

Abstract:

Family history taking in primary care. A review of current guidelines, challenges, disparities and future directions.

Jason Ng, MD PGY 3 Resident, Northwestern McGaw Family Medicine at Lake Forest

Background:

Family history taking remains an important component for preventative care in the primary care setting. Despite technological advances in genetic testing and genomic sequencing, family history provides a low cost and practical means for assessing risk of chronic diseases. Cancer screening algorithms often utilize family history in determining appropriateness for screening. Although genetic testing alone may provide a more definitive risk assessment for disease if a known gene mutation is present, family history encompasses other risk factors such as modifiable behaviors, epigenetic and social determinates of health. Although the utility of thorough family history taking is well-established, obtaining this history is often challenging in the clinical setting.

Methods:

Literature review was conducted to obtain a summary of guidelines for the recommendations for obtain family history for the guidance of breast, colon and prostate screening, the mortality benefits of screening, and the challenges and disparities of family history gathering for underserved populations, and future technological and methodological strategies to improve family history taking.

Conclusions:

Positive family history is a significant risk factor for the most common cancers screened in the primary care setting. Yet, family history taking remains underutilized especially in underserved communities. A combination of physician/patient education and process improvement involving electronic medical records are potential means to improve the collection and utilization of this information.