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MEDIA RELEASE

NEW CLINICAL CARE STANDARD FOR COLONOSCOPIES

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HIGH quality and appropriate use of colonoscopy are essential to ensuring maximum benefit to patients who undergo the procedure, prompting the development of a new Colonoscopy Clinical Care Standard (CCCS), according to the authors of a Perspective published online by the *Medical Journal of Australia*.

“It is estimated that by 2040, the National Bowel Cancer Screening Program will prevent 92 200 cases of colorectal cancer and 59 000 deaths, based on modelling using current participation rates,” wrote the authors, led by Dr Anne Duggan, Clinical Director at the Australian Commission on Safety and Quality in Health Care (the Commission).

“Despite being frequently performed, colonoscopy is a complex medical procedure. The new standard offers guidance to patients, clinicians and health services at each stage of a colonoscopy, with the goal of ensuring high-quality and timely colonoscopies for patients who need them.”

According to Duggan and colleagues, in 2016–17, more than 800 000 colonoscopies were conducted in Australia — or one colonoscopy for every 32 Australians.

“The number of colonoscopies reimbursed by the Medicare Benefits Schedule, in which no polyp was removed (item no. 32090), increased 51% in the 10 years from 2004–05 to 2014–15, while colonoscopies with polypectomy (item no. 32093) increased 177% in the same period.”

The Australian Atlas of Healthcare Variation has shown that some geographic areas have rates of Medicare-funded colonoscopies 30 times higher than others, with variations by remoteness and socio-economic status, and with people residing in outer regional and remote areas having substantially lower rates.

“The CCCS will bring consistent rigour to the procedure and shine a light on when and how these procedures are done and will help to reduce the variation in colonoscopies being carried out,” said Professor Duggan.

The new CCCS identifies key factors critical to high quality colonoscopies and outcomes in adults, including appropriate referral; timely assessment; adequate bowel preparation; procedural quality; safe use of sedation; patient-centred care; communication; and surveillance intervals based on best evidence.

“We asked experts in colonoscopy about how to look after people in the best possible way and used this information to develop guidance for everyone involved. It’s implementation across Australia will assist to reduce bowel cancer mortality,” Duggan and colleagues concluded.

“Two areas remain for future consideration. First, while a high-quality procedure cannot be done quickly and there is no effective measure to ensure that adequate time is allowed for each colonoscopy and that the number of procedures per list reflects human factors relating to performance. Second, we must always keep in mind that lifestyle risk factors, including physical inactivity and high body mass index, account for more than half the disease burden of bowel cancer.

“For this reason, concurrent action on lifestyle risk factors and enhancing the quality of colonoscopy could greatly further reduce the human and health system costs of colorectal cancer.”

The Colonoscopy Clinical Care Standard is available at <https://www.safetyandquality.gov.au/our-work/clinical-care-standards/colonoscopy-clinical-care-standard>

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