Testimony for the Public Health Committee  

Monday, March 17, 2014  

I am Ellen T. Matloff, the Director of Cancer Genetic Counseling at Yale Cancer Center/Yale School of Medicine in New Haven, CT. I live in Branford, CT.

I am writing to testify on S.B. No. 437 (RAISED) AN ACT CONCERNING LICENSURE FOR GENETIC COUNSELORS.

I generally support this bill and would like to express my gratitude to the committee for raising this bill on this important issue. I also support the modifications and comments on the bill that were shared with the committee chairs by our team of genetic counselors, geneticists, and other interested individuals.

There is a nationwide movement for genetic counselor licensure with 14 states currently issuing licenses (CA, DE, IL, IN, MA, NE, NM, OH, OK, PA, SD, TN, UT, WA)\(^1\), 4 additional states that have bills passed or in rulemaking (HI, NH, NJ, ND)\(^1\), and 7 states with bills introduced (FL, MI, MN, NY, RI, TX, WI). These include many of our closest neighbors (in bold).

Genetic medicine is expanding rapidly and has an influence on many medical issues throughout the lifespan (including common disease like cancer and heart disease).

- Advances in technology are decreasing the cost, increasing the availability, and increasing the complexity of genetic testing options and thus simultaneously increasing the complexity of the genetic counseling and testing process.\(^2\)-\(^4\)
- The demand for genetic counseling and testing is increasing with the increasing visibility of genetic testing through media attention (e.g. Angelina Jolie’s disclosure that she carries a BRCA mutation and the Supreme Court decision to ban gene patents)

Specialized and current knowledge is critical for providing accurate genetic counseling and thus ensuring that patients reap the benefits of genetic technology.

- Genetic counselors are professionals whose training includes graduate-level training, clinical experience and mandatory continuing education. They have expertise in genetics and genetic counseling and function as an essential member of the health care team.
- Numerous studies have demonstrated that non-genetics healthcare providers have little or no formal training in genetics, have inadequate knowledge of essential genetics concepts, and have insufficient knowledge and appreciation of the complex ethical and psychosocial issues involved in genetic counseling and testing.\(^5\)-\(^13\)
- The results of these studies are especially concerning as the complexity of this process increases with advances in technology.

There is potential for harm if individuals represent themselves as genetic counselors without adequate levels of training and continuing education. We have seen direct harm to patients here in Connecticut when genetic test results are ordered incorrectly and/or interpreted inaccurately.
Patients rely on the advice of genetic counselors in making significant medical decisions including major prophylactic surgeries, decisions regarding the frequency and aggressiveness of preventative screenings for fatal diseases and decisions regarding testing during pregnancies. Genetic counselors also provide services that help individuals cope with the difficult pragmatic, emotional, ethical and social implications related to genetic testing.

Several case series have now documented numerous cases (>50) of adverse events (including many in Connecticut) that have arisen when genetic counseling and/or testing occurred without the involvement of a certified genetics professional. These included cases that resulted advanced cancer diagnoses, unnecessary prophylactic surgeries, unnecessary expenditure of healthcare dollars that were charged to the insurance and/or patient, and psychological distress.

For these reasons, I generally support S.B. No. 437 (RAISED) AN ACT CONCERNING LICENSURE FOR GENETIC COUNSELORS.

Thank you for your consideration.

Sincerely,
References:

7. Doksum T, Bernhardt BA, Holtzman NA. Does knowledge about the genetics of breast cancer differ between nongeneticist physicians who do or do not discuss or order BRCA testing? Genetics in Medicine 2003; 5(2):99-105.