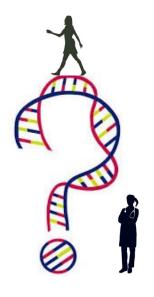
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8th Lynch Syndrome Education Night September 25, 2019 Mount Sinai Hospital



Getting the best care from your primary care provider

- General tips about working with your primary care provider
- What's unique about Lynch syndrome?
- How to handle some situations that may have happened to you





- 1. Set an agenda
 - Create a list of topics you want to address
 - Introduce them at the start of the visit
 - Prioritize
 - Ask the most important one first
 - "I have some medical problems, fears or worries I'd like to discuss"
 - Visit is only 10-15 min





2. Be honest about your worries and concerns

- Providing detailed information helps your primary care provider get the full picture of your overall well-being and factors that might contribute to your health
- Might include things about lifestyle, relationships at home or work
- It's okay to say "I'm not sure you really heard how concerned I am about this"
 - Gives your provider a chance to revisit the issue more deeply and/or explain their reason for reassuring you



3. Ask questions

- Be sure you understand repeat back, revisit the issue, ask them to draw a picture
- Write down information
- Consider bringing a friend or family member with you
- Learn how to access your medical records
- Remember that nurses and pharmacists and dieticians are also good sources of information





- 4. Work together with your primary care provider
 - Partner with your provider about investigations, treatments for the best outcome
 - Share your worries about side effects, ask questions about other options
 - If you need more time to talk about something, tell your provider perhaps see if you can schedule another appointment to continue your talk
 - Go into the appointment expecting that your primary care provider is going to help you



- Have a record of your health history
- Make a list of all your medications (strength, how often)
 - Include vitamins and supplements

Bring them with you to every medical appointment



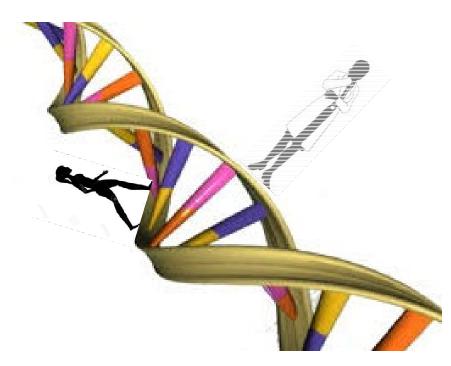


Lynch syndrome

- What's the same about Lynch Syndrome?
 - Primary care provider has a vital role
 - Making appropriate referrals to specialists
 - Coordinating care
 - Assisting you to obtain the support you need
 - Recommending other preventive care strategies (screening, immunization)
 - What's different about Lynch Syndrome?
 - Rare
 - Many patients have spent many hours studying the medical literature
 - compelled to become experts



Scenarios you may have faced...





Scenario 1: You'd like a screening urine test every 6 months – your primary care provider refuses

- Primary care providers make decisions based on medical training, experience and knowledge/evidence
- May seem unfair/arbitrary





Screening recommendations

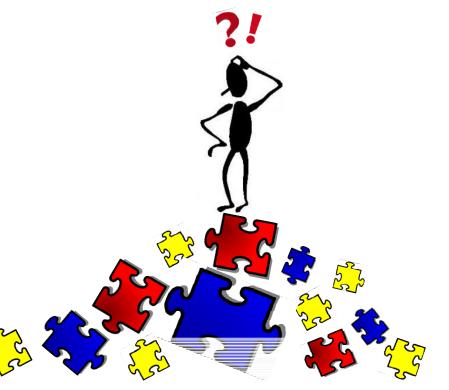
	Urinary tract cancers (renal pelvis, ureter, bladder)	For MSH2 positive families and those with familial clustering: Consider: Non- invasive: Urine cytology and microhematuria or Invasive: Cystoscopy - consult uro- oncologist	Annually (using 2 separate samples)	Begin at age 35 (or dependent on age of onset in the family)	Evidence is lacking - balance of benefits and harms cannot be determined
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Remember

- More tests not always better
- One test can lead to another anxiety, discomfort, infection, allergy
- Limited health care \$





Scenario 2: You have a symptom that might be associated with LS but your provider says "it is nothing to worry about"

 Primary care providers may not have knowledge of Lynch Syndrome and its associated cancers

irself

- You need to be an expert on your own condition
- Have an informative discussion that certain cancers are associated with Lynch Syndrome
- Express your worries and that you would like testing and/or referral





What to do?

Book the topte Costing v

If they still decline...

Remember

- Most primary care providers want to help with your care





Endometrium	Patient awareness of gyn. cancer symptoms so they can be investigated thoroughly Prophylactic TAH-BSO to be discussed after child-bearing is complete			Strongly recommended
	Pelvic and transvaginal ultrasound Endometrial biopsy	Annually	Begin at age 30-35 (or 10 years younger than any endometrial ca < age 35 in the family)	Evidence is lacking, the balance of benefits and harms have not been determined (Offer in research setting)



Scenario 3: You'd like a second opinion – your primary care provider refuses

 Physicians/Nurse Practitioners are gatekeepers – need a referral to see a specialist

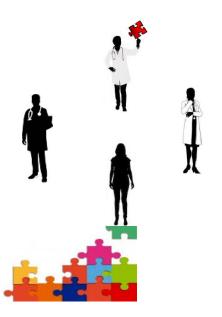


- You feel your request is reasonable, why do they think a second opinion isn't necessary
- Have a dialogue your provider may have good reasons



Remember

- If you reach a standoff perhaps not the right primary care provider
- Consider:
 - Walk-in clinic
 - Health Care Connect (1-800-445-1822)





Scenario 4: You'd like your provider's opinion about a complementary medicine you are taking to prevent cancer

Complementary and Alternative medicines

- a group of diverse medical and health care systems, practices and products that are not presently considered to be part of conventional medicine
- Complementary: if combined with traditional treatment
 - medication to enhance healing after surgery
- *Alternative*: if replacing traditional treatment
 - treating cancer rather than chemotherapy



Scenario 4: You'd like your provider's opinion about a complementary medicine you are taking to prevent cancer

What to do?

- Stop your treatment because RECOMMENDED medicine REALLY NOP RECOMPCES and try an alternative
- Bring all the bottles of CAM you are taking and ask if they are safe/effective
- Let your provider know you are thinking about a complementary treatment and want to be sure it won't interfere with your regular medications



Scenario 4: You'd like your provider's opinion about a complementary medicine you are taking to prevent cancer

Remember

- Your primary care provider will likely not be familiar with these medications; they may offer to look them up and get back to you
 - NCCIH web site https://nccih.nih.gov/
- Further considerations:
 - Talk to your pharmacist
 - -dietary supplements can interact with other medicines
 - If you are considering CAM for side effects or symptoms, ask your provider if there are 'mainstream' medications that might work



CAM = complementary or alternative medicine NCCIH: National Center for Complementary and Integrative Health Contact info:

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