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MEDIA RELEASE

BOWEL CANCER SCREENING TESTS: PROMPT FOLLOW-UP COLONOSCOPY VITAL REGARDLESS OF TEST SOURCE

EMBARGOED UNTIL 12:01am Monday 2 March 2020

A PROMPT colonoscopy should be provided to all patients with positive faecal immunochemical test (FIT) results, regardless of whether the test was offered through the National Bowel Cancer Screening Program, or via a community-based source, according to research published online today by the *Medical Journal of Australia*.

Dr Simon Whitcher, a surgical registrar at John Hunter Hospital, working with academics from the University of Newcastle, analysed data from the Newcastle Direct Access Colonoscopy Service (DACS) for the period 2014–18 to investigate whether colonoscopy services should provide endoscopies to patients with positive FIT results with the same priority, regardless of whether the test was instigated by the NBCSP.

2365 complete screening colonoscopy outcomes were analysed: 1233 following community-initiated and 1132 following NBCSP testing.

“Colonoscopy quality was high: the completion rate ... was 97.1% (community-initiated, 1193 of 1233, 96.8%; NBCSP, 1104 of 1132, 97.5%), and the adenoma detection rate was 49%, exceeding international benchmarks for either symptomatic or screening patients,” the researchers found.

“The rate of colorectal neoplasia (malignant or pre-malignant) was similar in the two groups. Importantly, the difference in the rates of adenocarcinoma was not statistically significant (community-initiated, 4.0%; NBCSP, 2.7%).”

Whitcher and colleagues concluded that “evaluation should be performed equally promptly for patients with positive results from NBSCP and community-initiated FITs”.

“The incidence and detection rates of colorectal neoplasia in people aged 50–74 years were similar for people with positive results for FITs undertaken as part of the NBCSP or community-initiated.”

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