

IMPLEMENTING A COMMUNITY BASED FAECAL IMMUNOCHEMICAL TEST (FIT) STRATEGY INCREASES THE YIELD OF COLORECTAL CANCER DIAGNOSIS AT COLONOSCOPY

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Poster

Colorectal

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Implementation of a community-based faecal immunochemical test strategy with a 10 µgHb/g threshold in a UK regional health board yielded significantly higher colorectal cancer detection rates at colonoscopy compared to previous symptom-based referral and national bowel screening programmes.

KEY POINTS

- Of 3291 community FIT tests performed July-December 2022, 162 (4.9%) were positive; 17 of these 162 patients (10.4%) had colorectal cancer and a further 20 (12.3%) had advanced neoplasia.
- Among 107 colonoscopies performed on FIT-positive patients, 16 colorectal cancers were detected (14.9% detection rate), significantly higher than the 6.7% rate in the bowel screening cohort ($p < 0.025$) and 1.6% rate in the historical symptomatic cohort ($p < 0.001$).
- Colorectal cancer detection increased with FIT value: 4.8% for 10-80 µgHb/g, 11.1% for 80-120, 18% for 120-400, and 25.9% for values above 400.
- The authors note that the benefits of increased diagnostic yield must be weighed against additional costs of FIT testing, clinical oversight, pathway safety netting, and management of incidental pathology detected in 11 patients.

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