



NuGenA- NURse GENetic counsellor led community health campaign on Awareness of hereditary women's cancer in India

Study PI: Asima Mukhopadhyay

Consultant Gynaecological Oncologist, CNCI Kolkata & NGOC, Gateshead UK

Trial setting: Primary ovarian cancer prevention

Trial Model: Academic (A)

Trial status – **New Concept development stage**

Study Design: Observational/Epidemiological study / Implementation research

Peer Review:

Groups: KolGo Trg (Kolkata Gynecology Oncology Trials and Translational research group, India) (KolGo-PROVAR-004).

Co-Investigators: Dona Chakraborty, Ranajit Mandal, Dipanwita Banerjee, Rahul Roy Chowdhury

Sponsor(s): KolGo Trg/ Chittaranjan National Cancer Institute (CNCI) Kolkata

PI name and email: Email: asima7@yahoo.co.in;

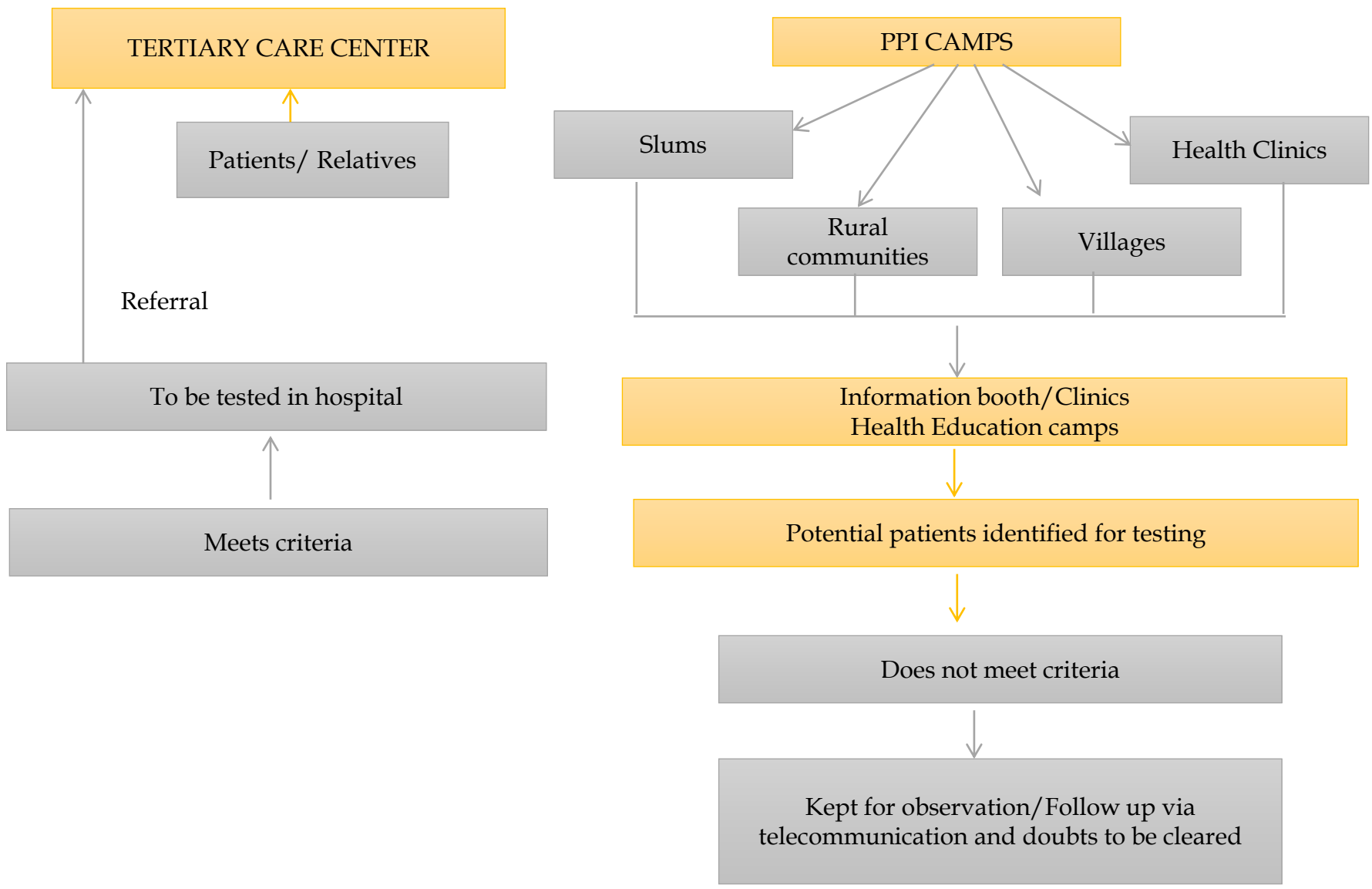
Study Key contact person: Dona Chakraborty Email: donachakraborty9366@gmail.com

Background: A significant proportion of women's cancers have a hereditary background with germline mutations which have impact on screening and prevention strategies. But there is lack of knowledge especially in the community regarding onset/symptoms of cancer leading to late diagnosis. Previous work done piloted a study in a regional cancer center in Kolkata, India where a research nurse was trained in various genetic clinics in India and UK; following nurse led counseling, more patients and their relatives identified their risks and were encouraged to get themselves tested. Patient-satisfaction/follow up rate and acceptance by was remarkably high as patients could spend more time with the nurses Hence, Nurses after adequate training can be an **excellent link to motivate patient-public initiatives and develop community-based awareness and health campaigns on familial disorders and genetic counseling.**

Objectives:

- 1)To identify whether implementation of a nurse led genetic clinic in loco-regional centers has **enabled in identifying more patients at risk of hereditary gynecological cancers** through screening campaigns and adequate testing
- 2)To assess whether **cancer survivors** (and friends/relatives) **can be mobilized in health education planning** and help in improving uptake of ovarian cancer screening across varied socio-economic strata
- 3) Compare local community satisfaction rates between screening camps organized by PPI using **snowballing method versus conventional institutional initiated efforts**
- 4)**Economic analysis** of such approach where the cost of organization of health screening facility is part-borne by the local community
- 5)Study **willingness to pay (WTP)** for screening and genetic testing amongst the local population attending the screening camps organized through PPI
- 6)Assessing differences in service implementation (barriers and solutions) for this model in **rural versus urban** and different socio-economic strata

:Blueprint of organising health camps in the communities



Guideline Development	Education	Quality Assurance	Public Awareness	PPI User Groups
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