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A COMPARISON OF HEALTH HABITS, CANCER RISK AND THE USE OF SCREENING TESTS FOR CANCER BETWEEN A MIGRANT SRI LANKAN POPULATION IN THE USA AND THEIR SIBLINGS/FIRST COUSINS LIVING IN SRI LANKA

D. S. Dissanayake¹, L. A. Jones²

¹Department of Community Medicine, Faculty of Medicine, University of Peradeniya
²Center for Research on Minority Health,
Department of Health Disparities Research, University of Texas,
MD Anderson Cancer Centre, Houston, US

Comparing a migrant population with that of siblings and first cousins still living in the country of origin could explain how health habits have changed with acculturation to a new society. Cancer is the second leading cause of death in Sri Lanka. The aims of this study were to compare the health habits and other factors related to cancer, and the pattern of utilization of methods available for early detection of cancer, between Sri Lankan Sinhalese living in Houston, United States of America (USA) with that of their siblings and first cousins living in Sri Lanka.

This cross sectional comparative study comprised Sri Lankan Sinhalese adults living in Houston, USA and their adult siblings and first cousins living in Sri Lanka. The 90 pairs studied were matched for sex and for age within \pm 10 years. Data collection was carried out as telephone interviews using a questionnaire.

Engaging in physical exercise was significantly lower among the subjects living in Sri Lanka (p=0.003). Having less than thirty minutes of moderate to vigorous physical exercise was reported by 41% of the group in Sri Lanka and 19% of the group in the USA. When compared to the study group in Sri Lanka, alcohol consumption was significantly higher in the USA group (p=0.006). Only 4% of the USA group and 5.5% of the group in Sri Lanka were heavy smokers. Frequent 'bulath' chewing with carcinogenic ingredients was reported among only those living in Sri Lanka (4%). A significantly higher percentage of the USA subjects had a high consumption of red meat (51%) compared to relatives in Sri Lanka (10%) (p<0.001). Fruit and fruit juice intake was higher among US participants (p=0.008, p<0.001 respectively). Fish and vegetable consumption was higher among the participants in Sri Lanka (p<0.001, p=0.004 respectively). Type 2 diabetes mellitus was reported by 18% of participants from each country. Equally high proportions from both countries (73% in the USA and 72% in Sri Lanka) perceived as having moderate to high mental stress.

Of the females aged 35 years or above (84% in USA and 11.9% in Sri Lanka) have been screened for breast cancer by a mammogram (p<0.001). The difference is highly significant. A significantly higher proportion of females living in the USA have been screened for pre-malignant lesions of the cervix by a Pap smear (p<0.001). Of the males aged over 50 years, a significantly higher proportion in the USA have been screened for prostate cancer (p<0.001).

The risk factors for cancer differed in the two groups indicating a change in lifestyle accompanying migration. Utilization of methods for early detection of cancer was poor among the group in Sri Lanka despite the high incidence of cancer in the country.