study population description Sample size	Effect measure	Reported baseline	Reported effect	Value used in summary [95%CI]	Follow- up time
<p>Author (year): Crawford (2005)</p> <p>Study Period: 2002 - 2003</p> <p>Design Suitability: Greatest</p> <p>Study Design: Other design with concurrent comparison</p> <p>Outcome Measurement: Completed Screening Pap Test</p> <p>Administrative data</p>	<p>Location: US, Eastern Region</p> <p>CR: Automated interactive voice reminder was used in a series of prompts reminding patients to have one of three specified services (breast and cervical cancer screening, or influenza immunization.</p> <p>Comparison: No intervention</p>	<p>Study Population: Women aged 21 - 64 years old.</p> <p>Sample Size: n= 10,416</p>	<p>Absolute change in completed screening (pap- test)</p>	<p>NR</p>	<p>I: 18.2%</p> <p>C:15.4%</p>	<p>2.8 pct pts 95% CI:[1.3, 4.3] (p<0.001)</p>	<p>5 - 9 months</p>

Study	Location Intervention Comparison	Study population description Sample size	Effect measure	Reported baseline	Reported effect	Value used in summary [95%CI]	Follow- up time
<p>Author (year): de Jonge (2007)</p> <p>Study Period: 2001 – 2002</p> <p>Design Suitability: Greatest</p> <p>Study Design: other study with concurrent comparison</p> <p>Outcome Measurement: Completed Screening Pap-test Record Review</p>	<p>Location: Belgium, Flanders</p> <p>1 intervention Arm</p> <p>Intervention (CR): A standard invitation letter which stated the reason for its writing and a brief description of the test and its purpose. The invitation was considered a reminder because its purpose was to inform women who were overdue for a pap smear (hadn't received a pap smear in 30 months). The patients were invited to call and schedule an appointment with a physician of their choice.</p> <p>Comparison: No invitation</p>	<p>Study Population: A 20 percent random sample of the total elective population of women ages 25 – 64 years that were identified through a population registry in the Lumbar Province of Flanders Belgium. They had had no pap smear screening for 30 months.</p> <p>Sample Size: I: 43,523 C: 44,131</p>	Absolute change in completed screening	NR (all without a PAP test in 30 months)	I: 23.7% C: 21.9%	+1.8 pct pts 95% CI: [1.2, 2.4]	12 months
<p>Author (year): Eaker (2004)</p> <p>Study Period: 2001</p> <p>Design Suitability: Greatest</p>	<p>Location: Sweden, Uppsala Province</p> <p>3 successive interventions</p> <p>SM (Modified Invitation) vs. usual care</p>	<p>Study Population: Women ages 25 -59 years who resided in Uppsala County in Sweden, had not registered for a pap smear in 3 years and were invited to</p>	Absolute change in completed screening	NR (all had no PAP test in 3 yrs)	Letter Reminder vs. No reminder I: 15.5% C: 6.3% Phone reminder vs. No reminder	+9.2 pct pts 95% CI: 7.9, 10.5 +31.4 pct pts	2 months

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<p>Study Design: iRCT</p> <p>Outcome Measurement: Completed Screening Pap-test Record Review</p>	<p>Sent a <u>brochure</u> with the standard invitation that contained a brief description of the purpose of a pap smear, whom it is for, how it is taken, how to schedule an appointment and that the results are sent via classified mail.</p> <p>CR (Letter) vs. no CR Same as the standard invitation, but also included information that the woman had received a prior invitation and that the current letter served as a reminder. "Reminder" was place prominently in the heading of the document</p> <p>CR (Phone) vs. no CR Women were called by two female professional research assistants who gave a short description of the Pap smear and offered to schedule an appointment for the women during the call</p> <p><u>Comparison</u> Received the standard invitation but not the respective intervention.</p>	<p>participate in an organized screening program using a standard invitation letter with and without additional information.</p> <p>Sample size: Modified invitation: n = 6100 Standard invite: n=6140 Print CR: n=4476 No reminder: n=4477 Phone CR: n=940 No phone CR:n= 980</p>			<p>I:41.4% C:10.0%</p>	<p>95% CI: 26.9, 35.9</p>	<p>1 month</p>

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<p>Author (year): Morrell (2005)</p> <p>Study Period: 2002 – 2003</p> <p>Design Suitability: Greatest</p> <p>Study Design: iRCT</p> <p>Outcome Measurement: completed Screening Pap-test</p> <p>Record Review</p>	<p>Location: Australia</p> <p>CR: Personally addressed letters mailed to the intervention group to remind women that they are overdue and discussing benefits of regular screening. Sent to women with no PAP within 4 years.</p> <p>Comparison: Usual care (including reminder for women with no PAP in 27 months)</p>	<p>Study Population: All women aged 20 – 69 years who were overdue for pap screening who were part of the NSW pap test register. They had an intact cervix, had previously been screened, but had not had a screening test in 48 months.</p> <p>Sample Size: n = 89,699</p> <p>I: 59,780</p> <p>C: 29,919</p>	<p>Absolute change in completed pap screening</p>	<p>NR (all with no PAP in 48 months)</p>	<p>I: 4.4%</p> <p>C: 2.9%</p>	<p>1.5 pct pts 95% CI: [1.2, 2.4] (p<0.05)</p>	<p>90 days</p>
<p>Author (year): Ruffin (2004)</p> <p>Study Period: 1994 – 1998</p> <p>Design Suitability: Greatest</p> <p>Study Design: gRCT</p> <p>Quality of execution: Fair (4 limitations)</p>	<p>Location: US, Michigan</p> <p>CR: Provided patients with their screening history and cues to future screening, including cancer screening guide with recommendations for their practice. Wallet-sized. MD could mark the most recent tests on it. Guides unique to each practice.</p> <p>PR: Provided patient's screening history and current screening</p>	<p>Study Population: Patients aged 50+, no prior cancer, seen 2+ times in prior 2 yrs.</p> <p>Practice: non-specialty care, served adults, not providing primarily acute or urgent care, didn't exclude pts because of older age or race, saw more than 10 patients per day, at least 50% of MDs agreed to participate.</p> <p>Sample Size:</p>	<p>Incremental effect of client reminder over PAF</p> <p>Incremental effect of client reminder over PR + PAF</p>	<p>2. 66%</p> <p>4. 63%</p> <p>1. 71%</p> <p>3. 55%</p>	<p>2. 59.0%</p> <p>4. 59.5%</p> <p>1. 61.5%</p> <p>3. 50.5%</p>	<p>2 vs. 4: -3.5 pct pts 3 vs. 1: 5 pct pt</p>	<p>36 months</p>

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<p>Outcome Measurement: Completed Screening Pap-test Record Review</p>	<p>recommendations. Specific intervention was unique to each practice. Most common was flow sheet with cues.</p> <p>PAF: Each practice met with investigators and reviewed baseline chart audits.</p> <ol style="list-style-type: none"> 1. PR + PAF 2. CR + PAF 3. PR + CR + PAF 4. Comparison: Usual Care + PAF 	<p>Practices n = 22</p>					

Note this table does not include evidence from the following study:

Byrnes P, McGoldrick C, Crawford M, Peers M. Cervical screening in general practice: strategies for improving participation. *Aust Fam Physician* 2007;36(3):183–92.