

# Secondary prevention: The importance of colorectal cancer screening programmes

Catherine SAUVAGET, M.D. Ph.D.

International Agency  
for Research on Cancer

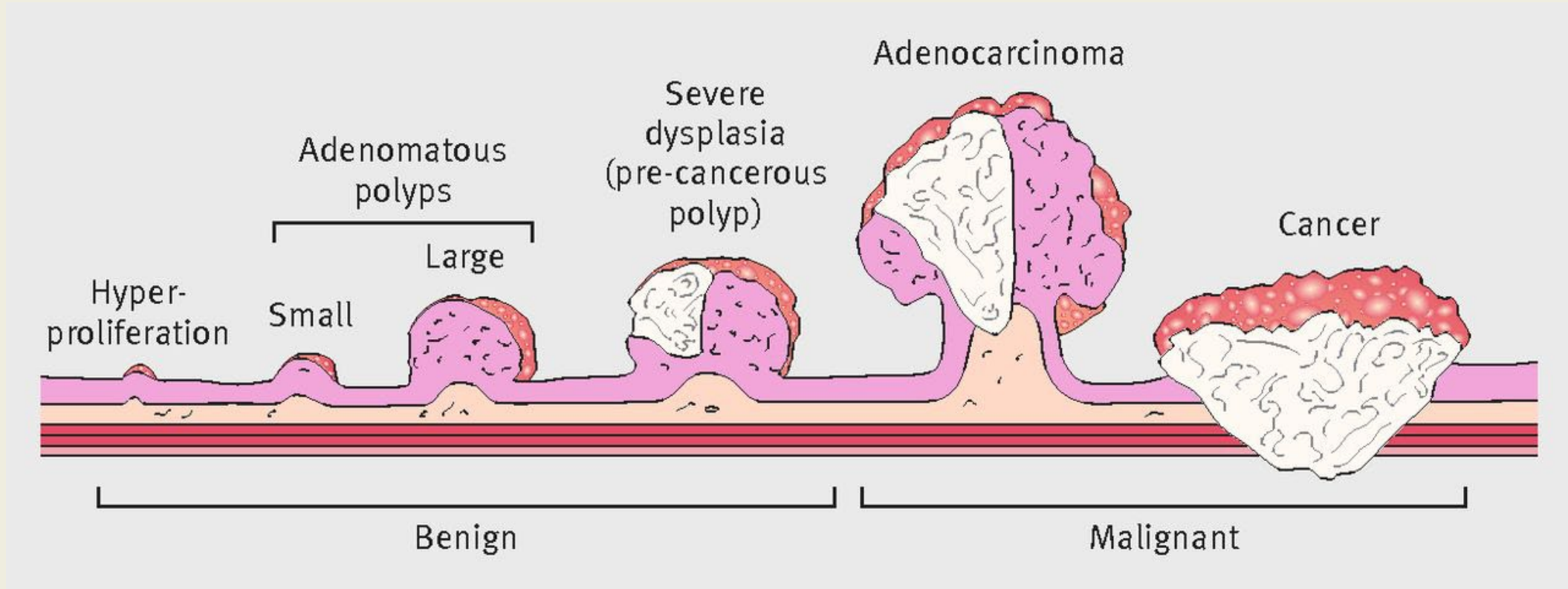


# Colorectal cancer is an excellent candidate for screening

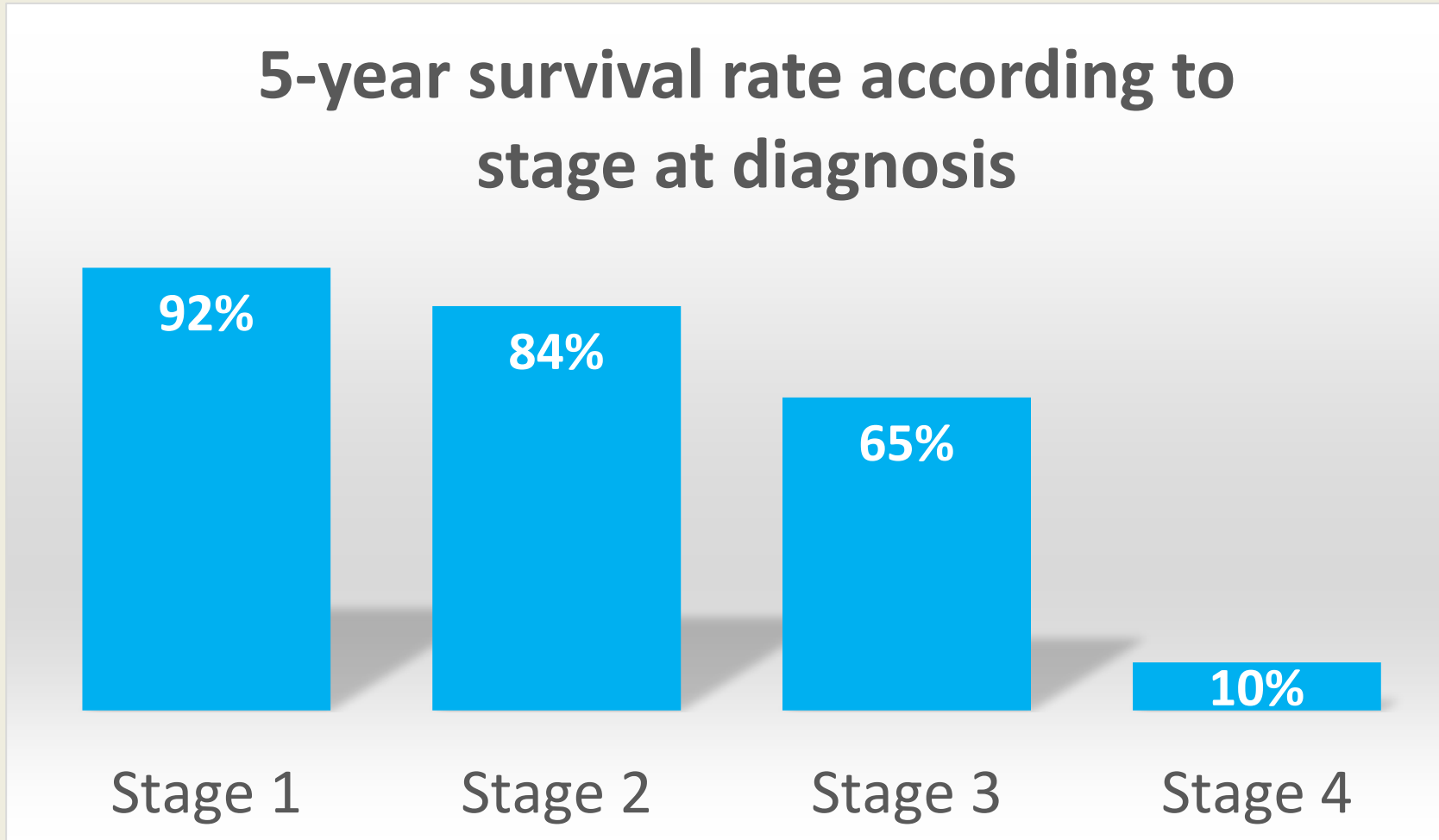
1. Colorectal cancer is a major health problem
2. Colorectal cancer can be detected in preclinical stage
3. Effective treatments exist for precancers or early cancers
4. Screening test has a high level of accuracy
5. Screening test is convenient, simple, painless, at low cost
6. Screening test does not cause complications

# Progression from colorectal polyp to cancer

(adapted from Johns Hopkins Colon Cancer Center)



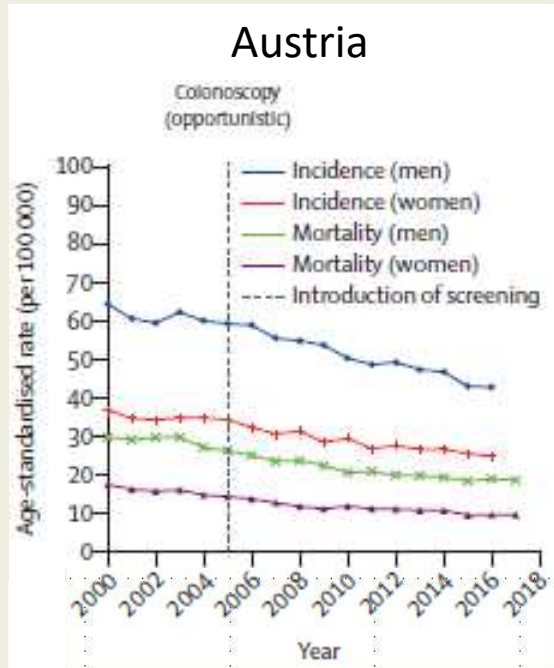
# Better survival when the cancer is diagnosed early



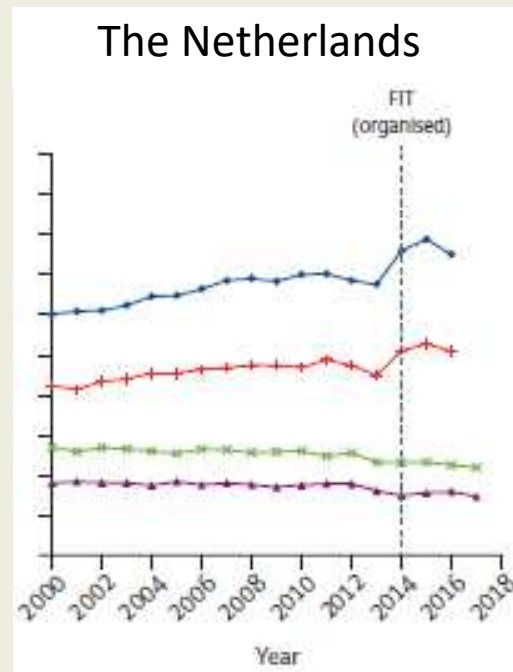
Source: [cruk.org/cancerstats](http://cruk.org/cancerstats)

# Screening reduces incidence and mortality from colorectal cancer by 30%

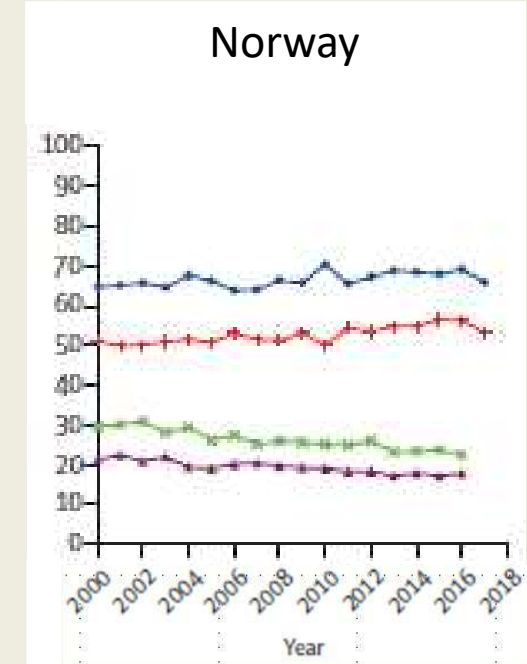
## LONG-STANDING SCREENING PROGRAMME



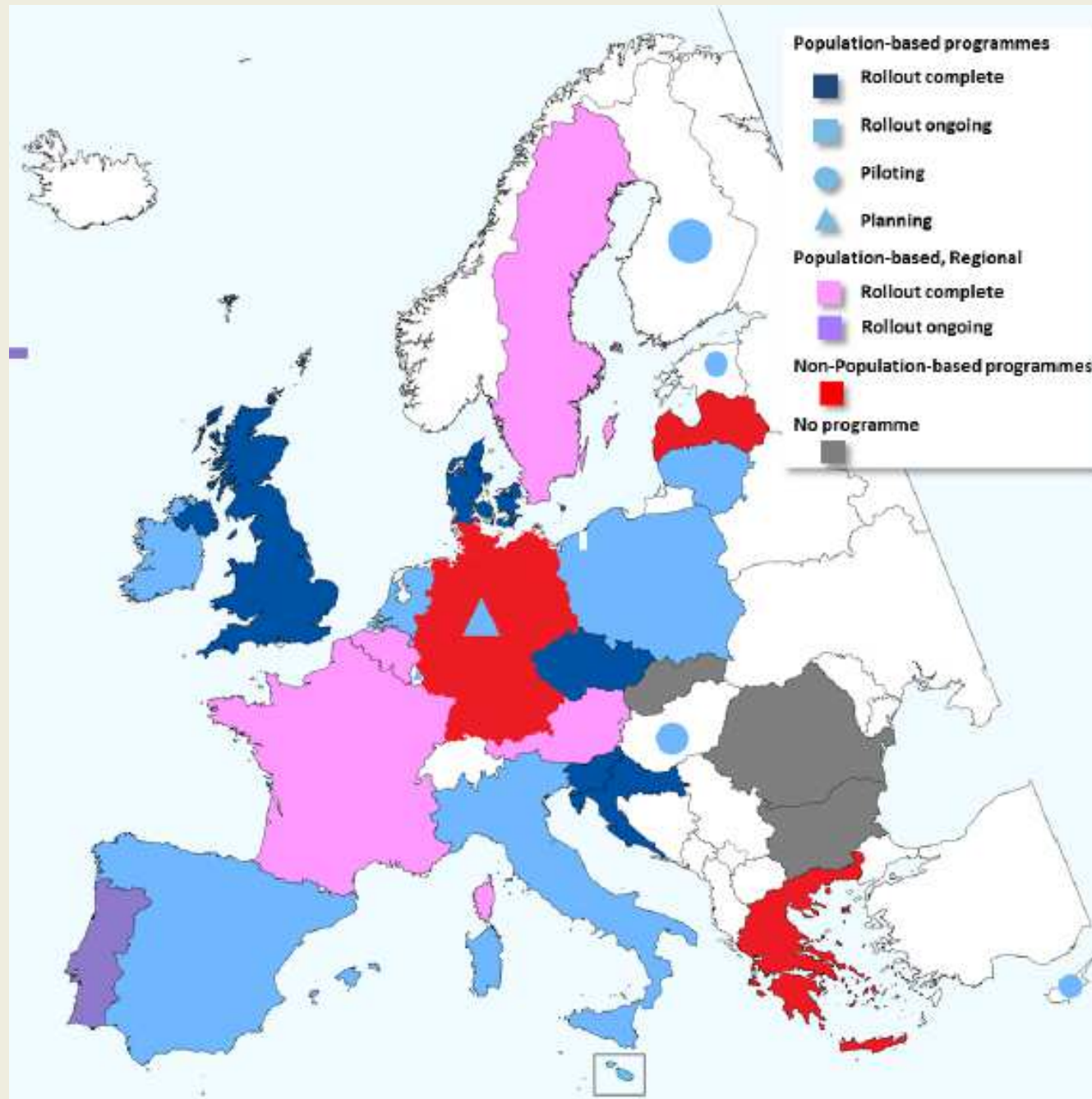
## RECENT SCREENING PROGRAMME



## NO SCREENING PROGRAMME



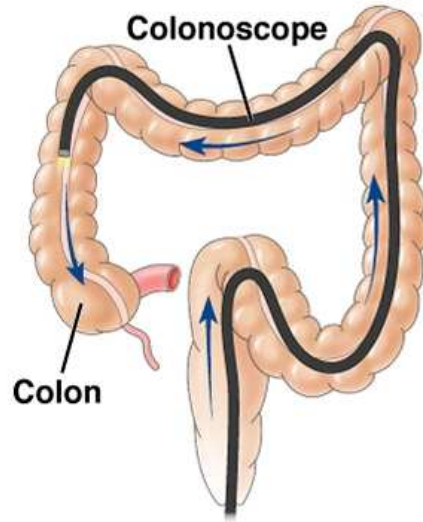
# Colorectal cancer screening programmes in the EU in 2016



# Different screening tests

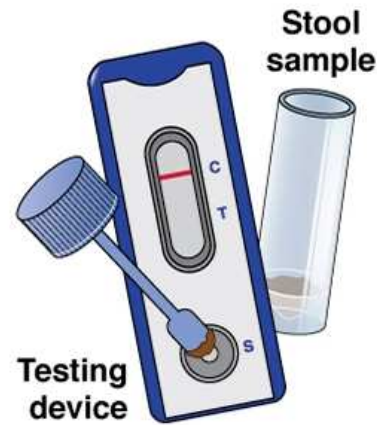
## Colonoscopy

Imaging of entire colon

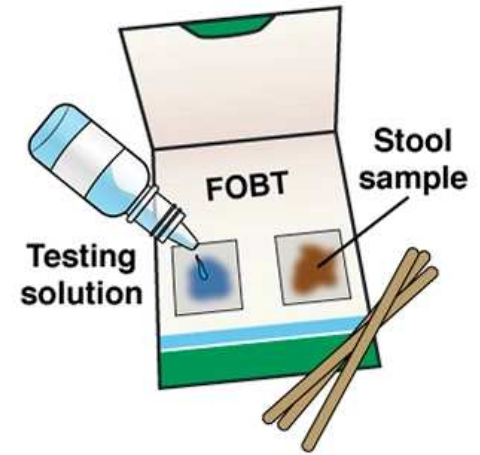


## Stool tests

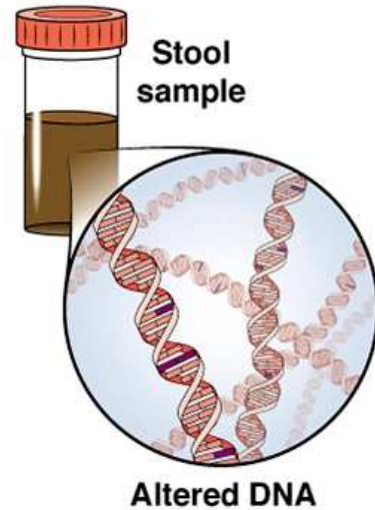
Fecal immunochemical test (FIT)



Fecal occult blood test (FOBT)

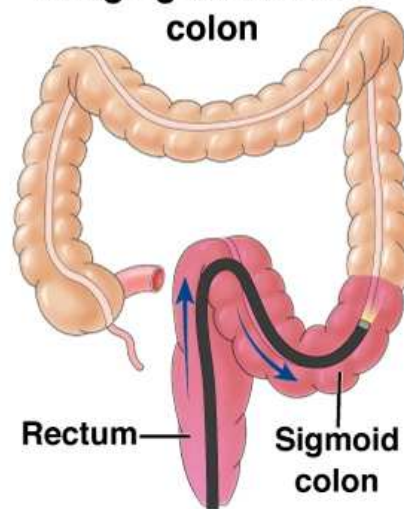


## Stool DNA test



## Flexible sigmoidoscopy

Imaging of the lower colon

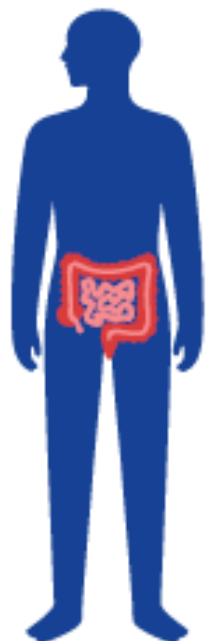


## CT colonography

CT machine



## New EU Recommendations (Sept 2022)



Triage testing for **COLORECTAL**  
**CANCER** in people aged 50 – 74  
through faecal immunochemical  
testing (FIT) to determine follow-up  
via endoscopy/colonoscopy





# This little kit could save your life.

Steve Rowley  
Gloucestershire  
Bowel cancer survivor

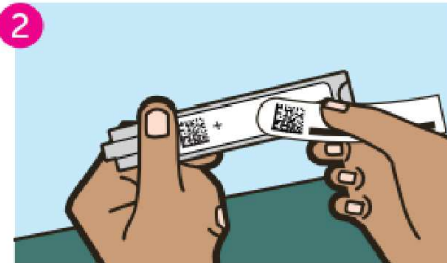
Clear on  
cancer

Help us  
help you

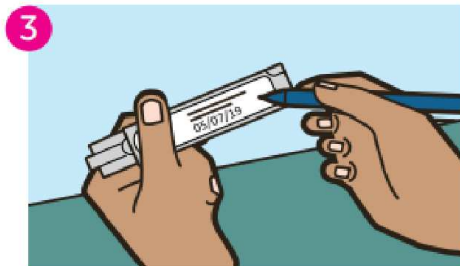
## How to do the bowel screening kit in Scotland



1 Get ready – collect what you need to catch your poo before you sit on the toilet.



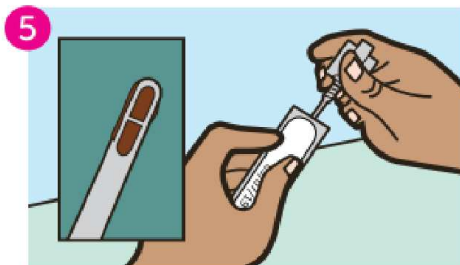
2 Take the label from the front of your letter and stick it on the side of the test marked +.



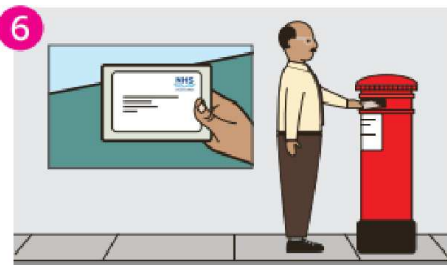
3 On the other side write the date you do the test.



4 Collect your poo - we've given you some ideas for how to do this opposite. Use the stick to take a sample of your poo.



5 Make sure the two holes on the side of the stick are filled with your poo sample. Put the stick back in the tube and twist shut.

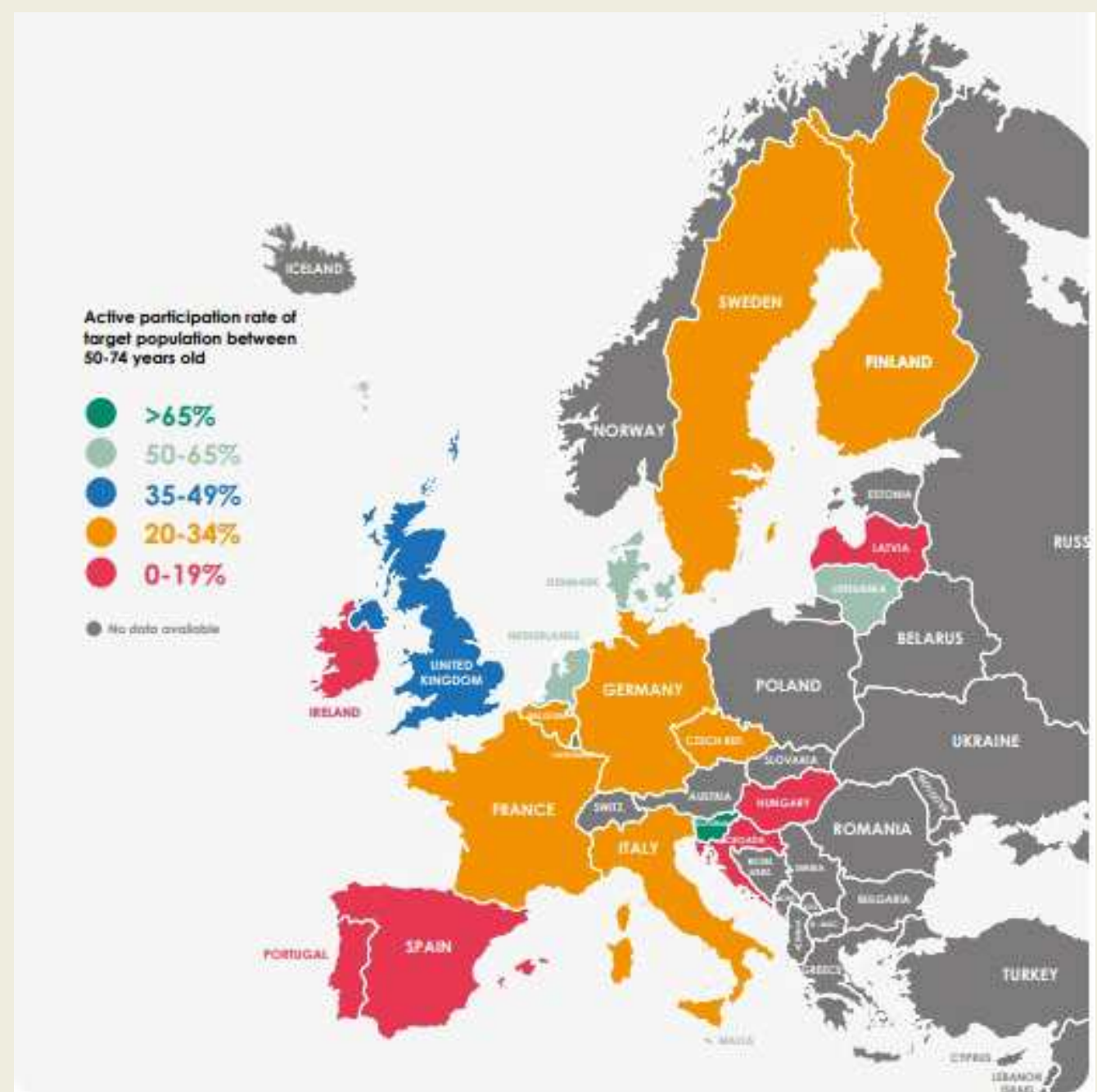


6 Put the kit in the prepaid envelope provided and post it back. You should get your results within 2 weeks.

You will receive your result by letter, please read it carefully to find out what the next steps will be. If you get a result saying further tests are needed, it could be down to lots of different things and does not necessarily mean cancer. But if it is cancer, finding it at an early stage means it is easier to treat successfully.



# Participation to Colorectal cancer screening programmes



# Barriers to participation in bowel screening

Fear and denial around the test outcome



Individual perceived low risk or don't want to know result



Gender - males less likely to take part in screening



Misconception that the test is not applicable if no apparent symptoms of bowel cancer



Lower uptake among ethnic minority groups



Lower socioeconomic group

Concerns around the practicalities and cleanliness of the test



Low health literacy and numeracy



It's important to design activity to **address these barriers** for screening in your area, if relevant.

# Performances of the CRC screening programmes in EU

Performance Indicators	EU mean	Acceptable standard	Desirable standard
Participation rate	38%	45%	65%
Completion rate of follow-up coloscopy	95%	90%	95%
Detection rate of adenomas (FIT test)	2%		
Detection rate of colorectal cancers (FIT)	0.2%		

## **Future colorectal cancer screening strategies**

- ✓ Increase participation rate to the screening programme
- ✓ Use new screening tests
- ✓ Stratify the eligible population by risk level

# Take home messages

- ✓ Colorectal cancer diagnosed at an early stage has excellent prognosis
- ✓ Screening will allow to detect precancerous lesions that will be treated and avoid progression to cancer
- ✓ Screening programmes are effective in reducing the incidence and the mortality from colorectal cancer
- ✓ Most of EU Member States have an organised colorectal screening programme, using the FIT test
- ✓ Participation to the screening programme is suboptimal
- ✓ New strategies to increase participation to screening are needed

**Thank you for your attention!**



**International Agency  
for Research on Cancer**

