

# CANCER EDUCATION DAY

## **Colorectal Screening Program – ColonCancerCheck**

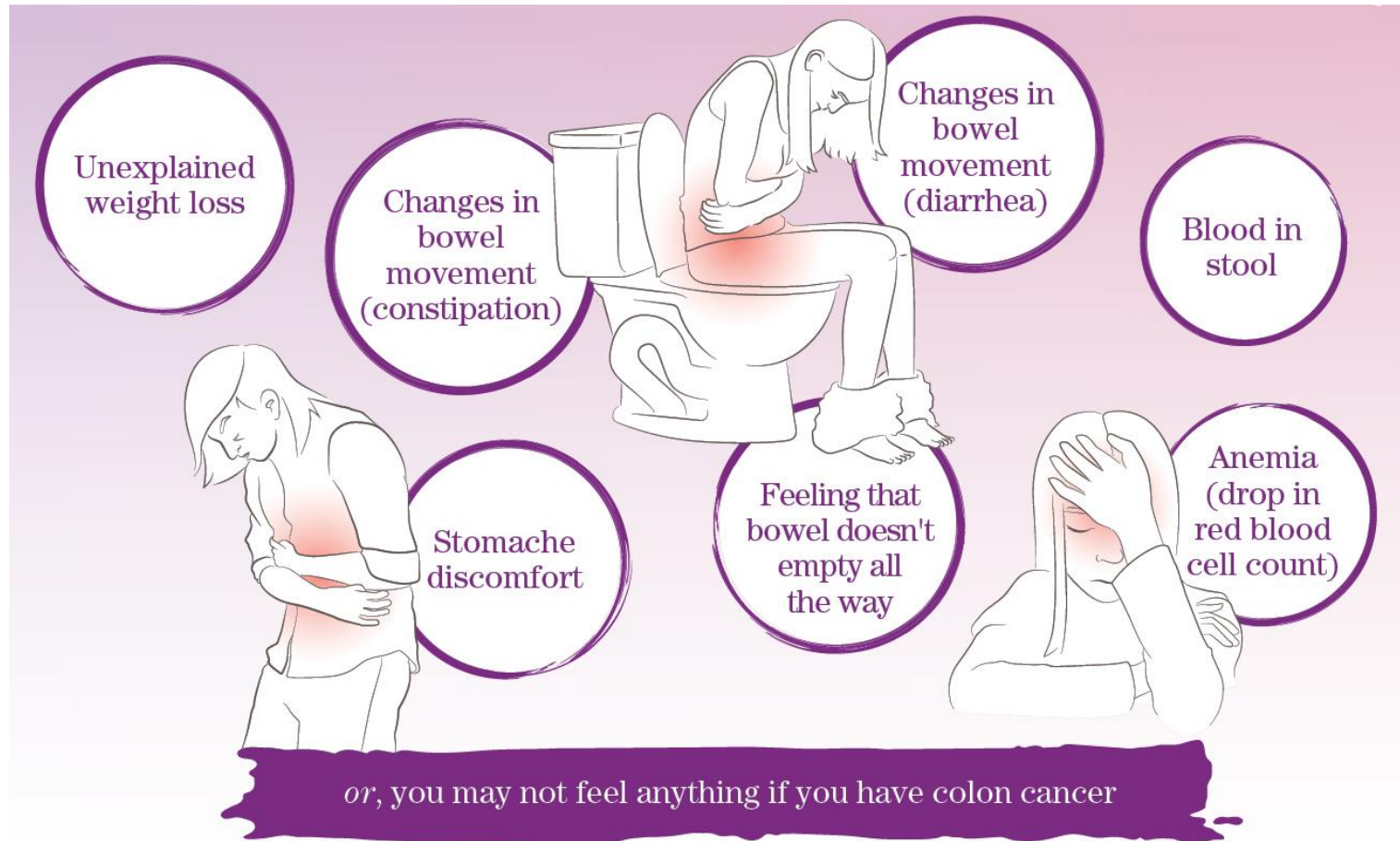
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November 12, 2021

# What is ColonCancerCheck?

- An organized, evidence-based screening program in Ontario
- Launched in 2008
- Initiated by Primary Care Providers
- For patients who do not have any colorectal cancer symptoms (i.e., asymptomatic)

# Symptoms of Colorectal Cancer



# Goals of ColonCancerCheck

- Increase **screening** participation
- Improve **follow-up** for participants with abnormal results
- Find cancer as **early** as possible when treatment is more effective

# Eligibility Criteria: Average Risk

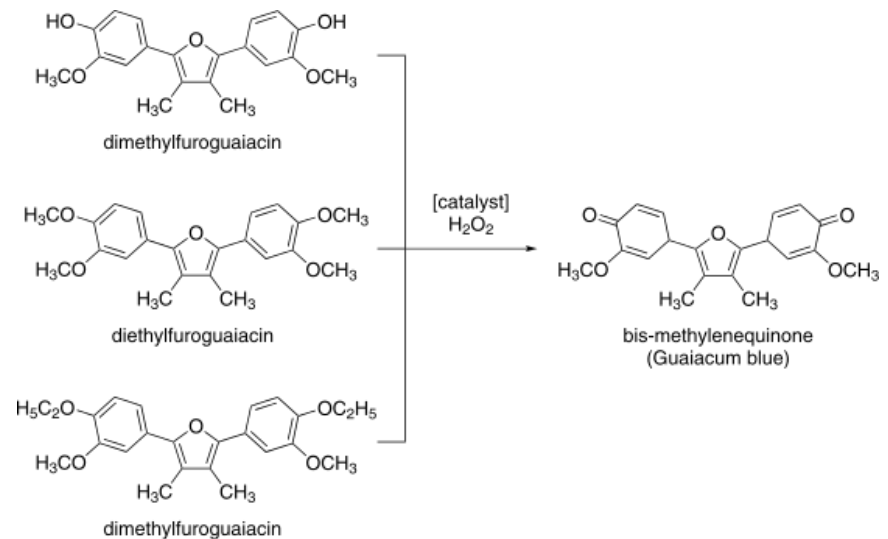
<b>Target Age</b>	50 years old – 74 years old
<b>Screening Test</b>	Fecal Immunochemical Test (FIT)
<b>Screening Interval</b>	Every 2 years
<b>Eligibility Criteria</b>	<ul style="list-style-type: none"><li>• No first-degree relative (parent, brother, sister or child) who has been diagnosed with colorectal cancer</li><li>• No personal history of pre-cancerous colorectal polyps requiring surveillance</li><li>• No history of inflammatory bowel disease (i.e., Crohn's disease involving the colon or ulcerative colitis)</li><li>• No symptoms of colorectal cancer</li></ul>



# FOBT vs FIT

# FOBT – Fecal Occult Blood Test

- Assesses for occult blood in the stool
- The heme occult testing card has alpha guaiaconic acid (guaiac) impregnated paper
- A hydrogen peroxide reagent is then added to the paper
- If heme is present in the stool sample, the alpha guaiaconic acid is oxidized by the hydrogen peroxide to a blue-coloured quinone



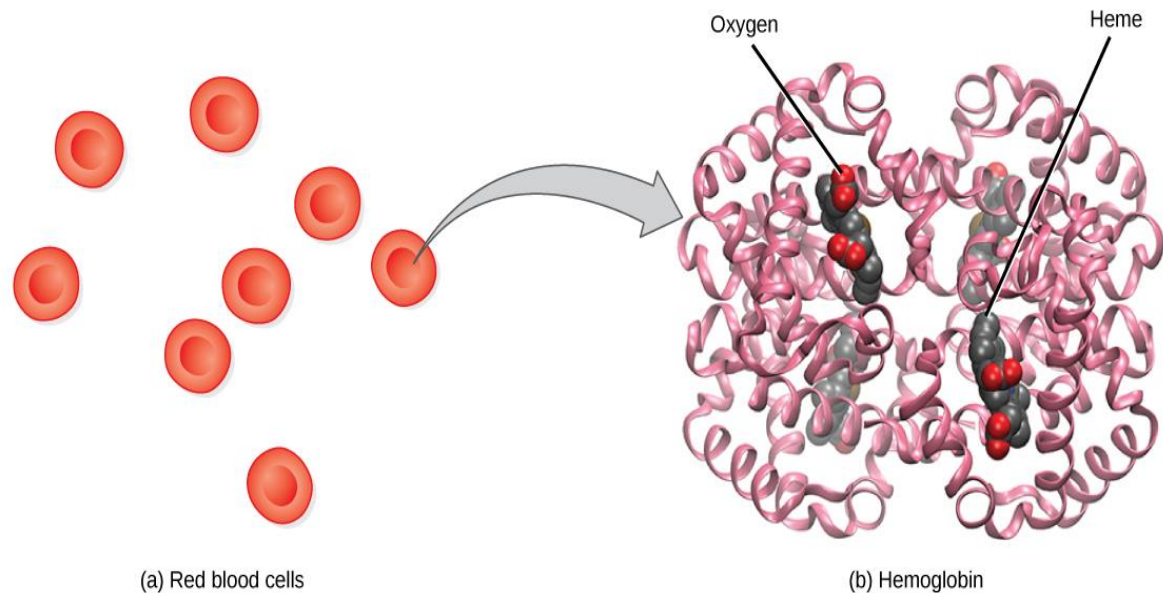
# FOBT Interfering Factors

- Medications:
  - acetylsalicylic acid
  - unfractionated or low-molecular-weight heparin
  - Warfarin
  - Clopidogrel
  - nonsteroidal anti-inflammatory drugs
  - selective serotonin reuptake inhibitors
- red or rare meat
- raw fruits and vegetables, including but not limited to:
  - Horseradish
  - raw turnips
  - Cantaloupe
  - Broccoli
  - Cauliflower
  - Parsnips
  - red radishes
- Vitamin C



# FIT – Fecal Immunochemical Test

- Measures human hemoglobin (a protein in red blood cells)
  - Therefore unaffected by hemoglobin found in some foods
- The stools sample is combined with a liquid and then placed in a machine or device with antibodies, a type of protein, that specifically bind to hemoglobin
- The machine indicates whether hemoglobin is present
- Only detects intact hemoglobin
  - Therefore does not detect partially digested hemoglobin originating in the upper GI system



# Important FIT Timelines

- Encourage patients to complete and mail back the FIT Kit within 2-14 days of receiving it
- Patients must mail the completed FIT back to LifeLabs a minimum of 2 weeks before the expiry date printed on the tube
- If the sample is received after the expiry date, LifeLabs cannot test it and you will need to order a new FIT Kit for the patient
- Primary Care Providers must refer patients for a follow-up colonoscopy using the FIT+ Referral Form **within 7 days of receiving the FIT+ result**; otherwise the patient may not be scoped within the OH-CCO evidence-based timeframe
  - Reminder: Patients do not receive a copy of their FIT result

# FIT+ Referral Form - Revised

**Bluewater Health**  
 Phone: 519-464-4400 ext. 5347  
 Fax: 519-346-4724

**Windsor Regional Hospital**  
 Phone: 519-985-2695  
 Fax: 519-985-2681

**Erie Shores Healthcare**  
 Phone: 519-326-2373 ext. 4136  
 Fax: 519-322-0041

**Rose City Endoscopy**  
 Phone: 519-254-4154  
 Fax: 519-254-4158

**Chatham-Kent Health Alliance**  
 Phone: 519-437-6125  
 Fax: 519-437-6126

**Southern Ontario Endoscopy Centre**  
 Phone: 519-915-9494  
 Fax: 519-915-9493

**Endoscopy Office Use Only**

Date (mm/dd/yyyy)

Time

Physician

## Fecal Immunochemical Test (FIT) Positive Referral Form

**Directions:**  
 Please check each box once completed.

Attach a copy of the positive FIT result received from the lab to a complete, signed copy of the referral form.

Fax to your preferred central intake facility above within one week of receiving the positive FIT result.

**Notes:**

- Incomplete referral forms, including those without the positive FIT result attached, will not be processed.
- Patients must be scoped within 56 days of a positive FIT result.
- If the patient does not read and/or speak English they need to be accompanied by an interpreter at the time of the appointment.
- Direct any questions to your preferred central intake facility above.

**Patient's Information:**

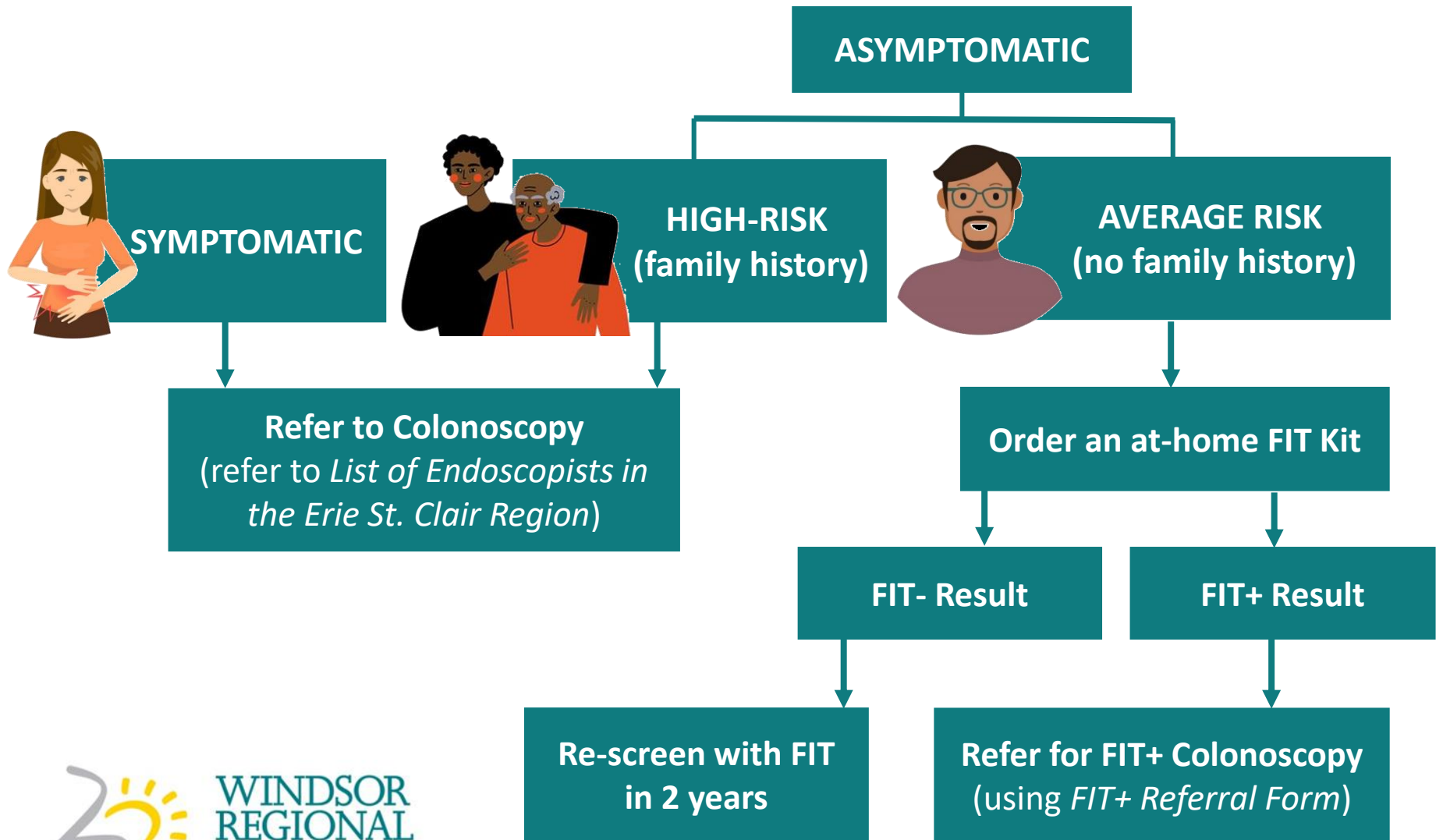
First Name     
  Last Name     
  Date of Birth (mm/dd/yyyy)     
 Sex:  male  female  unspecified     
 Telephone: H  Alt.

# Eligibility Criteria: High Risk

<b>Target Age</b>	50* years old – 74 years old
<b>Screening Test</b>	Colonoscopy
<b>Eligibility Criteria</b>	<ul style="list-style-type: none"><li>• One or more first-degree relatives (parent, brother, sister or child) diagnosed with colorectal cancer</li></ul>
<b>Screening Interval</b>	<ul style="list-style-type: none"><li>• Every 5 years (if first-degree relative was diagnosed before age 60)</li><li>• Every 10 years (if first-degree relative was diagnosed after age 60)</li></ul>

\*Age 50, or 10 years earlier than the age their relative was diagnosed with colorectal cancer, whichever comes first.

# Overview



# Inappropriate Use of FIT

Situation	Key Message
FIT use in patients <b>with symptoms</b>	<ul style="list-style-type: none"><li>• Screening is not appropriate for people with symptoms</li><li>• Send an urgent referral <u>directly to an Endoscopist</u> for colonoscopy</li></ul>
FIT use in patients <b>&lt;50 years</b>	<ul style="list-style-type: none"><li>• FIT for people in eligible age range (50–74)</li><li>• ~6% of colorectal cancer cases occur in people &lt;50 → screening is not recommended for younger people at average risk</li></ul>
FIT use in patients <b>&gt;74 years</b>	<ul style="list-style-type: none"><li>• People &gt;74 do not benefit as much and are at more risk of complications</li></ul>
FIT use in patients with a <b>1<sup>st</sup> degree relative with colorectal cancer</b>	<ul style="list-style-type: none"><li>• FIT is not the first line of screening</li><li>• Send a referral <u>directly to an Endoscopist</u> for colonoscopy</li></ul>
<b>FIT+ follow-up with FIT</b>	<ul style="list-style-type: none"><li>• FIT+ is an urgent indication for colonoscopy (colonoscopy recommended within 8 weeks of FIT+)</li><li>• Repeat FIT with negative result does not rule out colorectal cancer</li></ul>

# CCC and COVID-19

**June 24, 2019**

FIT launched in Ontario  
(replaces FOBT)



**March 23, 2020**

Routine cancer screening suspended  
by OH-CCO



**August 26, 2020**

CCC suspension lifted for high-risk patients only



**October 20, 2020**

CCC suspension fully lifted – return to routine screening

**9 out of 10 people can be cured  
if colon cancer is caught early**



**Get checked**





# Call to Action

- Review your Screening Activity Report (SAR) and Electronic Medical Record (EMR)
  - **Mail FIT Kits** to due/overdue average risk patients 50-74 years old and
  - **Book colonoscopies** for due/overdue high-risk patients 50-74 years old
- Remind patients that Cancer does not stop for COVID-19, catching up on routine cancer screening is extremely important at this time
- Utilize the tools and resources provided in the *ColonCancerCheck – Supplementary Resources* emailed prior to the event
  - **Resources for Primary Care Providers:**  
<https://www.cancercareontario.ca/en/guidelines-advice/cancer-continuum/screening/resources-healthcare-providers>
  - **Toolkit for Ontario Endoscopists:**  
<https://www.cancercareontario.ca/en/guidelines-advice-cancer-continuum/screening/resources-healthcare-providers/toolkit-endoscopists>

**Thank you for all you do to promote  
routine cancer screening with  
your patients**