



The *CPT1A* Arctic variant: perspectives of community members and providers in two Alaska tribal health settings

Julie A. Beans¹ · Susan Brown Trinidad² · Aliassa L. Shane¹ · Kyle A. Wark¹ · Jaedon P. Avey¹ · Charlene Apok³ · Tiffany Guinn¹ · Samantha Kleindienst Robler⁴ · Matthew Hirschfeld⁵ · David M. Koeller⁶ · Denise A. Dillard¹

Received: 4 February 2023 / Accepted: 6 October 2023

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Abstract

The Arctic variant of the *CPT1A* gene (CPT1A^{Arctic}) is a common genetic variant in Arctic populations. This variant is associated with a metabolic disorder called carnitine palmitoyltransferase 1A deficiency (CPT1A^{Arctic} deficiency). This study explored the perspectives of community members and providers in two Alaska tribal health settings regarding the Arctic variant of the *CPT1A* gene. The study was conducted in two Alaska tribal health settings. The first setting was a tribal health center in a small town in Alaska. The second setting was a tribal health center in a larger town in Alaska. The study was conducted in two phases. The first phase was a focus group discussion with community members. The second phase was a focus group discussion with providers. The study found that community members and providers had different perspectives on the Arctic variant of the *CPT1A* gene. Community members were more concerned about the health implications of the variant, while providers were more concerned about the genetic testing process. The study also found that community members and providers had different understandings of the Arctic variant of the *CPT1A* gene. Community members often had a limited understanding of the variant, while providers had a more detailed understanding. The study highlights the need for more education and communication about the Arctic variant of the *CPT1A* gene in Alaska tribal health settings.

Keywords

Arctic variant, *CPT1A*, Alaska, tribal health settings, community members, providers

Introduction

The Arctic variant of the *CPT1A* gene (CPT1A^{Arctic}) is a common genetic variant in Arctic populations. This variant is associated with a metabolic disorder called carnitine palmitoyltransferase 1A deficiency (CPT1A^{Arctic} deficiency). This study explored the perspectives of community members and providers in two Alaska tribal health settings regarding the Arctic variant of the *CPT1A* gene. The study was conducted in two Alaska tribal health settings. The first setting was a tribal health center in a small town in Alaska. The second setting was a tribal health center in a larger town in Alaska. The study was conducted in two phases. The first phase was a focus group discussion with community members. The second phase was a focus group discussion with providers. The study found that community members and providers had different perspectives on the Arctic variant of the *CPT1A* gene. Community members were more concerned about the health implications of the variant, while providers were more concerned about the genetic testing process. The study also found that community members and providers had different understandings of the Arctic variant of the *CPT1A* gene. Community members often had a limited understanding of the variant, while providers had a more detailed understanding. The study highlights the need for more education and communication about the Arctic variant of the *CPT1A* gene in Alaska tribal health settings.

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Recruitment

Recruitment was conducted through community-based organizations (CBOs) and social media platforms. A total of 110 individuals were recruited, with 55 from each of the two groups. The recruitment process was approved by the Institutional Review Boards (IRBs) of the participating institutions. All participants received a \$50 gift card as compensation for their time and effort.

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Results

Results from the recruitment process are presented in Table 1. A total of 110 individuals were recruited, with 55 from each of the two groups. The recruitment process was approved by the Institutional Review Boards (IRBs) of the participating institutions. All participants received a \$50 gift card as compensation for their time and effort.

Data collection

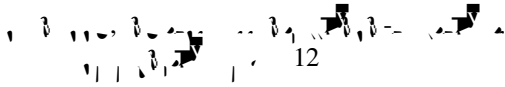
Data collection was conducted through a series of focus group discussions (FGDs) and individual interviews. A total of 201 individuals were interviewed, with 100 from each of the two groups. The interviews were conducted by trained research assistants who were blind to the study hypotheses. The interviews lasted approximately 45 minutes and were audio-taped. The data collection process was approved by the IRBs of the participating institutions. All participants received a \$50 gift card as compensation for their time and effort.

Data analysis

Data analysis was conducted using a thematic analysis approach. The data were first transcribed verbatim and then analyzed for themes. The analysis was conducted by a research assistant who was blind to the study hypotheses. The analysis identified several themes related to the recruitment process, including barriers to recruitment, recruitment strategies, and participant characteristics. The analysis was approved by the IRBs of the participating institutions. All participants received a \$50 gift card as compensation for their time and effort.

Ethics statement

The study was approved by the Institutional Review Boards (IRBs) of the participating institutions. All participants provided informed consent before participating in the study. The study was conducted in accordance with the ethical standards of the IRBs and the principles of the Declaration of Helsinki. The study was approved by the IRBs of the participating institutions. All participants received a \$50 gift card as compensation for their time and effort.



Knowledge regarding care of children

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Knowledge regarding care of children with the Arctic variant

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Care coordination and referrals

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Concern for stigma and cultural responsiveness

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Discussion

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Limitations

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Public health implications

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