

Integrated Cancer Screening

Dr. Linda Rabeneck

VP, Prevention and Cancer Control

Disclosure

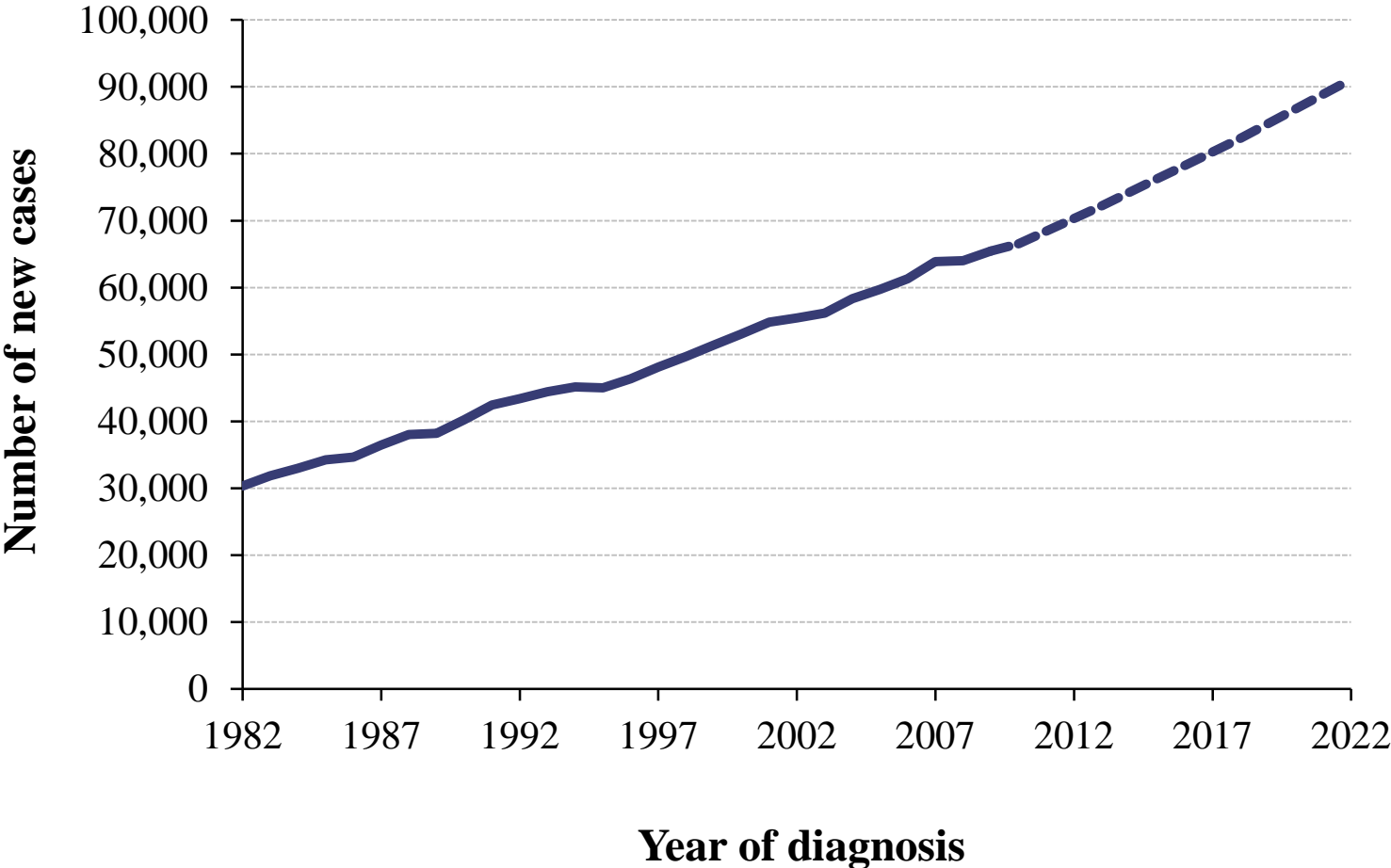
No commercial interests or support

Outline

- Burden of cancer
- Cancer screening – status
- Cancer screening – what's new?

Burden of Cancer

Growth in New Cancer Cases



New Cases in Ontario: 2013

Breast	9,300
Colorectal	8,700
Cervical	610

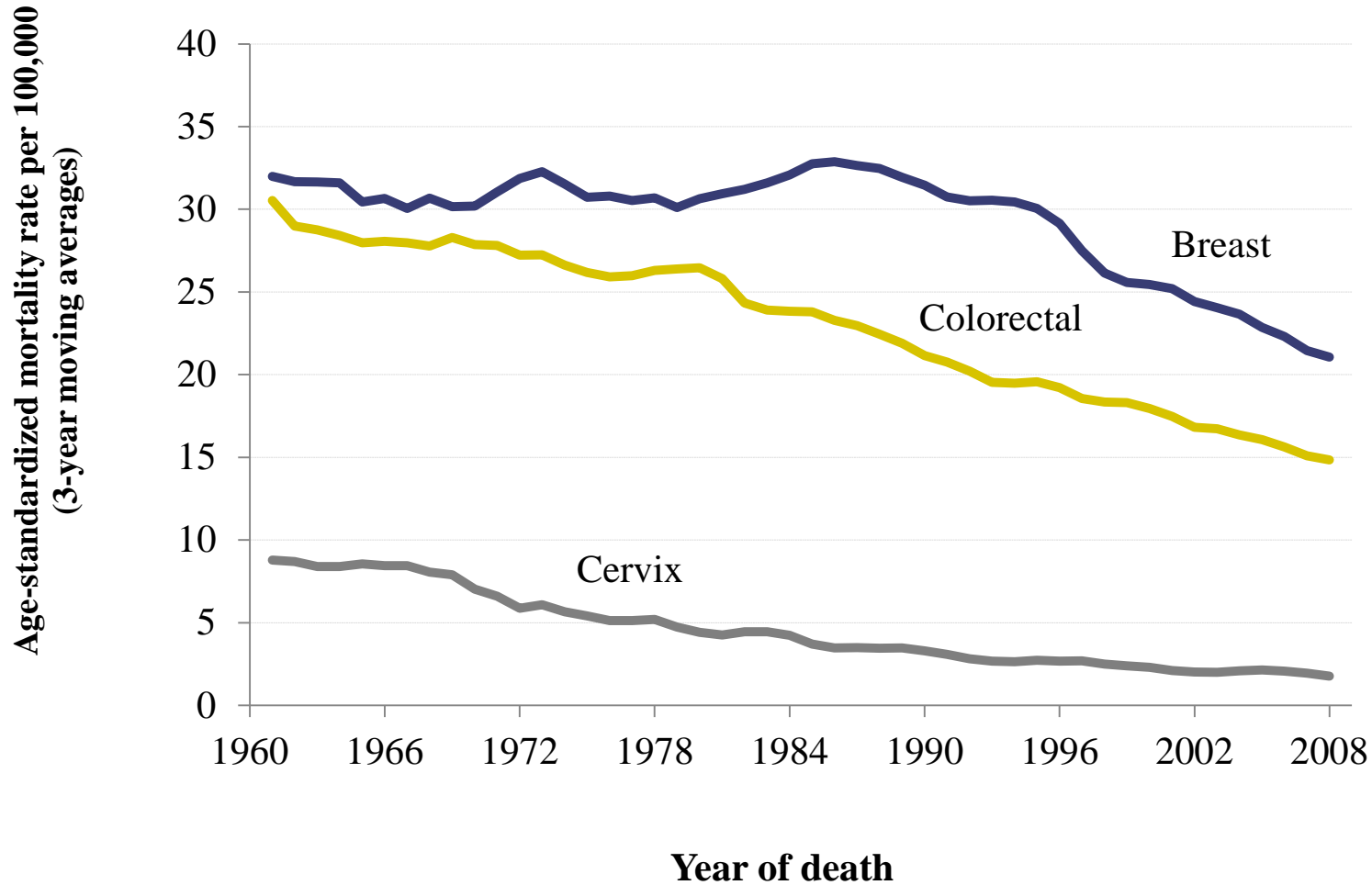
Canadian Cancer Statistics

Deaths in Ontario: 2013

Colorectal	3,350
Breast	1,950
Cervical	150

Canadian Cancer Statistics

Cancer Mortality Rates



Cancer Screening

Are You Aware of Your Cancer Screening Numbers?

A. Yes

B. No

If Yes, Where Do You Get This Information From?

A.SAR

B.OHIP RA (remittance advice)

C.Own EMR

D.Other

Organized Program (IARC)

Features		OBSP	Non – OBSP	OCSP	CCC
Recent Ontario/PEBC guidelines		○	○	●	◐
Initiatives to increase screening participation	Public	◐	○	◐	●
	Providers	●	○	◐	●
Routine recall		●	○	○	●
Follow-up of abnormal results		●	○	○	◐
QA		●	○	◐	◐
Monitoring/evaluation		●	○	◐	●
Information system		●	○	◐	●

● Yes

◐ Partial

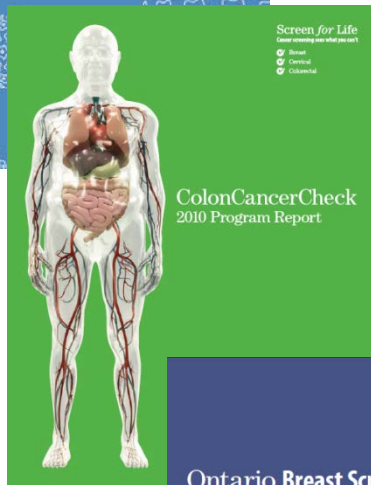
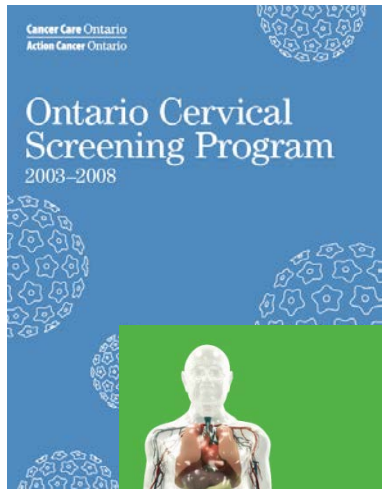
○ No

CCO Provincial Role

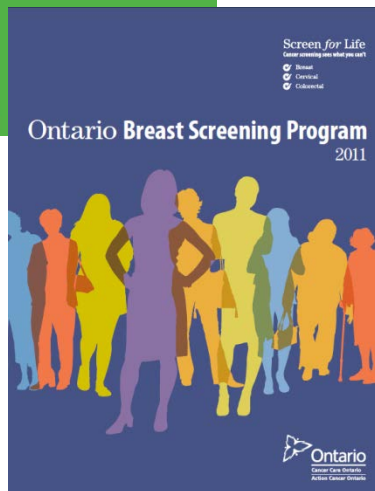
- Policy, guidelines and standards
- Clinical and scientific leadership
- Public campaign
- Clinical tools
- Monitoring, evaluation, reporting
- IT

Provincial Role: Reporting

Cervical Screening
Report Oct 2011



ColonCancerCheck
Report Oct 2012



Breast Screening
Report Oct 2013

CCO Regional Program Role

- Regional leadership
- Access to screening tests
- Regional performance
 - Increase screening rates
 - Ensure follow-up

Ontario Breast Screening Program (OBSP)



OBSP Screening Eligibility

- Average risk
 - 50–74 years
 - Biennial mammography
- High risk
 - 30–69 years
 - Annual mammography and MRI

High Risk Eligibility Criteria

- 1) Confirmed gene mutation
- 2) First-degree relative with mutation
- 3) Family history $\geq 25\%$ lifetime risk
- 4) Radiation therapy to chest before age 30 and ≥ 8 years ago

OBSP Quality Assurance

Provincial office

- Program evaluation reporting

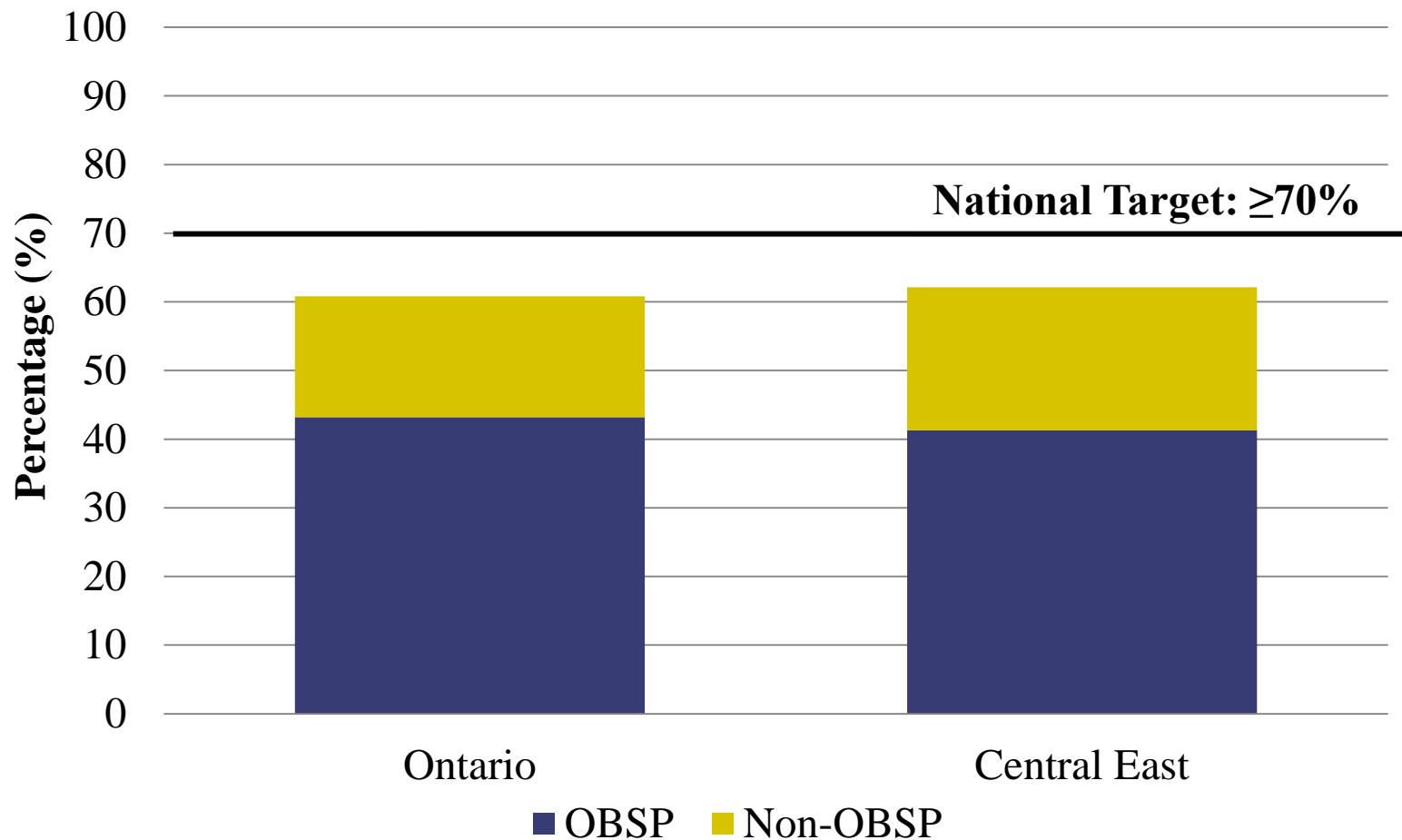
Screening site

- CAR-MAP
- Physics inspections
- Regional performance

Individual provider

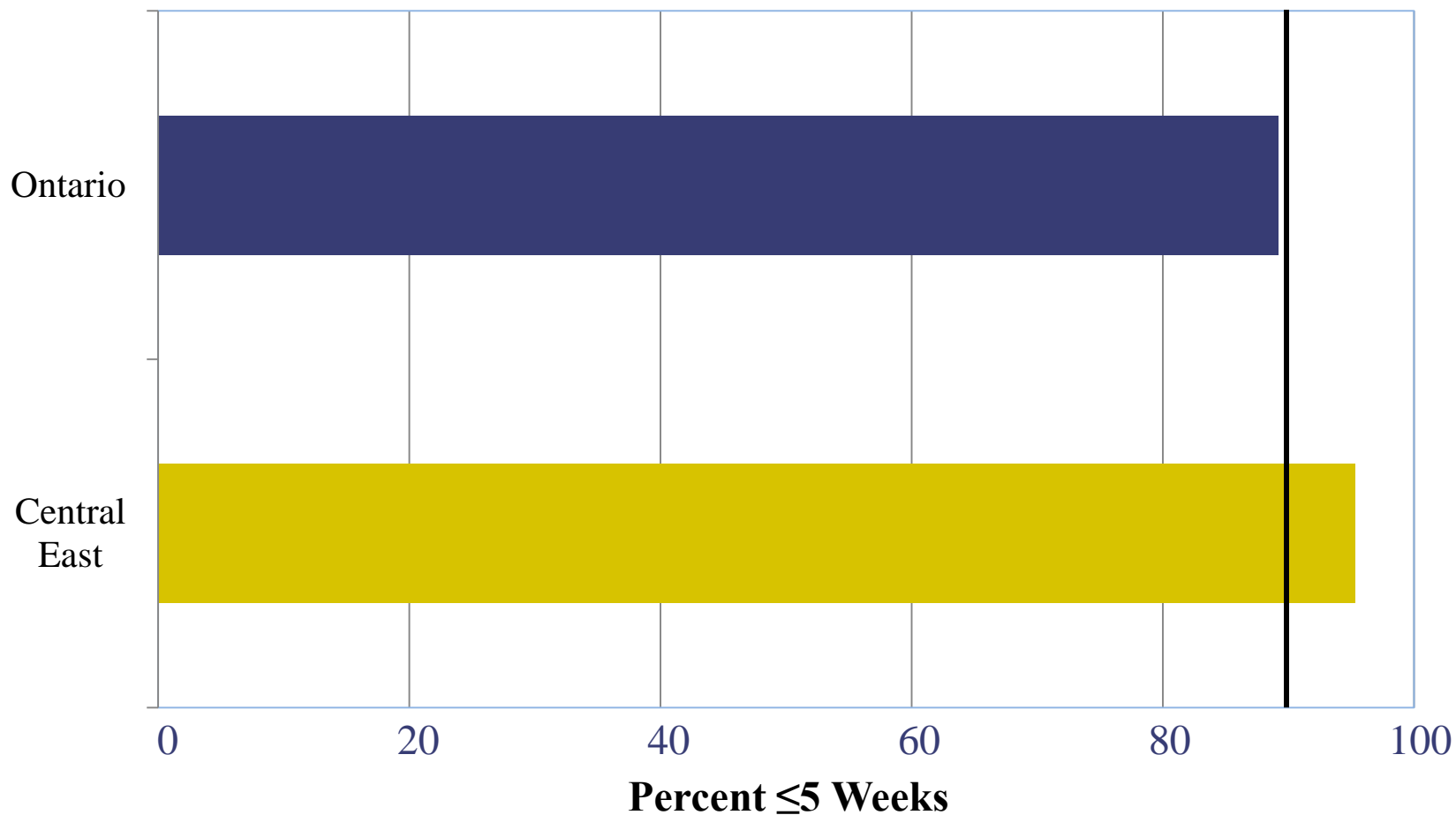
- Mammography volume req'ts (rad)
- Radiologist outcomes report (rad)
- MRT performance reviews

Mammogram Within 2-year Interval (2010–2011)



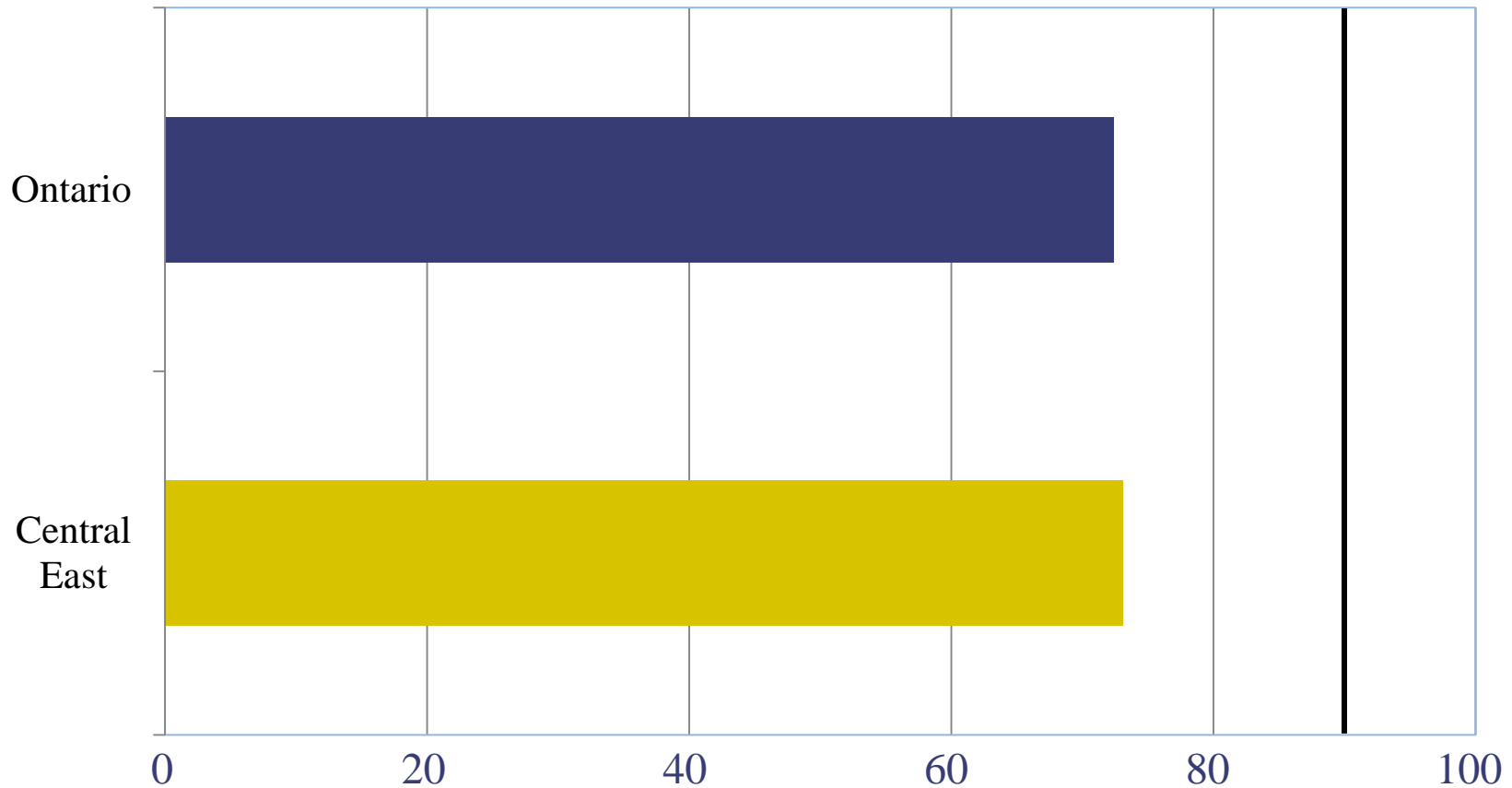
Time to Resolution Without Tissue Biopsy (FY 2012/13)

National Target: $\geq 90\%$



Time to Resolution With Tissue Biopsy (FY 2012/13)

National Target: $\geq 90\%$

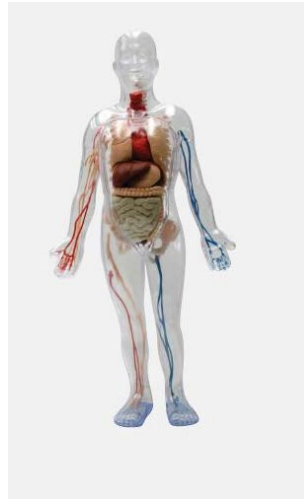


Percent ≤ 7 Weeks

OBSP High Risk Program Learnings

- Increase awareness
- Reassess funding model
- Increase capacity
- Question ad hoc screening

ColonCancerCheck (CCC)

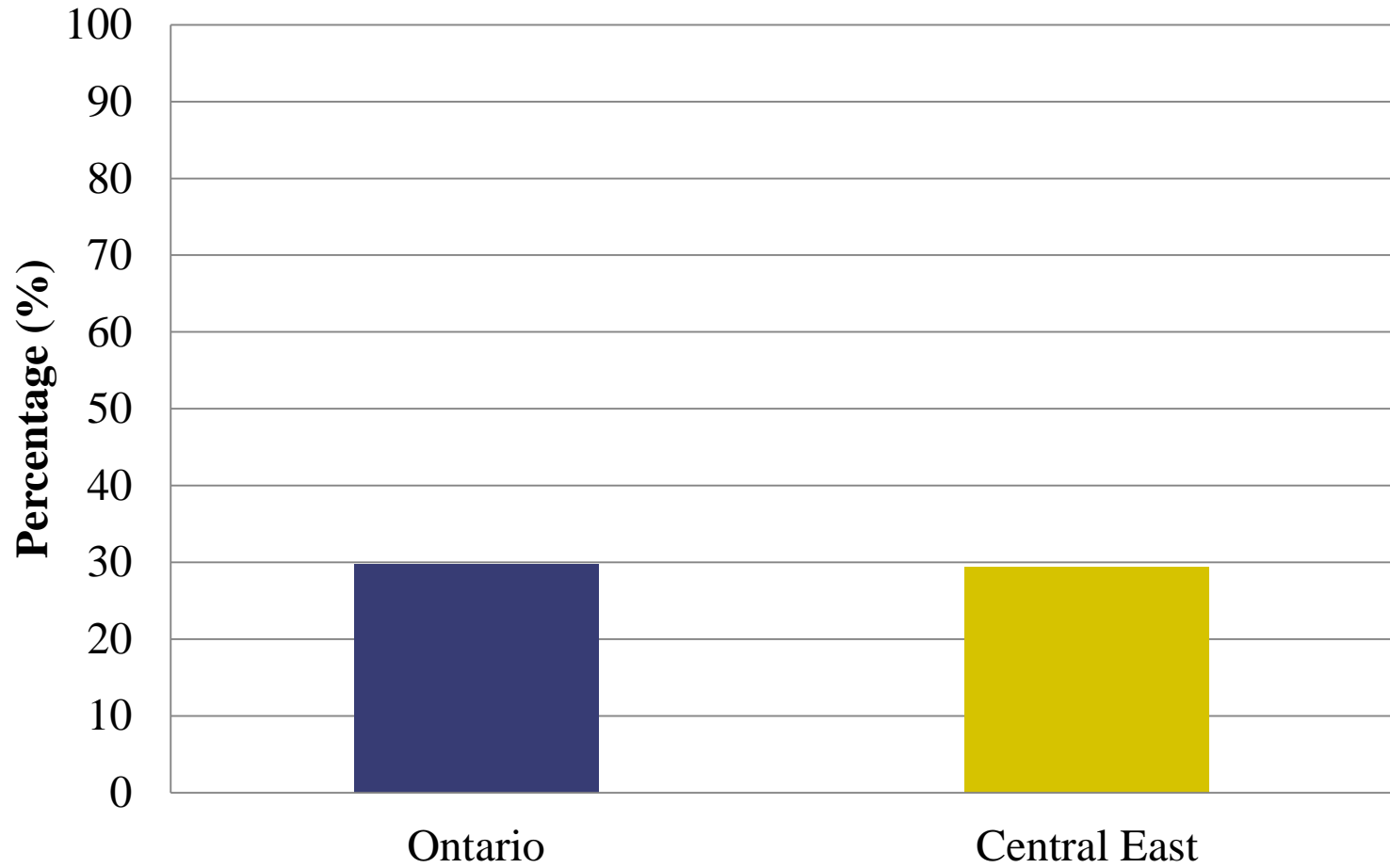


CCC Eligibility

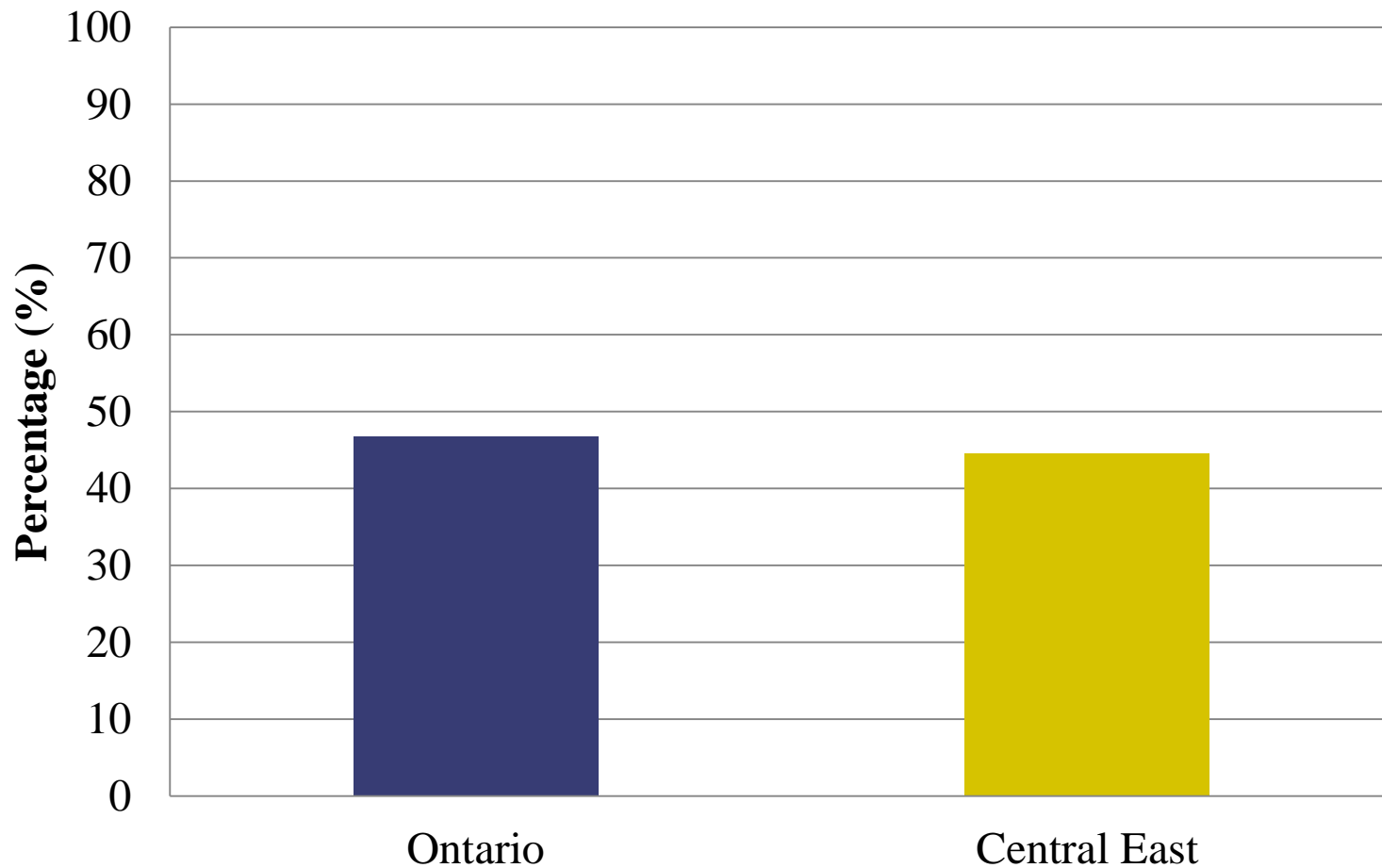
- gFOBT for average risk (50–74 years, no symptoms)
- Colonoscopy for increased risk (first-degree relative with CRC)

Colon Cancer **Check**

FOBT Participation (2010–2011)



Overdue for Colorectal Screening (2011)



Fecal Immunochemical Test (FIT)

- FIT pilot complete
- Planning for transition



Fecal Immunochemical Tests Compared With Guaiac Fecal Occult Blood Tests for Population-Based Colorectal Cancer Screening

L. Rabeneck, R.B. Rumble, F. Thompson, M. Mills, C. Oleschuk, A.H. Whibley, H. Messersmith, and N. Lewis: The FIT Guidelines Expert Panel

Can J Gastroenterol 2012;26(3): 131–47.

Screening Activity Report (SAR)

- CCC SAR
 - 1st release (courier): March 2011
 - 2nd release (electronic): February 2013
 - 3rd release (electronic): October 2013
- Primary Care SAR: 2014

SAR Dashboard

Screening Activity Report - Summary

Report as of Sept 30, 2012

COLORECTAL

Enrolled Patients between 50 and 74 years of age

Total as of 09/30/2012 172

Patients requiring action

FOBT Abnormal - Colonoscopy Required (Overdue) 1

FOBT Abnormal - Colonoscopy Required (Pending) 1

FOBT Rejected/Indeterminate - Retest Pending/Required 0

FOBT Dispensed - no kit received by lab 15

Total as of 09/30/2012 17

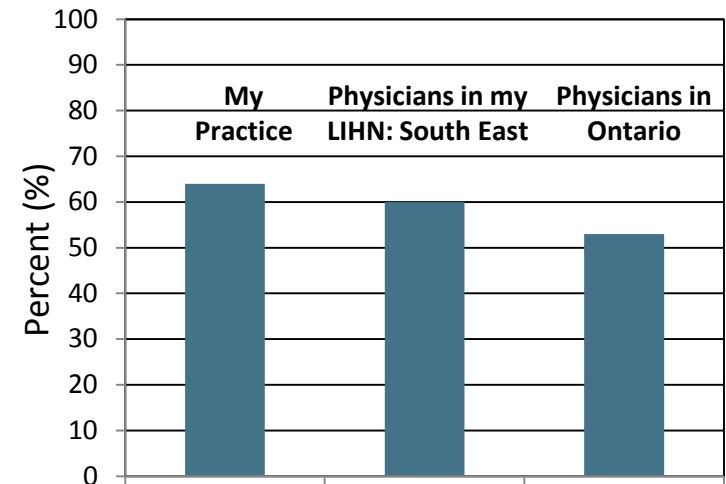
Patients due for screening

Due in the next 6 months 0

Overdue / never screened 72

Screening Activity Comparisons

Percentage of enrolled patients who are up-to-date with colorectal tests for PEM practices



[View Patients Requiring Action](#)

[View Enrolled Patients between 50 and 74 years of age](#)

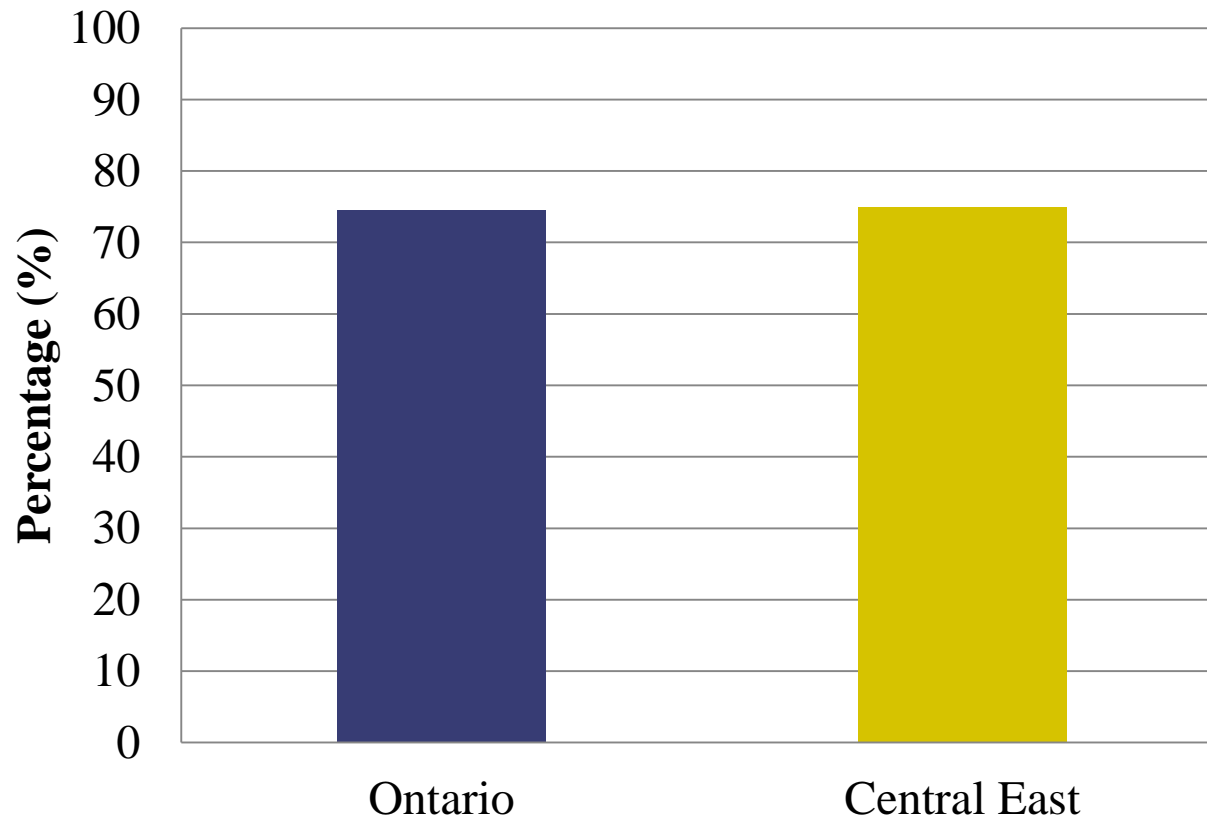
Updated CCO Colonoscopy Standards (2013)

- Endoscopists $\geq 200/\text{year}$
- Cecal intubation $\geq 95\%$
- Perforations $\leq 1/1,000$
- Post polypectomy bleeds $\leq 1/100$

Colonoscopy Quality Assurance

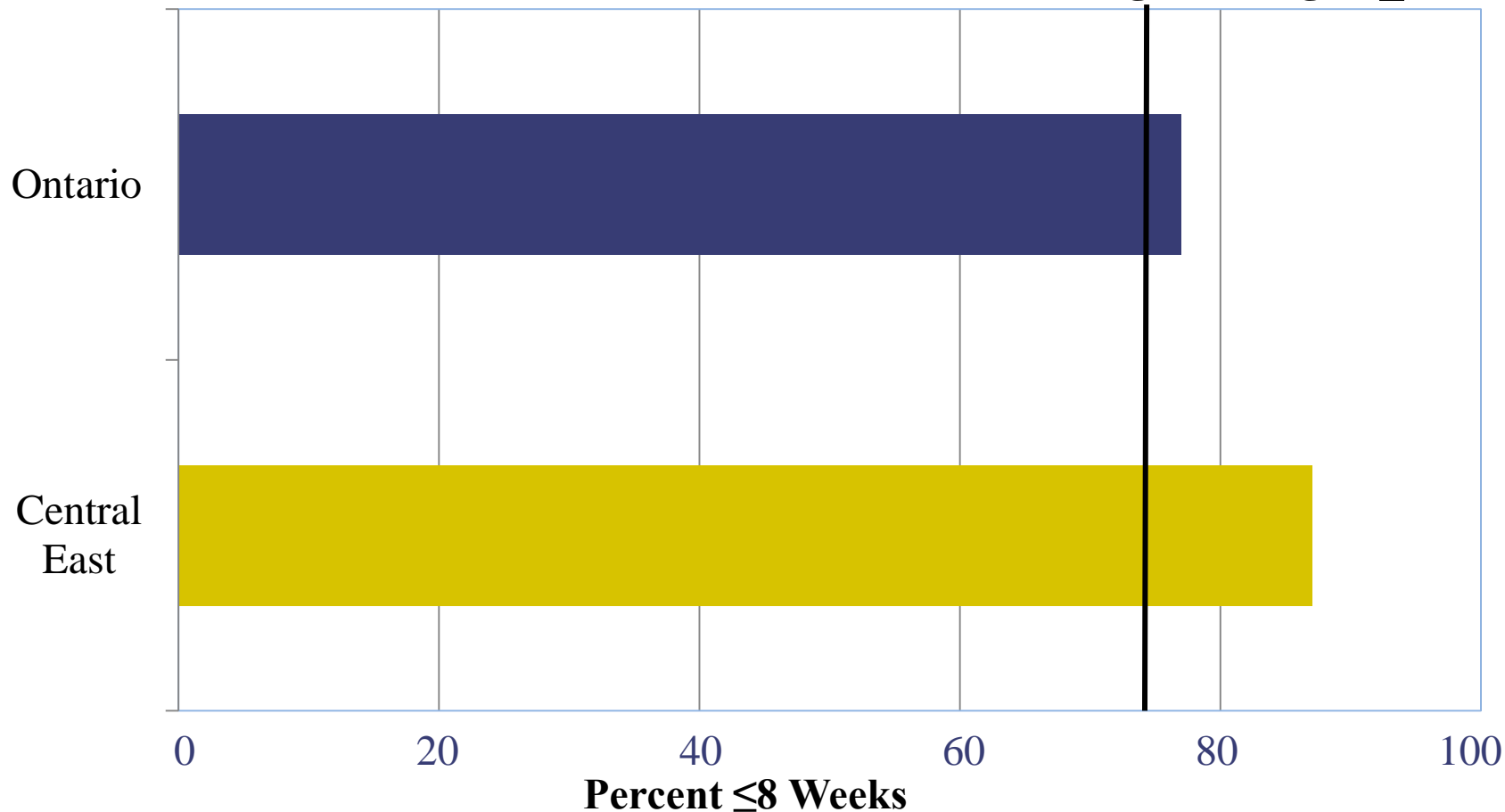
- CCO CPSO partnership (quality management partnership or QMP)
- QMP Clinical Lead, Colonoscopy:
- Dr. David Morgan

FOBT+ Colonoscopy Follow-up Within 6 Months (2011)



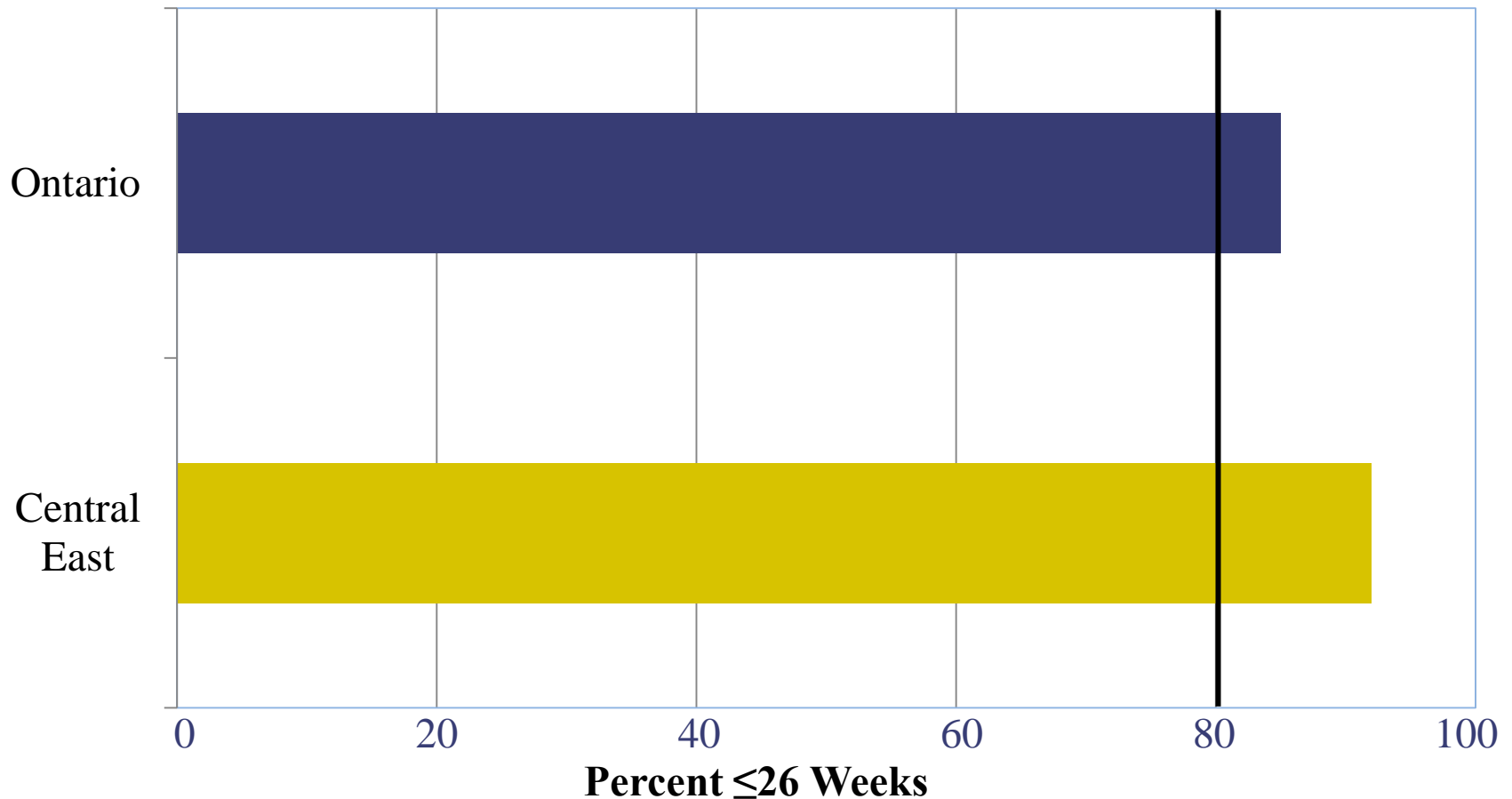
FOBT+ Colonoscopy Wait Times (FY 2012/13)

Program Target: $\geq 75\%$

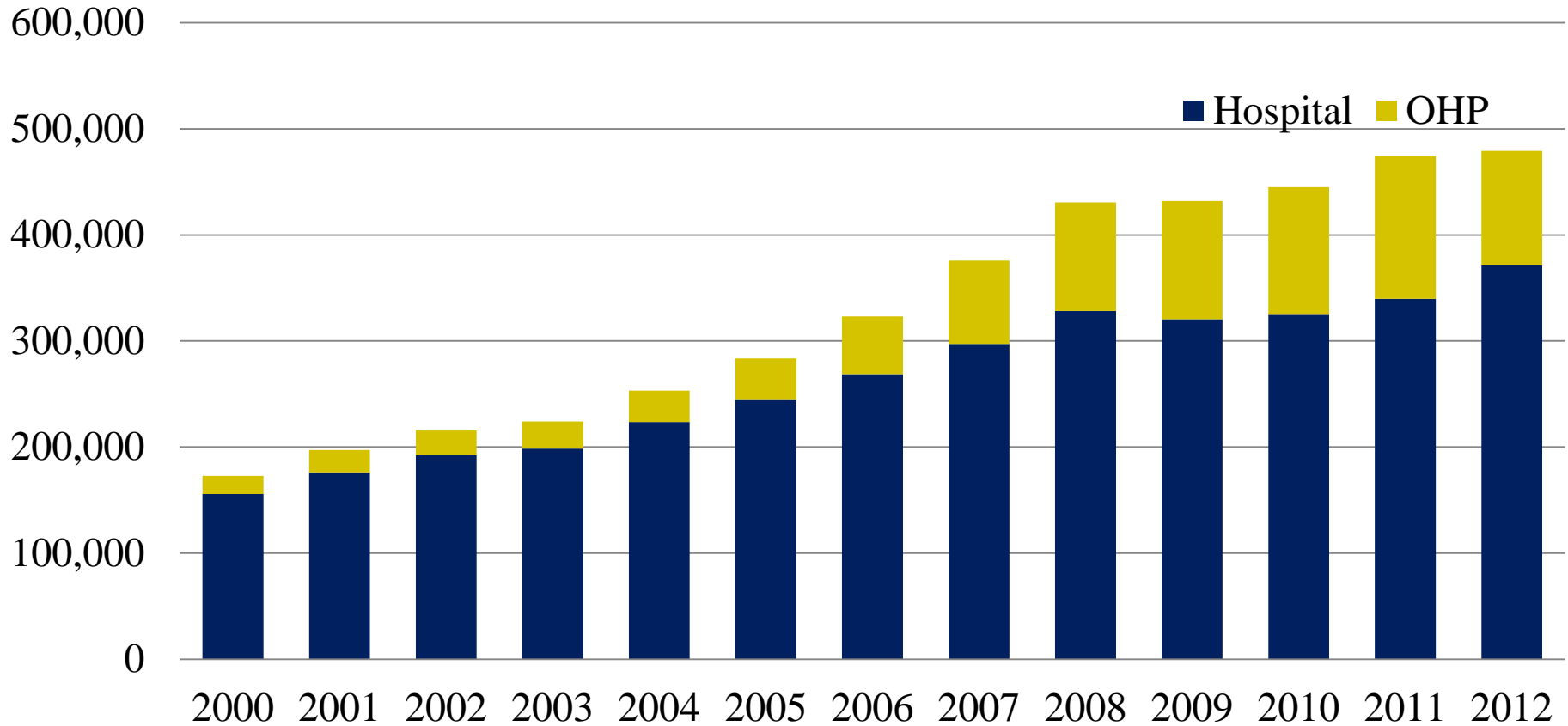


Family History Colonoscopy Wait Times (FY 2012/13)

Program Target: $\geq 80\%$



Colonoscopy Volumes



Out-of-Hospital Premises (OHP) Standards



College of Physicians and Surgeons of Ontario

September 2010

OHP Colonoscopy

- Phase 1 (Jan–Jun 2012)
 - Understand current state
 - 34 OHPs
- Phase 2 (Oct 2012–Mar 2013)
 - Tested feasibility
 - 9 OHPs

OHP Phase 2 Criteria

- 1) CPSO pass status
- 2) Volumes ≥ 100 /month
- 3) Use of AER 100%
- 4) 80% of procedures by endoscopists with active hospital privileges

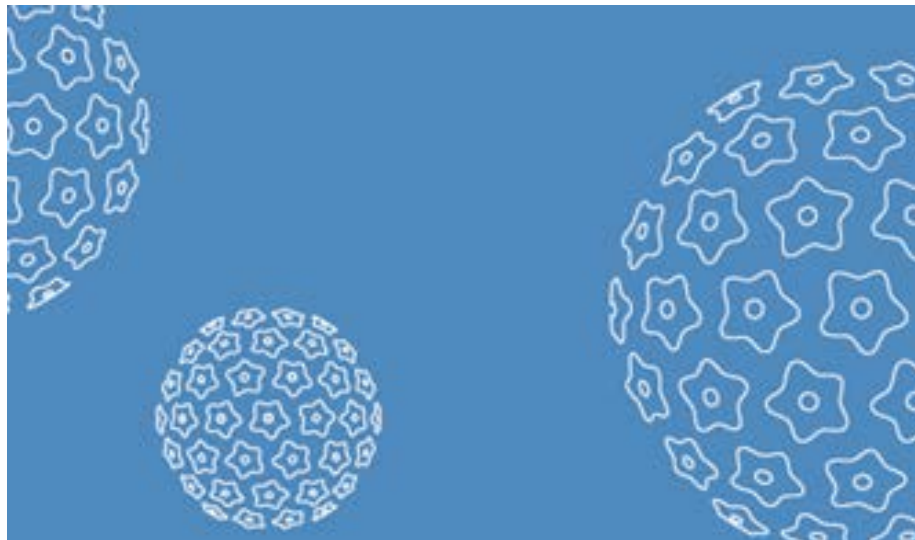
Blood Tests for Colorectal Cancer Screening

- Not recommended

Colon Cancer Check
Contrôle Cancer Colorectal

Serologic Blood Tests for Colorectal Cancer Screening

Ontario Cervical Screening Program (OCSP)



Cervical Screening Eligibility

- Start at age 21 if sexually active
- Pap test every 3 years
- Stop at age 70 if previous 10 years (3 screens) normal

Cervical Screening: A Guideline for Clinical Practice in Ontario

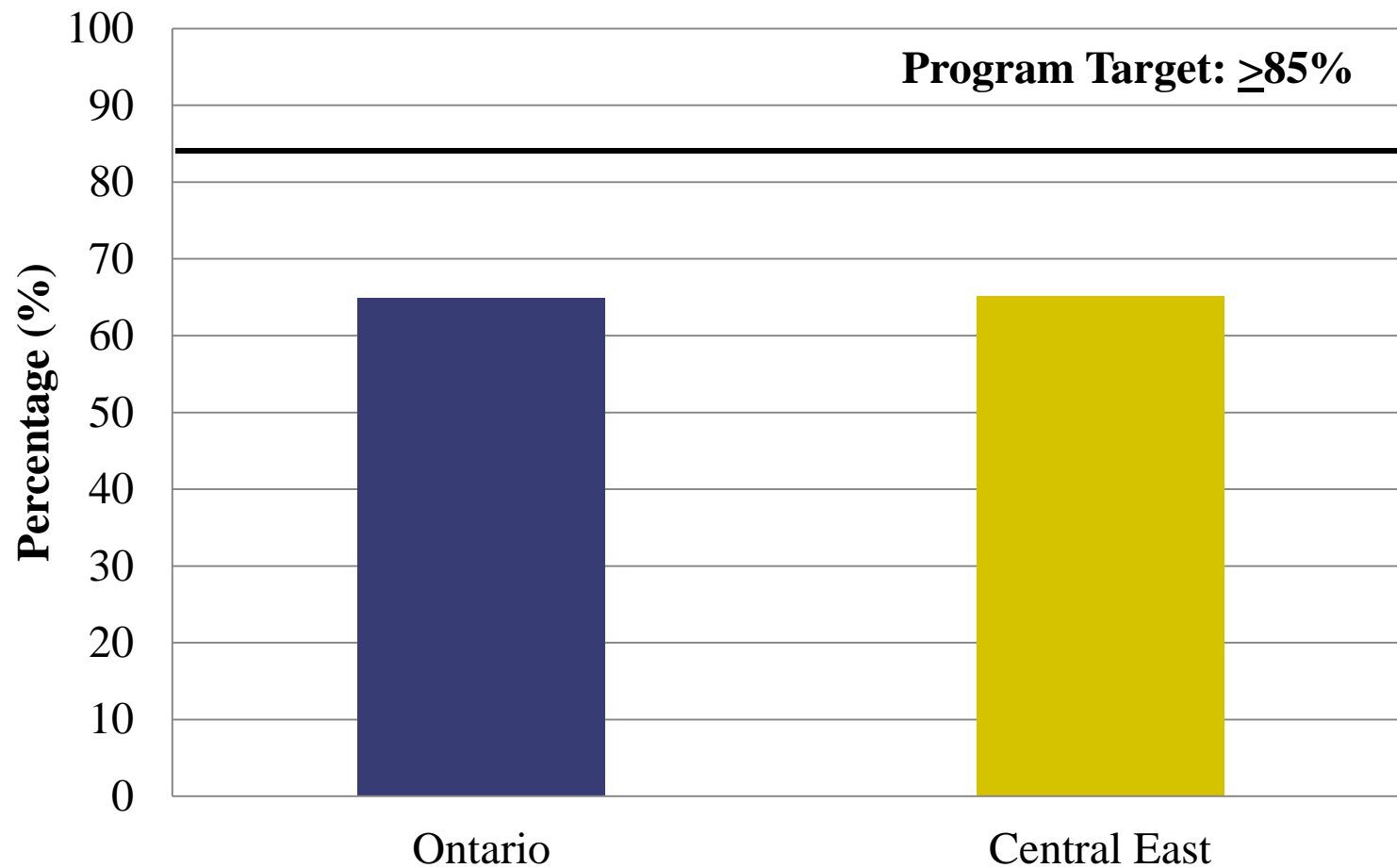
Joan Murphy, MD,¹ Erin B. Kennedy, MHSc,² Sheila Dunn, MD,³ C. Meg McLachlin, MD,⁴
Michael Fung Kee Fung, MD,⁵ Danusia Gzik, MD,⁶ Michael Shier, MD,⁷ Lawrence Paszat, MD⁸

J Obstet Gynaecol Can 2012;34(5): 453–58.

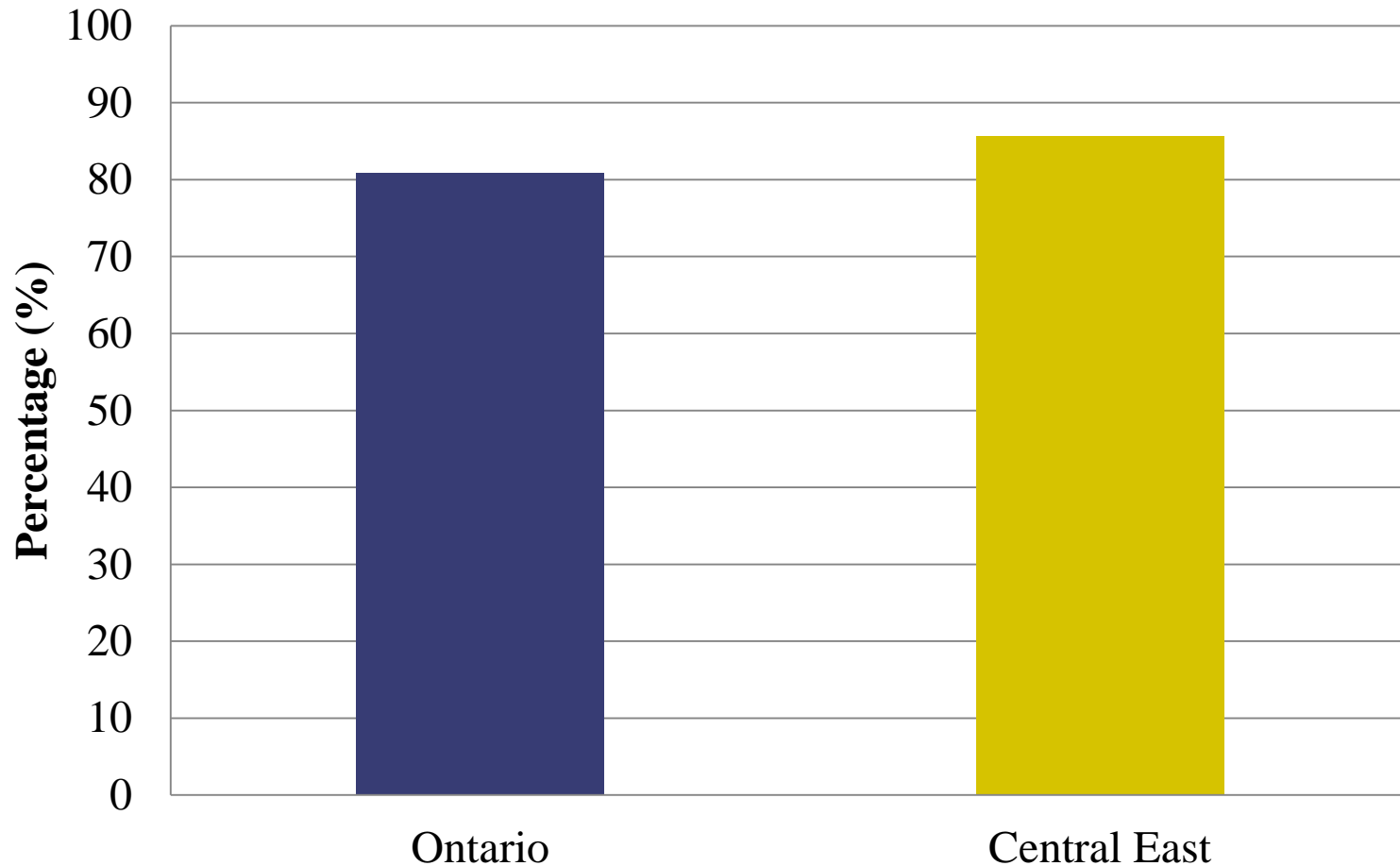
Primary HPV Testing

- Implement in 2015/16
- Economic assessment complete
- Pilots underway
 - Two regions
 - Key informant interviews

Cervical Screening Participation (2009–2011)



Abnormal Pap Colposcopy Follow-up Within 6 Months (2011)



OCSP Correspondence (2013)

- Privacy notice: August 15th
- Result letters: September 19th
- Recall and invitations: November 21st



Colposcopy Quality Assurance 2013/14

- PEBC Colposcopy Standards: mid-2014
- Data collection plan
- QA program
- Regional Colposcopy Leads

How Do You Keep Yourself Abreast of the Clinical Guidelines for Cancer Screening?

Please Choose the One That You Use Most Frequently

- A. MOHLTC Publications
- B. CCO Website or Communications
- C. OMA
- D. OCFP
- E. Other

OCSP Mobile App

- May–Oct: iPhone app launch
- 1,596 downloads in 64 countries
- Dec: launch iPad, BB, Android and Windows Phone



Summary

- Burden of cancer
- Cancer screening – status
- Cancer screening – what's new?

Thank You