



Provincial Health Services Authority

Colonoscopy Education Day

October 2, 2018

Objectives

- Review the 2016 annual report
- Update on quality initiatives
- Next steps

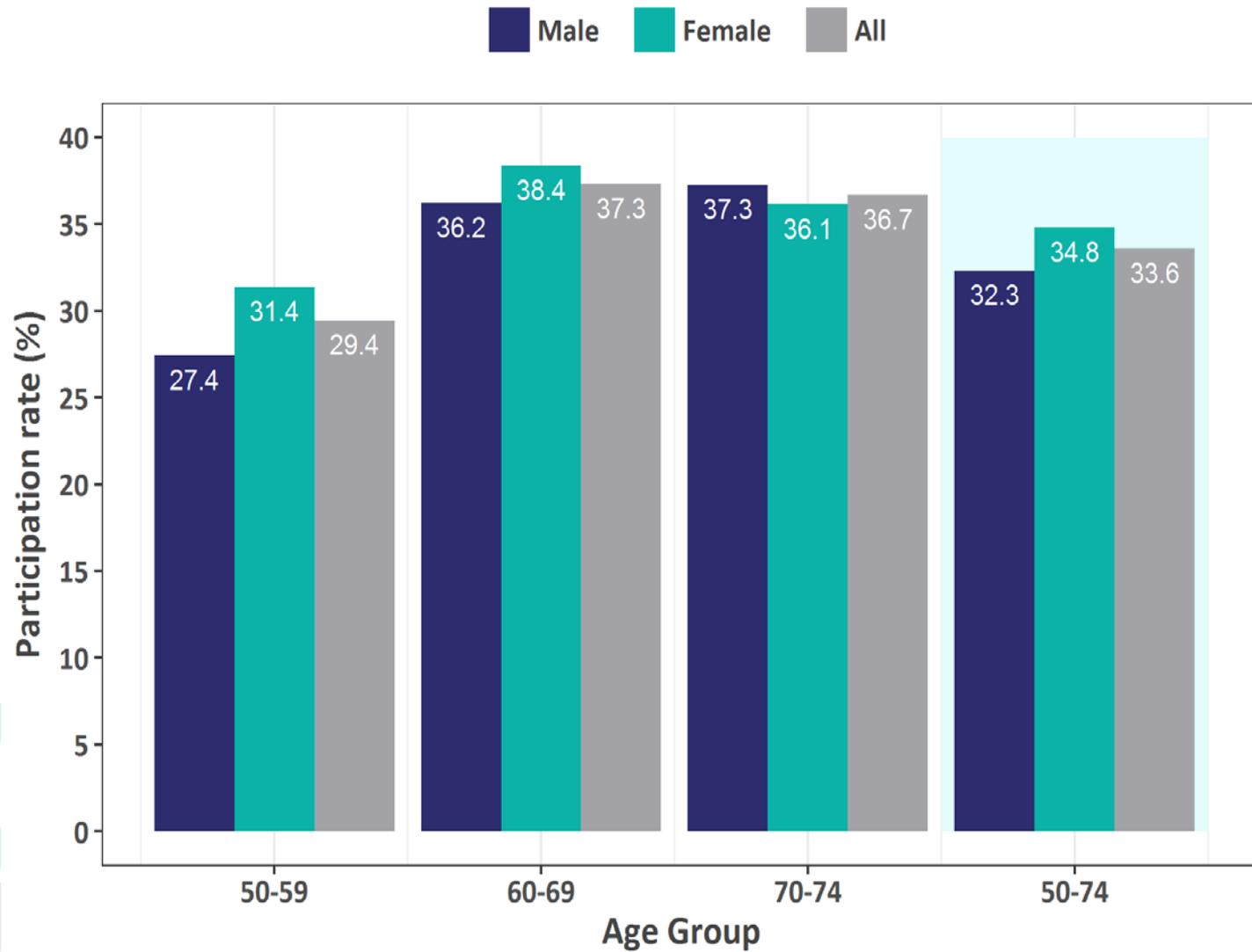
November 15, 2013 to August 31, 2018

- 1,059,470 have undergone at least one FIT
 - 753,825 first FIT
 - 305,645 subsequent FIT
- 123,956 colonoscopies have been performed
- 2,062 colorectal cancers diagnosed

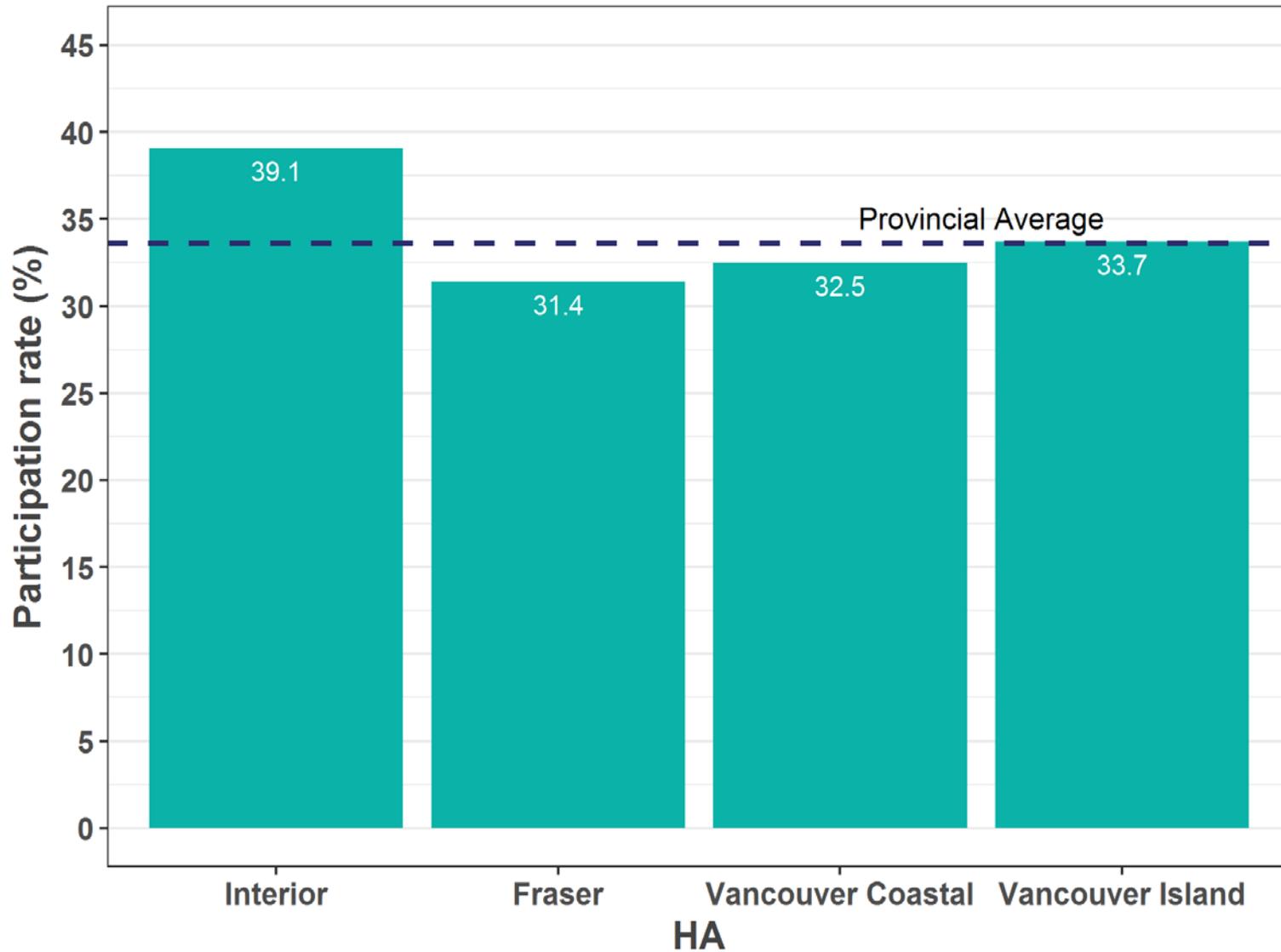
2016 Annual Report

- 223,431 participants completed FIT in 2016

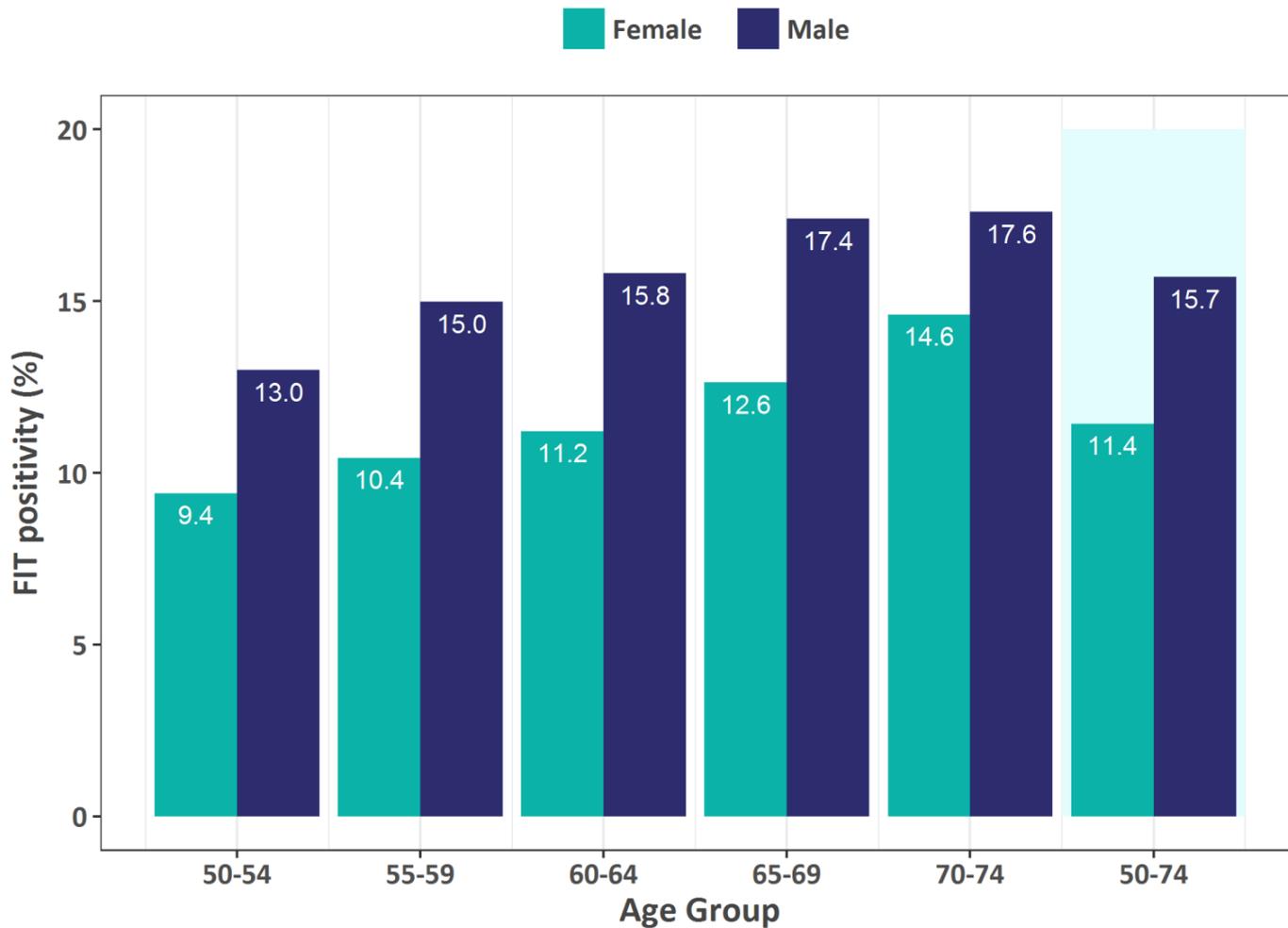
Participation



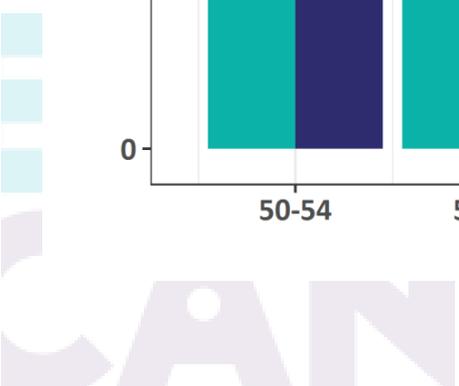
Participation by Health Authority



FIT Positivity



First FIT 14.2%
Subsequent FIT 12.1%
All 13.5%



Proceeding To Colonoscopy in the Program

Referral

Abnormal FIT
33,863

Assessment

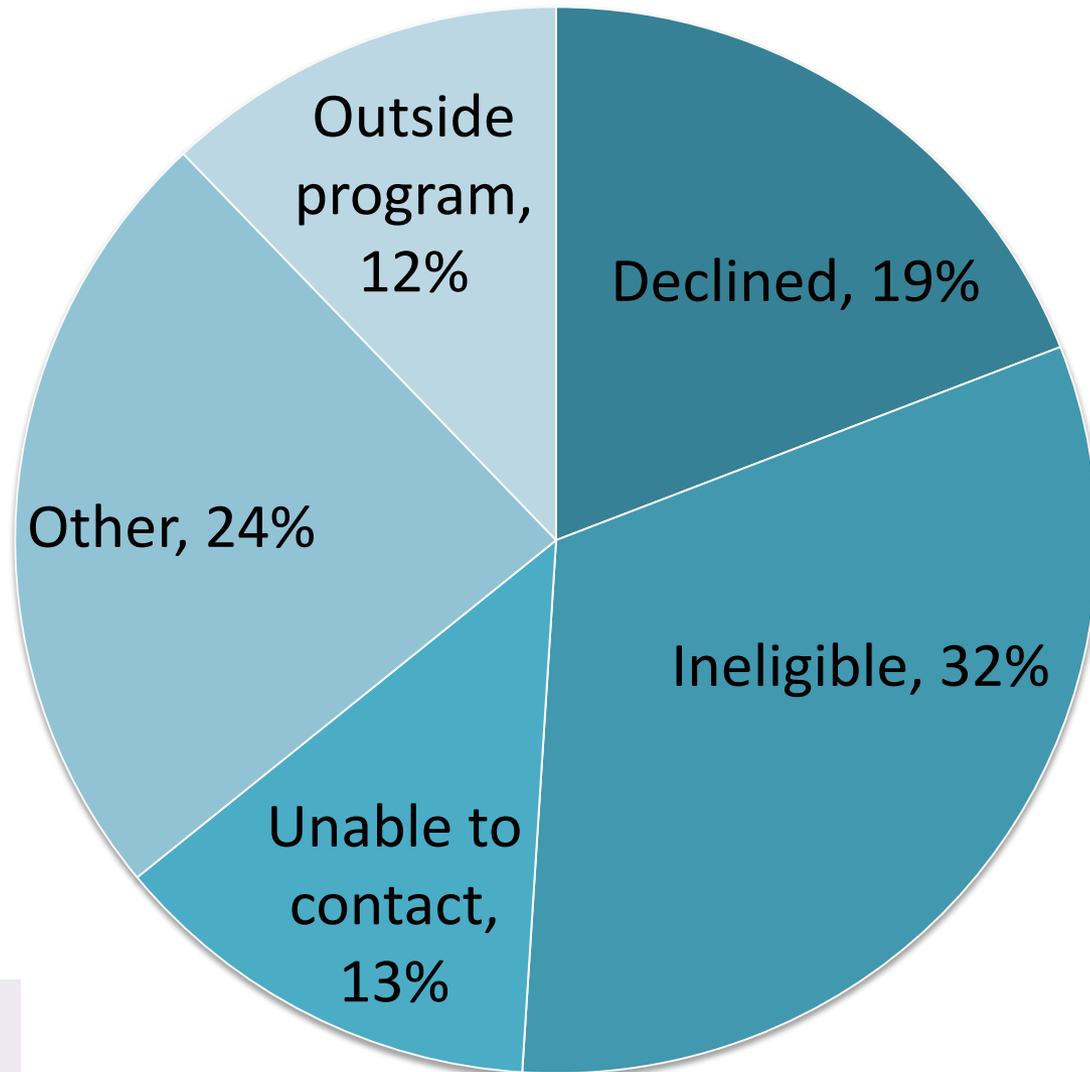
Data Available
33,435 (98.7%)

Colonoscopy

Proceeding
24,225 (72.5%)

Not Proceeding
9,210 (27.5%)

Not Proceeding to Colonoscopy



Positive Predictive Value

	Cancer	High Risk Polyp(s)	Any Neoplasia
All Abnormal FIT	528 (2.2%)	4,330 (18.1%)	13,292 (55.7%)
By FIT			
First FIT	451 (2.6%)	3,398 (19.3%)	9,952 (56.5%)
Subsequent FIT	77 (1.2%)	932 (14.9%)	3,340 (53.3%)
By Sex			
Females	210 (2.0%)	1,547 (14.7%)	4,948 (46.9%)
Males	318 (2.4%)	2,783 (20.9%)	8,344 (62.6%)
By Age			
50-54	53 (1.2%)	663 (15.3%)	2,013 (46.5%)
55-59	93 (1.9%)	841 (16.7%)	2,566 (51.1%)
60-64	129 (2.4%)	969 (18.1%)	3,025 (56.5%)
65-69	143 (2.6%)	1,099 (20.3%)	3,287 (60.7%)
70-74	110 (2.9%)	758 (20.2%)	2,401 (64.1%)

Comparison of Colonoscopy Findings by Indication

Pathology	FIT Positive	Adenoma Surveillance	Family History
Cancer	528 (2.2%)	6 (0.3%)	1 (0.1%)
High Risk Polyp	4,330 (18.1%)	384 (18.2%)	86 (9.5%)
Multiple Low Risk Polyps	1,818 (7.6%)	267 (12.7%)	53 (5.8%)
Low Risk Polyp	6,616 (27.7%)	729 (34.6%)	273 (30.0%)
Other	3,634 (15.2%)	296 (14.1%)	161 (17.7%)
No specimen taken	6,942 (29.1%)	424 (14.1%)	336 (36.9%)
Total	23,868	2,106	910

2016 Summary

- 223,431 participants completed FIT in 2016
- Number need to screen to detect one cancer = **423**
- Number needed to screen to detect one cancer or high risk polyp = **46**
- Number of positive FIT participants needed to scope to detect one cancer = **45**
- Number of positive FIT participants needed to scope to detect one cancer or high risk polyp = **5**



BC
CAN

Quality Assurance

- Quality Management Committee
- FIT monitoring
- Quality Reports
 - Colonoscopist report, pathologist report, primary care provider report, HA quality report
- Global Rating Scale
- Direct Observation of Procedural Skills
- Unplanned Events review day prior or following colonoscopy

Results by Colonoscopist

- Cecal intubation rate = 97.9%
- For FIT positive participants:
 - Cancer detection rate = 2.3% (0 to 10%)
 - Adenoma detection rate = 54% (26% to 77%)
 - Average number of adenomas removed per colonoscopy = 1.6
 - Complete polyp removal = 96.3%
 - Complete polyp retrieval = 94.5%

Direct Observation of Procedural Skills

- 187 (76%) physicians performing colonoscopy in the program have completed DOPS

Sites Completing Global Rating Scale (GRS)

Health Authority	# Units Participating	# Units Reporting GRS Completion	Percent Complete
Interior	12	10	83 %
Fraser	11	9	82 %
Vancouver Coastal	6	6	100 %
Island Health	9	9	100 %
Northern Health	10*	0	0%

- GRS is a biannual audit to support endoscopy units in identifying areas within their unit to improve patient care and experience related to endoscopy
- HAs will be reporting GRS completion for their units for the Oct 2017 GRS round in December 2017

*NHA not participating but reported number of sites in NHA

Pathology Quality Assurance

- Dr. David Schaeffer, Pathology Lead
 - Member of the Quality Management Committee
- Engaged GI pathologists from each HA
- Focus on difficult diagnoses and synoptic reporting
 - Serrated lesions
 - Malignant polyps
- Pathologist quality report fall 2017

Primary Care Provider

- Regular education sessions
- Annual quality report
- Includes inappropriate referrals
 - Inaccurate family history
 - FIT for participants in colonoscopy surveillance
 - Early FIT
- Early FIT 25-30%
 - Associated with a higher normal value (25-49 ng/mL) on prior FIT
 - Requested the reporting be changed to normal/abnormal

FIT Quality Assurance

- Dr. Andre Mattman, Medical Biochemist
 - Member of the Quality Management Committee
 - FIT Quality Assurance Committee
- Development of a 3rd party control
- Ongoing monitoring of positivity and PPV
- Decision regarding changing FIT vendor is with the MoH

Summary

- Participation increased by over 10% from 2015 to 2016
- Positive Predictive Value of FIT remains over 50% despite higher FIT positivity
- Quality assurance initiatives
- Reporting of Serious Adverse Events

Next Steps

- Recall process
 - Participant is mailed the FIT requisition from the program
- Invitation process
 - Requested access to personal information to directly invite age eligible individuals

Thank you!

