

DH to extend Colorectal Cancer Screening Programme on January 1

The Department of Health (DH) will roll out the second phase of the Colorectal Cancer Screening Programme (CRCSP) on January 1 next year, extending the coverage to Hong Kong residents aged 56 to 75, i.e. those born in the years 1943 to 1963, for enrolment in subsidised screening tests for the prevention of colorectal cancer.

The CRCSP, which started on August 6 this year, will be implemented in three phases to subsidise asymptomatic Hong Kong residents aged 50 to 75 to undergo screening tests. Phase one covers people aged 61 to 75 as the first batch to join the Programme, while phase three will further extend the coverage to those aged 50 to 75. Details and commencement date of phase three will be announced in due course.

"The screening can serve the purpose of identifying those who have colorectal cancer before they present with symptoms or individuals at increased risk of colorectal cancer and enable them to receive early treatment," a spokesman for the DH said.

Participants shall attend a medical consultation with an enrolled primary care doctor (PCD) to receive a Faecal Immunochemical Test (FIT) screening. FIT-negative participants under the CRCSP should receive FIT re-screening every two years until they pass the age of 75 in order to maximise the Programme's capability to prevent colorectal cancer. Since September this year, FIT-negative participants have started receiving reminders via SMS, email or post when they are due for re-screening. They can visit any enrolled PCD clinic to receive subsidised FIT re-screening services.

The CRCSP is heavily subsidised by the Government. Details of the screening pathway and corresponding subsidies are as follows:

(1) Eligible persons must first make an appointment with a PCD participating in the Programme. After enrolment in the Programme, the participant will receive a government subsidy to undergo the FIT. A government subsidy of \$280 per consultation applies including the second consultation to follow up on a positive FIT test result.

(2) If the FIT result is positive, the participant will be referred to see a colonoscopy specialist who has enrolled in the Programme to receive a colonoscopy examination subsidised by the Government in order to find out the cause of bleeding. Under the standard colonoscopy service package, the subsidy amount is \$8,500 if polyp removal is necessary, while the amount is \$7,800 if no polyp removal is needed. Colonoscopy specialists may charge a co-payment not exceeding \$1,000 when providing the standard colonoscopy examination service.

Currently, 722 PCDs have successfully enrolled in the CRCSP covering 1,056 locations, and 97 per cent of these locations will not charge any co-payment. In addition, 176 colonoscopy specialists have joined the CRCSP to provide colonoscopy examination services at 362 service locations. If no polyp removal is necessary, about 82 per cent of these locations will not require additional charges. If polyp removal is needed, about 69 per cent will not require additional charges. Separately, about 115,000 eligible persons have participated in the CRCSP and received FIT.

Regarding the screening outcome, as of September 30 this year, among those participants who had submitted FIT tubes with analysed results, 12,117 persons (around 13 per cent) had positive results. Among those participants who underwent colonoscopy examination services, 6,689 persons (around 69 per cent) had colorectal adenomas and 643 persons had colorectal cancer (around 6.6 per cent).

By removing colorectal adenoma in the course of colonoscopy, these lesions are prevented from turning into cancer, which reinforces the importance of undergoing timely screening tests to identify people at increased risk of disease for early treatment. Preliminary analysis of 458 screening-detected cancer cases managed in the CRCSP revealed that about 60 per cent of the screening-detected cancer cases belong to earlier stages, thus having a more favourable prognosis.

Colorectal cancer is the most common cancer locally. In 2016, there were 5,437 newly diagnosed colorectal cancer cases, accounting for 17.3 per cent of all new cancer cases, or about one in six new cancer cases. In 2017, colorectal cancer resulted in 2,138 deaths, accounting for 14.9 per cent of all cancer deaths, or about one in seven cancer deaths. It is the second most common cause of cancer death in Hong Kong, coming only after lung cancer.

"Colorectal cancer is preventable through adopting a healthy lifestyle and well-organised screening. Prognosis of colorectal cancer can be significantly improved by early detection and prompt treatment. Hence, eligible persons are encouraged not to miss joining the CRCSP," the spokesman said.

The DH launched the Colorectal Cancer Screening Pilot Programme in September 2016 which was then regularised in August this year.

Those who are interested in the Programme can visit the DH's thematic website www.colonscreen.gov.hk for more information and the list of enrolled PCDs. The DH operates a dedicated hotline (3565 6288) to provide direct response during office hours for the convenience of the public.

Eligible persons are also reminded to enrol in the electronic Health Record Sharing System (eHRSS) if they wish to join the Programme. For details, please visit the eHRSS website at www.ehealth.gov.hk or call the Registration Office at 3467 6300.