CLINICAL SUMMARY

Testing for Hereditary Melanoma

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Genetic testing for *p16* mutations improves compliance for early detection of melanoma

Individuals who inherit mutations in the *p16* (also referred to as *CDKN2A*) gene have up to a 76% lifetime risk of developing melanoma. The American Academy of Dermatology recommends annual total body skin examination (TBSE) and monthly skin self-examination (SSE) for patients at risk for melanoma. The following study compared compliance with these screening recommendations in a group of high-risk patients, before and after receiving results of *p16* genetic testing.

Aspinwall LG, et al. *CDKN2A/p16* genetic test reporting improves early detection intentions and practices in high-risk melanoma families.

Cancer Epidemiol Biomarkers Prev 2008;17(6):1510-9.

Purpose:

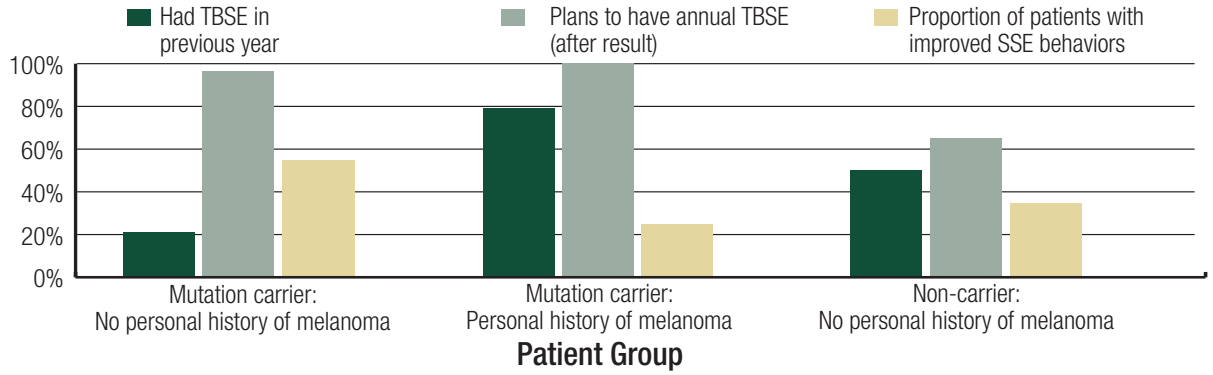
To evaluate the effect of *p16* genetic test results on patient compliance with screening recommendations in a population at high risk for melanoma.

Design and Methods:

In this prospective study, 45 patients were interviewed before and after receiving *p16* genetic test results. Past screening behavior, future intentions, and compliance with screening recommendations were measured before, immediately after and one month following results disclosure.

Results:

Compliance with screening recommendations improved in all patients, including those with negative *p16* genetic test results. Improved behavior included more frequent and/or more thorough skin self-examinations.



" The goal of cancer genetic testing is to identify high-risk patients so that prevention and early detection practices can be instituted before the development of malignancy. We have shown that reporting CDKN2A/p16 test results to high-risk patients significantly improves their compliance with early detection recommendations, which supports similar findings for colon and breast cancer genetic testing."

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