

# Bowel Cancer Screening Campaign Toolkit

## Campaign Overview

The campaign "Every Kit Counts" encourages Health Practitioners to help their patients participate in the National Bowel Cancer Screening Program (NBCSP). Currently, only 43.5% of eligible Australians participate in the NBCSP. Modelling research shows that by increasing NBCSP participation to 60%, we can save 84,000 lives by 2040 (Lew et al. 2017).

## Facts about Bowel Cancer

- Bowel cancer is the second biggest cause of cancer death in Australia. It kills more Australians than breast, prostate or skin cancer.
- If detected early, more than 90% of bowel cancers can be treated successfully.
- In Australia in 2021, it is estimated that about 7,365 people aged 50-74 will be diagnosed with bowel cancer (AIHW, 2020)
- More than 1200 Victorians died from bowel cancer in 2019 (VCR, 2020).
- Some underscreened communities, such as Aboriginal and/or Torres Strait Islander people and culturally diverse communities have lower rates of screening, higher rates of bowel cancer and poorer cancer outcomes.

## The National Bowel Cancer Screening Program (NBCSP)

- The NBCSP was implemented in 2006 with the aim to reduce bowel cancer incidence and mortality in Australia through screening to detect cancers and pre-cancerous lesions in their early stages.
- Bowel cancers detected through the NBCSP are more likely to be diagnosed at an earlier stage of cancer spread compared with bowel cancers later diagnosed in invitees who did not participate in the NBCSP.
- The NBCSP sends screening invitations to Australians aged 50-74 every two years.
- The Participant Follow Up Function provides a safety net to ensure patients receive timely clinical follow up after a positive iFOBT result.
- Latest data shows only 46% of eligible Victorians participate in the NBCSP (AIHW, 2020).

**The NBCSP is one of Australia's most important public health programs. The program has the potential to prevent up to 84,000 bowel cancer deaths by 2040 if program participation increases to 60%.**

## National Cancer Screening Register

- The National Cancer Screening Register (NCSR) contains a single source for complete patient bowel (and cervical) screening history.
- The NCSR enables Health Practitioners to effectively discuss bowel cancer screening and increase uptake in their practices by accessing up-to-date information about their patients' screening histories and the ability to order a NBCSP kit, delivered to their patient's home address.
- The NCSR can integrate with some clinical information systems (Best Practice and Medical Director)
- The NCSR provides a Healthcare Provider Portal to enable Health Practitioners to access bowel (and cervical) screening data electronically in a self-service fashion.
- You can access information about NCSR clinical system integration and portal here:  
<https://ncsr.gov.au/content/ncsr/en/healthcare-providers.html>











## iFOBT vs Colonoscopy

- Screening via immunochemical FOBT (iFOBT) is the recommended primary screening test for asymptomatic average risk patients (not colonoscopy).
- An iFOBT is a non-invasive test that detects microscopic amounts of blood in the bowel motion, a common sign of a bowel abnormality such as an adenoma or cancer. The iFOBT identifies spontaneous bleeding that can occur from cancers and pre-cancerous polyps. The presence of blood in the faeces prompts further diagnostic assessment.
- Positive iFOBT results are usually followed by colonoscopy, which is an accurate means of visualising the colon.

## How can I improve bowel cancer screening participation?

- Demonstrate the use of the NBCSP kit to eligible patients.
- Promote the NBCSP in your practice via posters and brochures (in languages relevant to your patients).
- Undertake patient audits.
- Send reminders (consider sending letters/ SMS or even telephoning patients who are eligible for the NBCSP).
- Send endorsement SMS or letters to patients shortly before their 50th birthday.
- Follow recommended screening strategies based on the Clinical practice guidelines for the prevention, early detection and management of colorectal cancer.
- Consider appropriate use of colonoscopy (evaluate relative harms vs benefits in asymptomatic people at average risk of bowel cancer).
- Have opportunistic conversations about bowel screening at other key health checks.

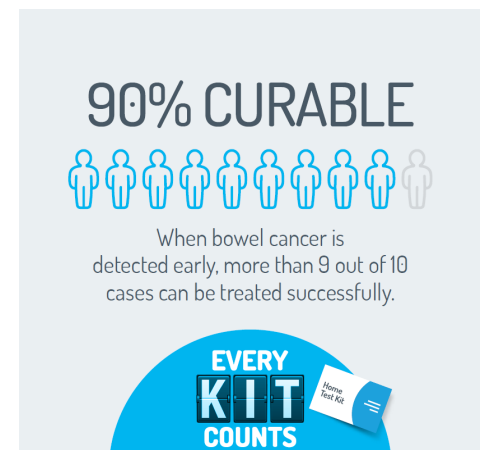
	National Bowel Cancer Screening Program (iFOBT) Population-based screening	Colonoscopy Diagnostic test
	To detect bowel cancer early and reduce mortality	To investigate: <ul style="list-style-type: none"> <li>• clinical symptoms suggestive of bowel cancer</li> <li>• people with a positive iFOBT</li> <li>• people with a significant family history of bowel cancer.</li> </ul> Refer to the Colonoscopy Categorisation Guidelines
	Asymptomatic people aged 50-74	Symptomatic patients - any age or those with a positive iFOBT
	No referral	Referral required if colonoscopy is clinically indicated
	Completed at home	Procedure undertaken in a health service
	Every two years	When clinically indicated. Refer to the Clinical practice guidelines for the prevention, early detection and management of colorectal cancer
	Free	Partial rebate from Medicare/ bulk bill if eligible Out of pocket costs for private colonoscopy services
	Results to patients and their nominated GP	Results to referring doctor
	Non-invasive: No risks of bleeds or bowel perforation <sup>1</sup>	Invasive procedure requiring bowel prep before. Risk of bleeds or bowel perforation

1. GY, Walker J, Bickerstaffe A, et al. The CRISP-Q study: Communicating the risks and benefits of colorectal cancer screening. Aust J Gen Pract 2018;47(3):139-44

- GPs are vital in helping eligible Australians aged 50-74 understand the importance of bowel screening and ultimately participating in the NBCSP.
- Every patient that a GP can successfully encourage to participate in screening makes a difference.
- The NCSR is an important tool to help you and your practice staff help increase screening uptake amongst underscreened patients.

## Social Media Assets

Please use these assets to help us promote the campaign on social media. You can download the assets [here](#).



### About VCS

VCS Pathology, a division of VCS Foundation Limited, is a leading laboratory and education service that specialises in HPV testing, histopathology, cytology and related molecular microbiology, COVID-19 and respiratory testing, clinical support and advice. VCS is funded by the Victorian Department of Health to operate the Participant Follow-up Function (PFUF) to support the Victorian component of the NBCSP. PFUF is performed in conjunction with safety net reminder letters sent to ensure that participants with a positive FOBT who have not yet visited a health care professional or undertaken an assessment colonoscopy, progress along the screening pathway and receive the appropriate recommended care. VCS thanks the Victorian Department of Health for their generous funding towards this campaign.

[www.vcs.org.au](http://www.vcs.org.au)