



# FIT bowel screening in Northern Ireland



In January 2021, the Faecal Immunochemical Test (FIT) replaced the guaiac Faecal Occult Blood Test (gFOBT) in the Bowel Cancer Screening Programme in Northern Ireland.

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.<sup>1</sup>

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
- 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

The switch to FIT may mean you have more patients with questions about screening, and about bowel screening in particular.

## What you could do

- Address** practical barriers by directing patients to a short animation [here](#) or at [cruk.org/bowelscreening](http://cruk.org/bowelscreening) which explains how to do the test. You can also link to this on your practice website.
- Sign post** to free patient-facing resources at [cruk.org/bowelscreening](http://cruk.org/bowelscreening) or contact the Bowel Screening Centre Helpline (0800 015 2514).
- Remind** patients that it is important to participate in screening each time they are invited, even if their previous result was negative.

## 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.

Be mindful not to be over-reassured by a patient's previous normal screening result. Follow **Northern Ireland Cancer Network (NICaN) 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.

Find out more by visiting [cruk.org/FIT](http://cruk.org/FIT) or [nidirect.gov.uk/articles/bowel-cancer-screening](http://nidirect.gov.uk/articles/bowel-cancer-screening)



If you have any comments on this document or useful information, please get in touch at [earlydiagnosis@cancer.org.uk](mailto:earlydiagnosis@cancer.org.uk)

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<sup>1</sup> Cancer Research UK. Bowel cancer statistics <https://www.cancerresearchuk.org/health-professional/cancer-statistics/statistics-by-cancer-type/bowel-cancer#heading-Two> [Accessed January 2021]