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Bowel Cancer UK's position: Delivering an optimal bowel cancer screening programme

Background

[Bowel cancer screening](#) of the eligible population provides the greatest opportunity to detect bowel cancer early, when treatment has the best chance of working. Screening can also prevent bowel cancer through finding and removing polyps (pre-cancerous growths) which might develop into cancer.

The UK National Screening Committee (UK NSC) is the body responsible for reviewing research to ensure national screening programmes in the UK remain effective. From time to time they advise Governments and the NHS in all four UK nations on changes that can improve screening programmes.

What does an optimal bowel cancer screening programme look like?

An optimal bowel cancer screening programme, as recommended by the UK NSC, involves screening men and women between the ages of 50 and 74 every two years using the Faecal Immunochemical Test (FIT) at a sensitivity of 20 µg blood/g poo.¹ This test is simpler and more accurate than the previous test, the guaiac faecal occult blood test (gFOBt), and is a quantitative test, meaning the sensitivity to blood can be adjusted.

If optimal screening were introduced across the UK, it would be a game changer for diagnosing the disease earlier, with the potential to detect twice as many cancers and four times as many polyps. In addition, FIT has already proven to significantly increase uptake in screening, particularly for previous non-responders and first-timers, as well as hard to reach groups.² With around 4,500 people between the ages of 50 and 59 diagnosed with bowel cancer each year and a further 1,200 in this age group dying from the disease, screening from the age of 50 will help save more lives.

It is vital each UK nation has an optimal bowel cancer screening programme in line with the UK NSC recommendations, which recommends FIT at a sensitivity level of 20 µg/g to men and women aged between 50 and 74.

In order for vital improvements to bowel cancer screening programmes to be achieved, the NHS needs sufficient staff to deal with the increase in demand this will bring. As it stands, hospitals across the UK simply do not have enough staff in services that diagnose bowel cancer, in particular endoscopy and pathology units, to meet this need.

¹ [https://bowelcancerorguk.s3.amazonaws.com/June2018UKNSCminutes\(draft\).pdf](https://bowelcancerorguk.s3.amazonaws.com/June2018UKNSCminutes(draft).pdf)

² Moss, S. et al (2017). Increased uptake and improved outcomes of bowel cancer screening with a faecal immunochemical test: results from a pilot study within the national screening programme in England. *Gut* 66:1631-1644.

Each nation in the UK must develop and implement a fully funded long term plan to increase capacity in NHS endoscopy and pathology services, so that they can cope with the growing demand an optimised bowel cancer screening programme would bring.

The state of bowel cancer screening programmes in the four UK nations

UK National Screening Committee recommendations	Using FIT	Sensitivity of FIT is 20 µg/g	Screening from age 50
England	✓	✗ *currently 120 ug/g	✗ *committed to introduce
Northern Ireland	✗ *committed to introduce	✗	✗
Scotland	✓	✗ *currently 80 ug/g	✓
Wales	✓	✗ *currently 160 ug/g	✗ *committed to introduce

In England and Scotland, people are able to self-refer back into the programme once they reach their 75th birthday. However, this is not available currently in Wales and Northern Ireland.

England

The Bowel Cancer Screening Programme (BCSP) currently screens all men and women between the ages of 60 and 74 using the new FIT at a less sensitive level (120 µg/g) than is optimal under the UK NSC recommendation, meaning less cancers will be picked up.

In August 2018, the Government in England committed to lowering the bowel cancer screening age from 60 to 50. However, a confirmed timeframe to deliver this promise has not yet been decided.

The Department of Health and Social Care must:

- Work with NHS England and Public Health England to develop a clear plan that sets out a sensible but ambitious timeframe to lower the screening age from 60 to 50 and improve the sensitivity of FIT to the recommended 20 µg/g, as committed to in the NHS Long Term Plan.
- Ensure the final NHS People Plan is fully funded and urgently addresses how current endoscopy and pathology services will cope with the implementation of an optimal bowel cancer screening programme both in the immediate future and over the next ten years.

Wales

Bowel Screening Wales (BSW) currently screens all men and women between the ages of 60 and 74 using the new FIT at a less sensitive level (150 µg/g) than is optimal under the UK NSC recommendation, meaning more cancers may be missed.

In August 2018, Wales committed to lowering the bowel cancer screening age from 60 to 50 following the UK NSC's recommendation. BSW is planning to reduce the screening age to 50 by 2021 and also increase the sensitivity of FIT to 80 µg/g by 2023.

Wales and Northern Ireland do not allow people who are 75 and over to opt back into the screening programme. This puts this group of people at more risk of developing bowel cancer in later life than their English and Scottish counterparts.

The Welsh Government must:

- **Ensure they deliver their commitment that the screening age is lowered to 50 by 2021, and the sensitivity of FIT is increased to 80 µg/g by 2023, with the ambition to increase the sensitivity to 20 µg/g over time.**
- **Work with the Welsh Screening Committee to enable people who are 75 and over to choose to opt back into the bowel screening programme to ensure they have the best opportunity of an early diagnosis later in life.**
- **Work with the Endoscopy Programme Board and Health Boards to develop and implement a fully funded national endoscopy action plan that enables current endoscopy and pathology services to deliver an optimal bowel screening programme.**

Scotland

The Scottish Bowel Screening Programme (SBSP) is the only country in the UK that screens between the ages of 50 and 74 using FIT, but at a reduced sensitivity threshold of 80 µg/g. As the first UK nation to introduce FIT, they found it increased participation in the screening programme by 10%³. Whilst the sensitivity level of FIT is higher than the screening programmes in England and Wales, it is still lower than recommended by UK NSC (20 µg/g).

The Scottish Government must:

- **Set out a sensible but ambitious timeframe to improve the sensitivity of FIT from 80 µg/g to the recommended 20 µg/g, in line with increasing capacity in endoscopy and pathology services.**
- **Urgently address how current endoscopy and pathology services will cope with the implementation of an optimal bowel cancer screening programme through delivering their fully funded national endoscopy action plan.**

³ <https://www.isdscotland.org/Health-Topics/Cancer/Publications/2019-02-05/2019-02-05-Bowel-Screening-Publication-Summary.pdf>

Northern Ireland

The Bowel Cancer Screening Programme (BCSP) in Northern Ireland currently screens all men and women between the ages of 60 and 74 using the guaiac faecal occult blood test (gFOBT). The Department of Health in Northern Ireland has pledged to introduce FIT from 2020, however the sensitivity level has yet to be determined. As it stands, Northern Ireland is the only part of the UK that hasn't committed to lowering the screening age from 60 to 50 in line with UK NSC guidelines.

Northern Ireland, like Wales, does not allow people 75 and over to opt back into the screening programme. This puts this group of people in Northern Ireland at more risk of developing bowel cancer in later life than those in England and Scotland.

The Department of Health in Northern Ireland must:

- **Ensure FIT, at an appropriate sensitivity level, is introduced into the BSCP in Northern Ireland by 2020 as promised.**
- **Guarantee that the new Cancer Strategy includes a sensible but ambitious timeframe to implement an optimal bowel cancer screening programme that lowers the screening age from 60 to 50 and increases sensitivity of FIT to 20 µg/g.**
- **Guarantee that the new Cancer Strategy has a plan to enable people who are 75 and over to choose to opt back into the bowel screening programme to ensure they have the best opportunity of an early diagnosis later in life.**
- **Develop a clear plan to ensure current and future endoscopy and pathology services have the capacity to deliver an optimal bowel cancer screening programme.**