Colorectal Cancer Screening (FOBT)

Rates of colorectal cancer screening are slowly increasing but remain very low in Ontario. In response, Cancer Care Ontario and the Ministry of Health and Long-Term Care launched Canada’s first population-based colorectal screening program in 2007.

<table>
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<th>Goal</th>
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<td>Rates of use of FOBT in eligible adults</td>
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What's new this year?
This report presents new data for 2005.

See table next page.
Colorectal Cancer Screening (FOBT)

Percent of men & women (ages 50-74) who received a fecal occult blood test (FOBT) in the past two years, 2000-2005, by LHIN

Target: Increase to 90% by 2020

LHINs / Regional Cancer Programs

Sources: Ontario Health Insurance Plan database; Registered Persons Database; Statistics Canada population estimates

Notes:

Analysis conducted by scientists in the Cancer Program at the Institute for Clinical Evaluative Sciences (ICES) in Toronto

Ontario

Erie St. Clair

South West

Waterloo Wellington

Haldimand Norfolk Brant

Central West

Mississauga Halton

Toronto Central

Central East

South East

Champlain

North Simcoe Muskoka

North East

North West
What do the results show?

- Across Ontario, FOBT rates are extremely low; the greatest percentage of people who had an FOBT in any LHIN was 20% (Central LHIN).  
  Figure 1
- FOBT rates are steadily increasing, but remain very low in Ontario.  
  Figure 1
- Slightly more women receive the FOBT than men.  
  Figure 2

Why is this important to patient care?

- Regular screening using the FOBT has been shown to reduce the risk of dying from colorectal cancer. FOBT is a recommended screening test for those who have average risk for colorectal cancer. The probability of curing colorectal cancer is 90% when detected early.
• Colorectal cancer death rates could be reduced by 16% if screen-eligible adults (those aged 50-74) had an FOBT once every one or two years. At the same time, the number of people diagnosed with colorectal cancer could be reduced by 18%. ¹
• Cancer Care Ontario and the Ministry of Health and Long-Term Care launched Canada's first population-based colorectal screening program in 2007. Organized cancer screening programs have been shown to be more effective and efficient than ad hoc screening.²
• Cancer Care Ontario's and the Canadian Cancer Society's goal is that, by the year 2020, 90% of screen-eligible Ontarians will be screened in the organized colorectal cancer screening program.³

How does Ontario compare?
• Ontario has one of the highest rates of colorectal cancer in the world. Colorectal cancer is one of the four most common cancers diagnosed in Ontario, and, among non-smokers, colorectal cancer is the most common cause of cancer death.⁴
• Self-reported FOBT screening rates are low in provinces across the country.⁵
• Recent data from Alberta show similar results to Ontario. Between 2000 and 2002, self-reported FOBT rates over the prior two years among men and women aged 50-69 were 7.7% (12.5% among those aged 60-69. ⁶
• In 2004, 57% of adults in the U.S. aged 50 years or older reported having had a FOBT or lower endoscopy. However, the proportion of this same population who had completed a FOBT was only 18.7% ⁷ similar to Ontario’s rate.
• Other countries that have implemented population-based FOBT screening programs have achieved participation rates of between 45% (Australia) and 70% (Finland) among the invited population in their programs' initial years of implementation.
• In the U.S., the Veterans' Administration screened about 75% of their plan members for colorectal cancer in 2003, 90% of whom were screened with FOBT⁸
• Organized colorectal cancer screening programs using FOBT have been implemented in the U.K., Australia, Italy, Finland and Israel.

What is being done?
• Cancer Care Ontario and the Ministry of Health and Long-Term Care launched Canada's first population-based colorectal screening program in 2007.
• The Ministry will invest $193.5 million over the next five years to fully implement this program. This will be Canada's first such program. Family physicians, along with gastroenterologists and general surgeons, will play a central role in delivering this program.

Technical Information

Definition
• The percentage of Ontario men and women of screen-eligible age (ages 50-74), who have had at least one FOBT in the prior two years, during 2000-2005. All rates adjusted to the 1991 Canadian population. Target based on colorectal cancer screening by any endorsed, evidence-based test.

Data Sources
• Ontario Health Insurance Plan database (lab and individual physician billing codes. Excludes FOBTs done in hospital labs.)
• Registered Persons Database
• Statistics Canada population estimates

Data Quality

Completeness
• The data do not include FOBTs done in hospital.

Accuracy
• The physician billing data for FOBT do not include tests that were not billed through the Ontario Health Insurance Plan.
• Some of the FOBTs included here may have been done for diagnostic purposes (e.g. for patients experiencing symptoms) rather than for screening.

Notes


5. 2003 Canadian Community Health Survey (CCHS), Cycle 2.1, Statistics Canada.


