

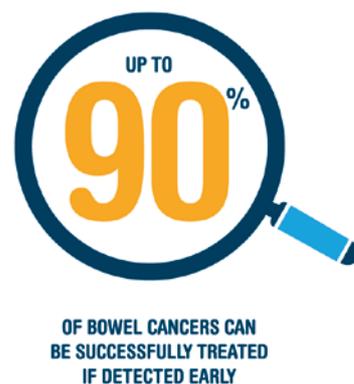
New NHMRC approved Guidelines and what they mean for the National Bowel Cancer Screening Program

Clinical Guidelines for bowel screening

The Cancer Council Australia has released the 2017 *Clinical Practice Guidelines for the Prevention, Early Detection and Management of Colorectal Cancer*, which has been approved by the National Health and Medical Research Council (NHMRC).

The revised Guidelines have been developed after a rigorous analysis of scientific evidence, considering

- screening test accuracy;
- risks and benefits of screening;
- cost-effectiveness; and
- screening age.



The evidence overwhelmingly supports the **National Bowel Cancer Screening Program** as the best model for population screening in Australia:

The recommended strategy for population screening in Australia, directed at those of average risk of bowel cancer and without relevant symptoms, is immunochemical faecal occult blood testing every two years, starting at age 50 years and continuing to age 74 years.

Importantly, the Guidelines do not recommend changing the screening age or method of screening.

Why is bowel screening important?



BECAUSE IT CAN
DETECT BOWEL CANCER BEFORE
SYMPTOMS APPEAR

Bowel (colorectal) cancer is Australia's second largest cancer killer; yet it is also one of the most preventable and treatable cancers. If found early 9 out of 10 cases of bowel cancer can be successfully treated.

Already the Program is saving lives; if participation can increase to 60 per cent it could save over **83,800 lives by 2040**.

How does the National Bowel Cancer Screening Program work?

The Program mails eligible 50—74 year olds bowel screening kits to complete at home. The Program is expanding and \$95.9 million was provided in the 2014 Budget to accelerate the expansion—from 2020 all eligible people aged 50—74 years will be invited to screen every two years. Eligibility for receiving the National Bowel Cancer screening kit can be checked through the [online eligibility calculator](http://www.cancerscreening.gov.au/eligibility) (www.cancerscreening.gov.au/eligibility).

Why should your patients participate in the Program?

Whenever possible, eligible patients aged 50 to 74 should be encouraged to screen through the Program. The benefits include:

FREE – The Program provides a free test kit and pathology testing to all eligible Australians aged 50 to 74.

ONE REGISTER – Participant details are safely recorded in the Program Register, including colonoscopy and pathology results.

RE-INVITED – the Program will re-invite participants at regular two-yearly intervals.

FOLLOW-UP – Participants receive dedicated follow-up from the Program following a positive test result to ensure they receive appropriate follow-up and care throughout the screening pathway.

PRIORITY TREATMENT – In some states and territories, patients can be fast-tracked for colonoscopy if they have received a positive test result in the Program.

NATIONAL MONITORING – Information from the Register is used to assist the delivery of the Program and monitor the Program's performance and population health outcomes.

More information

Go to [the Cancer Screening website](http://www.cancerscreening.gov.au) or call the Program Info Line on 1800 118 868.

How you can help

The Guidelines recognise the **critical role of GPs and primary healthcare practices** in supporting this life-saving Program. Encouragement by GPs and practice staff substantially boosts participation in screening, and can increase the Program's effectiveness and cost-effectiveness.

Promote the Program

- Order brochures, flyers and posters for your practice via the cancer screening [website](#)

Understand family history

- The guidelines for screening based on family history have changed. Read the new criteria for risk categories and follow the recommended screening strategies.

Take a patient audit

- Identify which patients in your practice are aged 49 to 74, and set reminders to discuss screening with them when they are in the practice.

Send endorsement letters

- There is strong evidence that a letter signed by a person's GP endorsing bowel screening is an effective method to increase participation. GPs can download a [letter template](#) to send to patients outside of regular consultations. It is recommended that letters be sent to 49 year old patients to encourage them to do the test when they receive their first invitation around their 50th birthday.

Don't over-screen!

- There is no evidence to support colonoscopy for screening purposes, but evidence suggests that **13% of people aged 50-74 are over-screened** using colonoscopy. The Guidelines state that GPs should discuss the relative harms and benefits of colonoscopy with their patients, and discourage inappropriate use of colonoscopy as a screening method. This will reduce the demand on services and ensure patients at highest risk of bowel cancer have timely access to colonoscopy.