

IMPROVING COLORECTAL CANCER SCREENING WITH A BACTERIAL SIGNATURE IN THE PROTOCOL

Jaume Galceran

UEG Week Berlin 2025

Poster

Colorectal

October 5, 2025

A bacterial signature combined with faecal immunochemical testing at 100 ng/mL cut-off achieved 95.5% sensitivity for colorectal cancer detection and reduced false-positive colonoscopies by 18.4% in a prospective multicentre study of 1,405 FIT-positive screening participants in Catalonia.

KEY POINTS

- In 1,405 FIT100-positive participants (44 with colorectal cancer, 472 with advanced lesions, 889 without advanced lesions), the bacterial signature showed 95.5% sensitivity and 18.4% specificity for colorectal cancer detection.
- For combined advanced lesions and colorectal cancer detection, sensitivity was 82.6% with 18.4% specificity.
- The tool uses qPCR to analyse bacterial abundance in the same stool sample used for faecal immunochemical testing and was previously validated in studies totalling 2,980 participants.
- The bacterial signature reduced false-positive results by 18.4%, potentially decreasing unnecessary colonoscopies in colorectal cancer screening programs.
- The study recommends future cost-effectiveness analyses to assess broader implementation in screening protocols.

VIEW THIS CONTENT ON GUTFLIX

<https://gutflīx.eu/search/d/3f061dca-a815-11f0-9694-0242ac140006>



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.