

# Faecal immunochemical tests versus colonoscopy for post-polypectomy surveillance: an accuracy, acceptability and economic study

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†In memoriam

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## Plain English summary

### **Post-polypectomy surveillance: FIT vs. colonoscopy**

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## Plain English summary

**B**owel cancer typically develops from lesions called adenomas. Although common, most adenomas do not develop into cancer. Adenomas detected during a bowel examination, called a colonoscopy, are usually removed during this procedure. However, even after adenoma removal, some patients are still at greater risk of bowel cancer.

Depending on the number and size of adenomas found, patients are invited for a colonoscopy after 1, 3 or 5 years. Most of these additional colonoscopies will not detect cancer and they are expensive, often uncomfortable and can harm the bowel.

Both bowel cancer and adenomas can cause bleeding in the bowel. This study examined whether or not a test for blood in stool, completed at home [known as the faecal immunochemical test (FIT)], could be used instead of colonoscopy to monitor patients following adenoma removal. Colonoscopy would then be offered only to those who had a positive FIT result, indicating blood in the stool.

This study invited individuals for annual FITs for 3 years who, as part of the Bowel Cancer Screening Programme, had one or two large adenomas or three or four small adenomas removed. If a FIT detected blood in the stool at any of the tests, these individuals were immediately offered a colonoscopy. If a FIT did not detect blood in the stool at any test, these individuals were offered a colonoscopy 3 years after their adenomas were removed, as were participants who did not return their second or third FIT.

The study demonstrated that an annual FIT could identify 85 of every 100 cancers and 57 of every 100 patients with adenomas if repeated over 3 years. Annual FITs were considerably cheaper than colonoscopy after 3 years. Participants reported that the FIT was easy to use and provided reassurance. However, some were concerned that the FIT would not be as effective as colonoscopy.



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## This report

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