BC Cancer Agency
CARE + RESEARCH
An agency of the Provincial Health Services Authority

Hereditary Cancer Program

Hereditary Colorectal Cancer

(Lynch Syndrome/HNPCC)

Relevant Lynch-related diagnoses include:

- Colorectal, endometrial, ovarian, gastric, small bowel, hepatobiliary, pancreatic, kidney, ureter or brain cancers
- Colorectal adenomas ≤ age 40 or sebaceous gland adenomas

Assessment: Complete and assess family cancer history before referring patients to the Hereditary Cancer Program.
Contact the Hereditary Cancer Program at 604-877-6000 local 2325 if in doubt regarding referral.

Referral to Hereditary Cancer Program is indicated if at least one of the following criteria is met:	
Confirmed MLH1, MSH2, MSH6 or PMS2 gene mutation in a close family member	• If possible, provide family member's test report with referral
Your patient's personal history	• Colorectal cancer ≤ age 40, *or* • Colorectal cancer ≤ age 50, with MSI-H (unstable) result **(Report required)**, *or* • Colorectal cancer AND a second Lynch-related diagnosis (see above), with ***at least one*** diagnosed ≤ age 50
Your patient's family history (this may include your patient's diagnosis)	• **1** close relative with colorectal cancer AND a second Lynch-related diagnosis (see above), with at least one ≤ age 50, *or* • **2** close relatives with a Lynch-related diagnosis, both ≤ age 50, ***including*** one colorectal cancer, *or* • **3** or more close relatives with Lynch-related diagnoses involving more than 1 generation, ***including*** 1 diagnosis ≤ age 50 AND 1 colorectal cancer

Close Relatives Include: children, brothers, sisters, parents, aunts, uncles, grandparents, and grandchildren ***from the same side of the family.***
History of cancer in cousins and more distant relatives from the same side of the family may also be relevant.

Print referral form from BC Cancer Agency website www.bccancer.bc.ca/hereditarycancer or call 604-877-6000 local 2198

See other side for information regarding additional inherited cancer syndromes

2009

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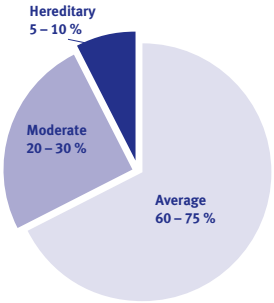
Hereditary Cancer Program

Hereditary Cancer Program Referrals

Cancer risk assessment



Average: 60-75%
- Most common
- Common cancers at usual ages
- Little or no family history of cancer
- Due to common risk factors like age, diet, environment

Moderate: 20-30%
- Cluster of cancers in family
- May be due to chance
- May be due to multiple factors shared in a family, e.g. genes, diet, environment

Hereditary: 5-10%
- Least common
- Strong family history of cancer
- Specific patterns of cancer
- Due to a single gene mutation passed down in family

Genetic testing is also available for the following syndromes
(see website for referral criteria)

- Hereditary breast and ovarian cancer
- Familial adenomatous polyposis (FAP)
- Other polyposis syndromes (eg. MYH – associated polyposis, juvenile polyposis, etc)
- Hereditary diffuse gastric cancer
- Multiple endocrine neoplasias (MEN1, MEN2)
- von Hippel Lindau syndrome
- Hereditary paraganglioma/pheochromocytoma
- Li Fraumeni syndrome

Referral to the Hereditary Cancer Program may also be indicated if:

- A close relative has a confirmed gene mutation associated with another hereditary cancer syndrome (include report)
- Family history is suggestive of a rare hereditary cancer syndrome

Additional information:
www.bccancer.bc.ca/hereditarycancer or call 604-877-6000 local 2198

See other side for information regarding Hereditary Colorectal Cancer (Lynch Syndrome/HNPCC)

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