Increasing bowel cancer screening in your practice

Why should you increase your bowel cancer screening rate?

Bowel cancer is the second biggest cancer killer in Australia. However 90% of bowel cancers can be cured if found early. The general population without symptoms or strong family history of the disease should be screened every two years as recommended by the National Health and Medical Council (NHMRC) Clinical Guidelines\(^1\) and the RACGP Red Book Guidelines\(^2\). The recommended method of screening is the faecal occult blood test (FOBT).

The National Bowel Cancer Screening Program (the program) is currently inviting Australians turning 50, 55, 60 and 65 years of age to complete a free screening test that is sent to their home.

From 2015 screening will also be available for Australians turning 70 years of age, thus inviting people to be screened every five years between the ages of 50 and 70.

In the 2012 Budget, the Australian Government committed to expand the program to include all Australians aged between 50 and 74 years and to phase in biennial screening from 2017.

General Practitioners can assist the program by encouraging their eligible patients to complete the free test when they get it in the mail. For those who are not eligible for the program, GPs could discuss the importance of screening for bowel cancer, undertake appropriate risk assessment and recommend testing with an FOBT at least every two years to asymptomatic persons from age 50.

Strategies to increase bowel cancer screening in your practice

- **Identify patients across your practice who are due for screening**

  Do an audit of your patient records, using tools such as the *Clinical Audit tool* to identify patients who are due for bowel screening across your practice. Your Medicare Local can assist you in establishing practice audit and reminder systems.

  Send letters to your patients when they reach the age they are due to receive a free FOBT kit through the program, reinforcing the benefits of bowel cancer screening.

  When a patient who is due for screening attends the practice, use a tool such as the *PrimaryCare Sidebar®* to prompt a discussion about bowel cancer risk and screening.

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Education and information

To enable GPs to undertake bowel cancer risk assessments and provide up-to-date information to patients about bowel cancer and screening, consider a practice training or information session. The RACGP red book includes guidelines for risk assessment for bowel cancer. Your Medicare Local may also provide training.

A 2012 DVD: *Beating Bowel Cancer: Prevention, Detection, Treatment* which covers the importance of regular bowel cancer screening, preventative measures, assessment, diagnosis, treatment and new developments is also available to view and/or purchase from the Rural Health Education Foundation. A link to this is on the program website (see below).

This DVD/Broadcast is accredited for CPD/CPE by the Royal Australian College of General Practitioners, the Australian College of Rural and Remote Medicine, and the Royal College of Nursing Australia.

Other information and tools for GPs are available on the program website and samples of the iFOBT kit used by the program can also be requested by emailing the Program Director.

Recording of bowel cancer screening in your practice

To enable the collection of data by the Clinical Audit Tool of the number of FOBTs being completed by patients of the practice, a few steps need to be taken to ensure that your system has the test as a default pathology request. This will allow audits and recall reminders to be easily set up within your practice system. Talk to your Medicare Local about how best to do this.

Bowel cancer recall reminders

As with cervical and breast cancer screening you can set up specific recall/reminders for bowel cancer screening at regular two yearly intervals for patients over 50 years or in between the program’s eligible screening ages.

Add bowel cancer to Care Plans and Health Assessments

Your practice may like to consider discussing bowel cancer and screening for bowel cancer opportunistically when:
- conducting a 45-49 year old health check. Add the prompt “Discuss bowel cancer risk and symptoms with the patient and advise that for people at average population risk screening using an FOBT is recommended at least every two years from the age of 50”;
- doing the Indigenous Adult Health Check; or
- conducting regular health assessments, or developing care plans, for patients from age 50. Add the prompt “If the patient has not completed an FOBT or had a bowel examination in the last five years, consider whether bowel cancer screening or other investigation may be appropriate”.

Create public awareness

Put up information about Bowel Cancer and screening in the practice. Posters and other resources are available from the Cancer Council in your State or from the NBCSP website.

More information

For further information on the suggestions contained within this fact sheet or for other bowel cancer screening enquiries please go to our web page [http://www.cancerscreening.gov.au](http://www.cancerscreening.gov.au) or email the Program Director at [nbcs@health.gov.au](mailto:nbcs@health.gov.au).

For general enquiries about the NBCSP you or your patients can contact the Program Information Line on [1800 118 868](tel:1800 118 868).