

Faecal Immunochemical Test in Primary Care Implementation in Suffolk and North East Essex

<p>Introduction</p> <p>Faecal Immunochemical Test in Primary Care (FIT in PC) is being introduced in Suffolk and North East Essex on 7th May 2019. FIT in PC will be used as a diagnostic tool for patients being seen in primary care with symptoms and investigations which might possibly indicate lower GI cancer, albeit unlikely, and who do not meet the 2WW criteria. This is part of a wider implementation programme across the East of England supported by the Cancer Alliance.</p>
<p>What is New?</p> <p>What is FIT?</p> <p>FIT is an antibody test for the presence of human globin in faeces. It is a highly sensitive, quantitative test performed on a single sample, unaffected by diet. A positive test (>10ug/g) indicates lower GI bleeding and the need for further referral.</p> <p>Who should be offered the test?</p> <p>NICE has produced guidance (DG30) on which patients should be offered FIT: https://www.nice.org.uk/guidance/dg30. Primary care clinicians are, however, encouraged to offer FIT testing to those patients whose symptoms may represent colorectal cancer but do not meet existing 2WW criteria. The suggested management pathway is below, which also summarises NICE guidance.</p> <p>FIT and bowel screening</p> <p>FIT in primary care is completely separate from the National Bowel Screening Programme, and a recent negative screening test does not preclude a primary care test if there is clinical concern.</p> <p>FIT and fast-track referral pathways</p> <p>NG12 guidance and current 2WW colorectal pathways are unaffected and these patients do not need a FIT test.</p> <p>FIT East (FIT Poo) study</p> <p>A large scale study of FIT usage in primary care is taking place across the East of England, and all patients aged 40 and over will be offered the opportunity to take part; further information for patients will be included in the FIT kits, when the study is launched. The researchers (from the University of Cambridge) will also invite some primary care team members to take part in short interviews.</p> <p>The small print</p> <p>A negative FIT test combined with a normal FBC effectively rules out current colorectal cancer but clinical judgement is still needed for safety netting and follow-up.</p>
<p>How is the test arranged?</p> <p>Practices will be supplied with FIT kits by their local laboratories. The test must be ordered on ICE and will be reported back to practices in the usual way. A recent FBC is also needed. A small number of FIT kits will be delivered to each practice towards the end of April. Patients should return the FIT kits to their practice where they will be collected by their local laboratory.</p>
<p>Start date</p> <p>Updated 2WW colorectal (LGI) suspected cancer referral form and pathway information will be available on DXS and the CCG website no later than end of April 2019.</p>
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