Participants' Motivation for Colorectal Cancer Screening in Japan: a Secondary Qualitative Study

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Backgrounds

- Although colorectal cancer screening has been provided as a national program in Japan, the participation rate has remained lower than in other OECD countries.
- We aimed to investigate participants' motivation for taking a cancer screening and work-up examinations of colorectal cancer.

Methods

- Secondary qualitative analysis by using The Database of Individual Patient Experience (DIPEx) Japan (https://www.dipex-j.org)
- **Sampling**: colorectal cancer patients or participants in colorectal cancer screening were purposefully sampled from the archive.
- **Exclusion criteria**: symptomatic outpatients and individuals with a disability or hereditary disease were excluded
- **Analysis**: line-by-line coding and thematic analysis were performed on transcripts of the selected cases.

Conclusions

- The findings implied that non-participants of FOBT and work-up exam in Japan has less awareness about risk of having cancer and sense of duty compared to participants.
- Participants' knowledge and their screening history were related to motivation for colorectal cancer screening. The seriousness with which patients received physician's suggestions regarding cancer screening greatly varied.
- It implied that it might be helpful to understand how patients perceive the risk and benefit of cancer screening or work-up examination.

Table 1. Results of Sampling

Mean Age (range)	54.3 (38-72)
Female : Male	11:11

	Number of Participants	Number of Non-participants
FOBT	15	3
Work-up exam	6 (4)	6 (5)

(): Number of the participants who also talked about their experience of FOBT

Table 2. Motivation for Taking Part in the Screening

	Non-Participants	Participants
Impression	"*I assumed work-up exams would naturally involve invasive approaches, so if I would take the investigation due to false negative, I would just have a difficult time or suffer from the pain. In the worst scenario, I would die from it. Thinking about it, there are some risks for it and that makes me feel intimidated.*" (50s, male)	"*If they didn't find anything, that would be a reward for myself. That gives me confidence.*" (70s, male)
Sense of duty	"*Because (FOBT) was optional, no one asked me to take it nor do you have to take it. When I had it once, I only have to submit the sample once. That's it. None of my bosses or supervisors gave me any direction about taking the FOBT. So, I haven't taken it since.*" (50s, female)	"*The result (of FOBT) is something came back to me eventually. Staying healthy is the foundation for living. I don't think there should be justification for denying the screening*." (60s, female)

Table 3. Motivation for Taking Part in the Work-up Exams

	Non-Participants	Participants
Interpretation of the results	"*I believed it was haemorrhoid and that I wouldn't get cancer. That's what I hoped, or I just believe so by myself*. " (50s, male)	"*I believed that if I get positive FOBT result, I should get a colonoscopy. In my mind, it was like routine or an equation*." (50s, female)
Physician's recommendation	"*I feel the doctor suggested to take the work-up exam, but I didn't take it seriously at that time because it was not like the situation where I was dragged to take the exam by the doctor. I think some people around me also told me to take it, but it was too late, and I eventually ignored it because I didn't take it seriously. "* (60s, male)	"*More than 2 years passed (since receiving the positive FOBT), (…), I showed the result to the doctor then he told me "Why didn't you come earlier?". I've ignored the result because I hadn't had knowledge, nor did I feel any pain. Then, he told me "I can't take the responsibility for this" and recommended a colonoscopy…"* (60s, male)