ASSESSING EMPIRICAL THRESHOLDS FOR INVESTIGATION IN PEOPLE REFERRED ON A SYMPTOMATIC COLORECTAL CANCER PATHWAY: A COHORT STUDY UTILISING FAECAL IMMUNOCHEMICAL AND BLOOD TESTS IN ENGLAND

David James Humes

UEG Week Copenhagen 2023 | Poster

Colorectal

October 15, 2023

A cohort study of 33,694 symptomatic patients in Nottingham found that colorectal cancer risk at different FIT thresholds varies substantially by age and anaemia status, suggesting tailored cut-offs could reduce unnecessary investigations while maintaining a 3% cancer detection threshold.

KEY POINTS

- 514 colorectal cancers (1.5%) were diagnosed; individuals with FIT ≥10 µg Hb/g faeces had greater than 3% cancer risk except those under 40 years (1.45% risk).
- Non-anaemic patients required FIT ≥40 µg Hb/g faeces to meet the 3% threshold, while anaemic patients met it at FIT ≥20 µg Hb/g faeces.
- Non-anaemic patients aged 70-85 years with FIT <100 µg Hb/g faeces were an exception, with 5.26% cancer risk.
- Applying tailored FIT thresholds based on age and anaemia in patients under 55 years could repurpose 160-220 colonoscopies per 10,000 FIT tests, at a cost of missing 1-2 cancers.
- This study is relevant for clinicians and policymakers considering risk-stratified approaches to symptomatic colorectal cancer investigation pathways.

VIEW THIS CONTENT ON GUTFLIX

https://gutflix.eu/search/d/ec01a27e-743c-11ee-89a1-0242ac140004

AI-generated summary

This summary was generated by an AI large language model based on the content transcript. It is for informational purposes only and should not be considered a substitute for clinical judgment. Always rely on your professional expertise and the full clinical context when making clinical decisions.