Office of Health Equity

Veterans Health Administration
Department of Veterans Affairs

NATIONAL VETERAN HEALTH EQUITY REPORT: COLORECTAL CANCER SCREENING INFORMATION BRIEF

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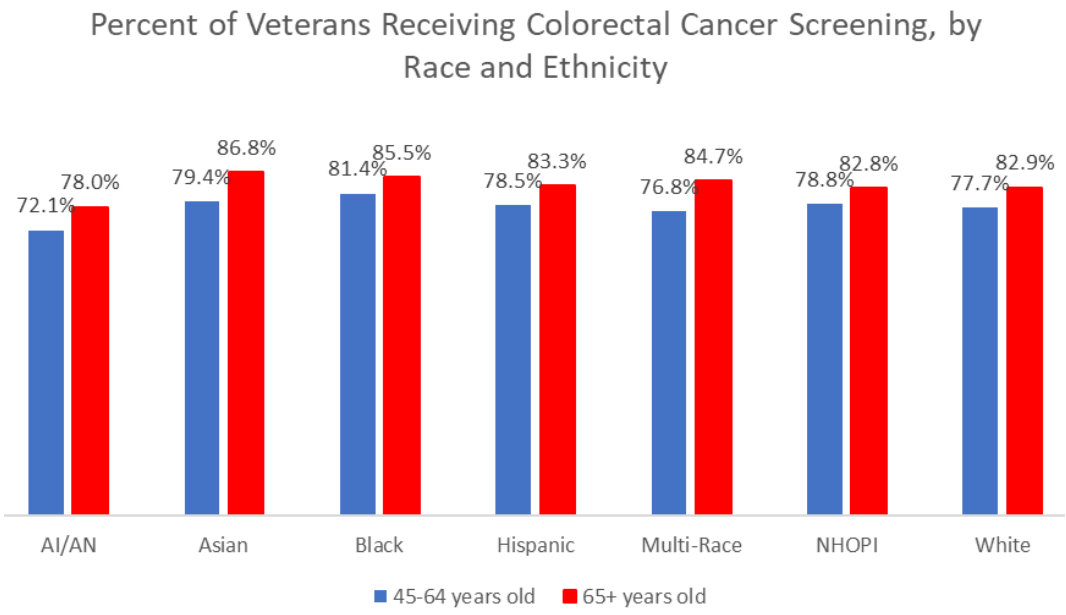
INTRODUCTION

The Veterans Health Administration (VHA) serves a Veteran population that is increasingly diverse. Equitable access to high-quality care for all Veterans is a major tenet of the VA healthcare mission. The Office of Health Equity (OHE) champions the elimination of health disparities and achieving health equity for all Veterans.

The Office of Health Equity-QUERI Partnered Evaluation Center authored the National Veteran Health Equity Report (NVHER) 2021 provides information regarding disparities in patient experiences and health care quality for Veterans who obtain health care services through the Veterans Health Administration (VHA). One of the conditions highlighted in the NVHER are colorectal cancer (CRC) screening rates.

COLORECTAL CANCER SCREENING HEALTH DISPARITIES

Colorectal, or colon, cancer is cancer that is found in either the colon or the rectum. Early detection and prevention through screening reduces the risk of CRC-related poor health outcomes.



VA is recognized for achieving CRC screening rates that surpass the national benchmark of 80%. Many of the racial/ethnic CRC screening disparities that occur in healthcare settings throughout the United States do not exist in VA. In the VA, Hispanics and Black Veterans have similar or higher CRC screening rates than whites.

QUALITY OF CARE

There are three types of screening procedures for colorectal cancer. They are:

1. A fecal occult blood test, which detects blood that is not visible in a stool sample;
2. A flexible sigmoidoscopy examination where physicians can visually inspect the interior walls of the rectum and the lower part of the colon using a thin, flexible, lighted tube called a sigmoidoscope;
3. A colonoscopy allows physicians to visually inspect the interior walls of the rectum and the entire colon using a thin, flexible, lighted tube called a colonoscope

Across the VHA, the most commonly used colorectal cancer (CRC) screening method is the fecal occult blood test (FOBT). This test is cheaper and perhaps more convenient for patients than other CRC screening methods. Additionally, this screening method may be more accessible to AI/AK Veterans because they are much more likely to reside in rural and highly rural settings than other Veteran groups.

To complete a FOBT, patients put tiny samples of their stool on a special card or cloth. The card or cloth is then sent to a medical laboratory, which uses chemicals to detect blood that cannot be seen with the naked eye. If the lab tests are positive for blood, VA regulations require the test to be followed up with a prompt diagnostic evaluation—usually through a colonoscopy—and to quickly connect Veterans to the treatment they need.

High CRC screening rates in VA can be attributed to many system-level factors, including the implementation of the patient-centered medical home model to enhance the delivery of primary care to Veterans and a system-wide emphasis on CRC screening through the national VA Colorectal Cancer Care Collaborative.

Patient-centered medical homes (PCMHs) are used by the VA to deliver primary care through an integrated, team-based approach that can be particularly helpful in managing care and addressing social determinants of health and can continue to help addressing disparities in access to important screenings for conditions like CRC.

For more information about the Office of Health Equity visit: https://www.va.gov/healthequity/

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