

Colorectal Cancer Screening

Barbados' Perspective
Challenges



Basic Facts

- 166 square mile(430 square kilometers)
- Population 277 821
- 92% of the population is black
- Overweight 54.6% among males and 74.3% among females
- Prevalence of tobacco smoking 8.4%

System of Health Care

- Patients can access 2 different types of health care
 1. Private care
 1. Costs are met by the patient either out of pocket or through the insurance company if patients have insurance.
 2. For patients with insurance the insurance is private rather than government funded

2. Public care

- Available free to all Barbadians
- Patients do not receive a doctor's bill
- Encompasses GP services, maternal and child health services and specialty services – mental health, ophthalmology, plastic surgery and gastroenterology

- Patients may move between the two systems accessing public care when they are unable to afford the treatment or investigations being offered in the private setting
- Any patient may access primary care services
- Access to specialty services in the public setting is by referral only
- Patients may self refer to private specialists

Queen Elizabeth Hospital



In Barbados

- Colorectal cancer frequency and mortality is similar to that seen in other countries
- The 5 year survival for patients with colon cancer is lower than that seen in other countries such as the US, UK and Canada

Barbados National Registry

- Cancer Registry started in 2010
- Cancer incidence and mortality in 2008
- Colon cancer
 - 3rd most common site in women behind breast cancer and cervical cancer
 - 2nd most common site in men after prostate cancer

Barbados National Registry

- 2008 cancer deaths
- Half of all cancer deaths - three sites:
 - Prostate (100; 20%)
 - Colorectal (66; 14%)
 - Breast (49 deaths; 10%)
- CRC - 3rd highest ASMR behind prostate cancer and breast cancer

- CRC had a 5 year survival of 32%

- Patients presenting with advanced disease?
- Patients not choosing to have treatment?
- Treatment options suboptimal?
 - Incorrect staging?
 - Incorrect treatment decisions?
 - Inadequate access to chemotherapy?
- No definitive conclusions

Colon Cancer Screening in Barbados

- No national screening program
- PCP - FOBT, Barium enemas, Colonoscopy
- In the public setting, patients are referred for screening colonoscopies to the gastroenterologists at the hospital
- In the private setting patients may self refer for screening colonoscopy

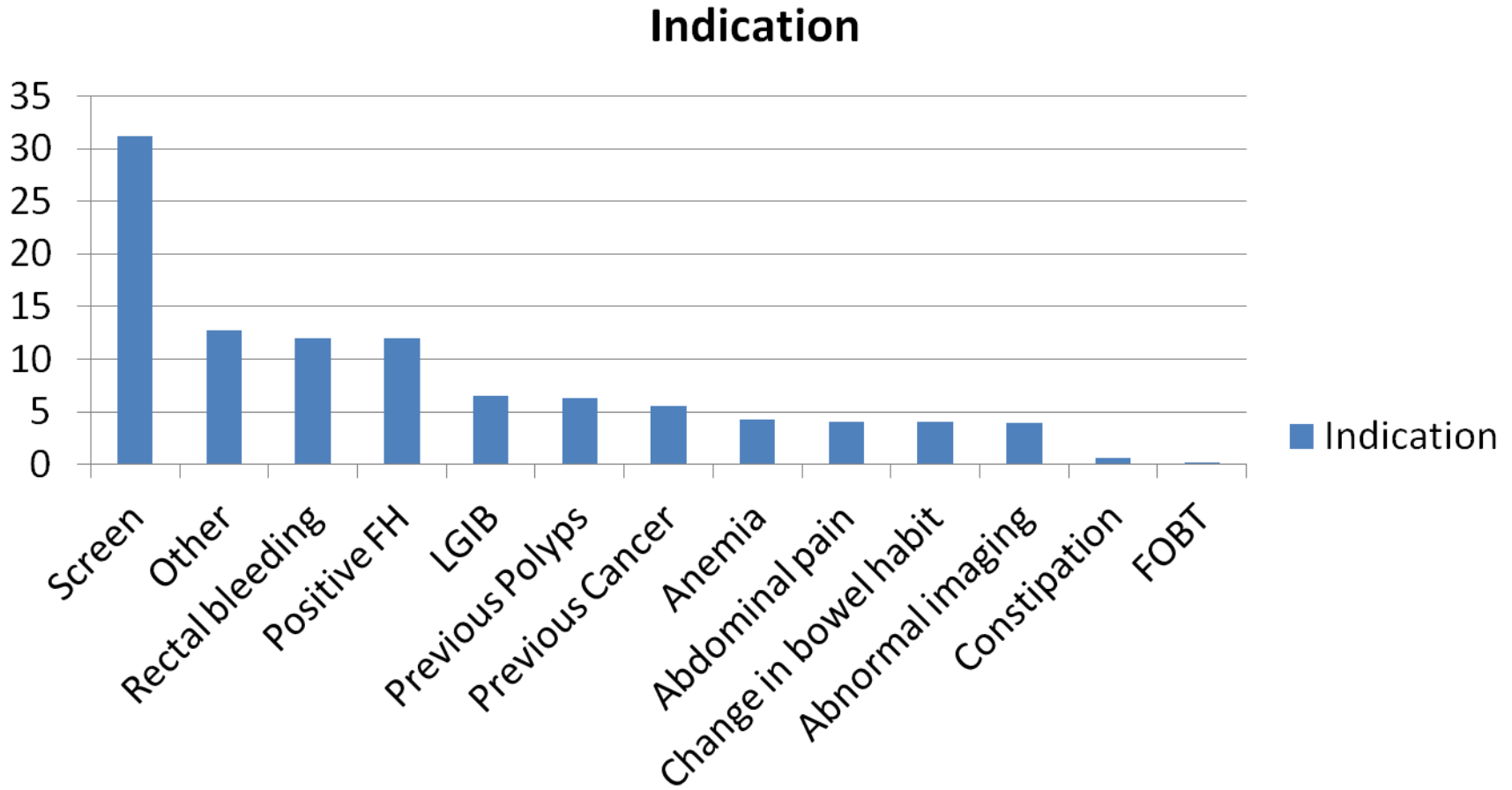
- 2007 to 2012
- 2355 colonoscopies of patients referred for screening
- 38% reported as normal

- 40% had polyps
- Of those with polyps
 - 59% - left sided
 - 20% -right sided
 - 20% -both sides
- CRC in 0.5% of patients referred for screening

- Jan 1st to April 30th 2013
- 512 patients for sigmoidoscopy or colonoscopy
- Of those 31% (160) had been referred for screening colonoscopy

- Mean age of all patients seen = 60.2 years
- Mean age of patients referred for screening
– 59.2 years
- 5 % of patients referred had had previous colon cancer
- The mean age of people referred for surveillance colonoscopies because of previous colon cancer was 63 years

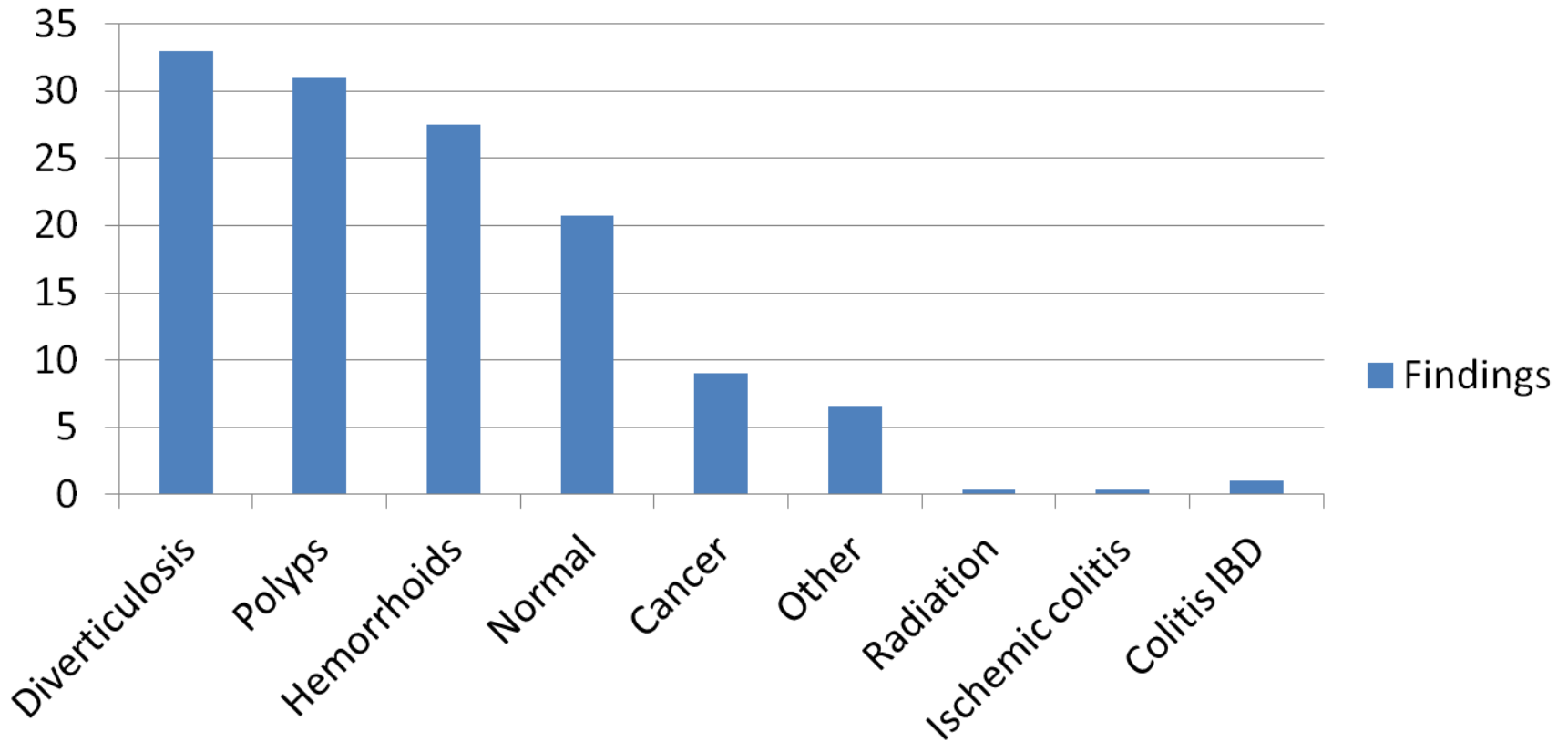
Indication for Procedure (Frequency/%)



- 94.8% (481) of the procedures performed were colonoscopies
- Cecal intubation was achieved in 95% of all screening colonoscopies

Findings (%)

Findings



Cancer

- 8.2% (42) of the patients examined had cancer
- Cancers were found in patients with the following:
 - Anemia – 36% (8/22)
 - Abnormal imaging - 50% (10/20)
 - Change in bowel habit - 14% (3/21)
 - Rectal bleeding – 13% (8/61)
 - LGIB - 15% (5/33)
 - Positive FH – 1.6% (1/60)

Cancer

- 0 cancers were found in the patients referred for screening colonoscopy
- 0 cancers were found in patients with FOBT positive stool

- Of the 42 cancers found 17 (40%) were located in the rectum
- 11 (26%) were left sided (descending colon and sigmoid) and
- 11 were right sided (ascending colon and cecum)
- 3 cancers were located in the transverse colon

Summary

- Colon - one of the top 3 sites of cancer in Barbados - similar to that seen in other countries
- Mortality - one of the top 3 causes of death from cancer - also similar to other countries
- 5 year survival is approximately $\frac{1}{2}$ that seen in US, UK and Canada

Challenges

- A high percentage of overweight and obese patients
 - Potentially a modifiable risk factor
- Need for education of patients and physicians about CRC screening - availability and best methods of screening

- Selection of the appropriate patients for screening
- Selection of the most cost effective method of screening
 - FIT? FOBT? APCS score?
- Colonoscopy
 - Quality

Thank You



