



FIT bowel screening in Northern Ireland



From December 2020 Faecal Immunochemical testing (FIT) will replace guaiac Faecal Occult Blood testing (gFOBT) in the NHS Bowel Cancer Screening Programme in Northern Ireland.

People aged **60–74** are invited to take part in bowel cancer screening every two years.

FIT screening facts

- Will be introduced in Northern Ireland with a threshold of 150µg haemoglobin/g faeces
- Potential to detect more cancers and pre-cancerous adenomas through screening
- Further information about roll-out is expected from PH Agency NI in due course

The use of FIT in bowel cancer screening in the rest of the UK has indicated improved participation. Uptake was shown to be higher with FIT than with gFOBT for all deprivation quintiles and in previous non-responders.

Why FIT is better



Only one faecal sample is required making the test easier and more convenient



Shown to markedly increase participation, especially in men



More sensitive, so will have a higher advanced adenoma detection rate and potentially a higher bowel cancer detection rate



Cost effective alternative



Screening is an effective way to detect bowel cancer before symptoms show. When diagnosed at the earliest stage, more than 9 in 10 people will survive bowel cancer for more than 5 years.¹ The switch to FIT may mean you have more patients with questions about screening, and about bowel screening in particular.

What you could do



Break down practical barriers by explaining how to do the test. Direct patients to a short animation at cruk.org/bowelscreening. You can also link to this on your practice website.



Sign post to good quality resources, such as the free Bowel Screening Centre Helpline (**0800 015 2514**) or cruk.org/bowelscreening



Remind patients that screening works better if they take part each time they're invited even if their previous result was negative.

Be mindful not to be over-reassured by a patient's previous normal screening result. Follow clinical guidelines for how to manage symptomatic patients regardless of screening status. Reinforce the need for patients to be aware of key signs and symptoms of bowel cancer, and to seek medical advice if they notice anything new or unusual.

Supporting your patients to access screening



Support your patients so that they can make an informed decision about whether they wish to take part in screening or not.

As with all screening, there are harms as well as benefits of taking part.

Providing training to the whole practice team (clinical and/or non-clinical) will help them understand and be able to explain the importance of bowel screening in diagnosing bowel cancer early, giving people the best chance of successful treatment.

If a patient changes their mind about taking the test they can call **0800 015 2514** to request a kit.

Find out more by visiting cruk.org/bowelscreeninghub or see Public Health Agency's information on **Bowel cancer screening**



¹ Cancer Research UK. Bowel cancer statistics <https://www.cancerresearchuk.org/health-professional/cancer-statistics/statistics-by-cancer-type/bowel-cancer#heading=Two> Accessed December 2020