

Participants of Colorectal Cancer Screening Programme exceed 100 000

The Department of Health (DH) launched the Colorectal Cancer Screening Pilot Programme in September 2016 and regularised it as the Colorectal Cancer Screening Programme in August this year to heavily subsidise in phases asymptomatic Hong Kong residents aged 50 to 75 to undergo screening tests for the prevention of colorectal cancer. With the programme's second anniversary in late September this year, the DH today (October 9) announced that the number of participants recently reached 100 000.

The programme is now open to enrolment for those aged 61 to 75, i.e. those born in the years 1942 to 1957. Phase two will cover those aged 56 to 75 while phase three will extend to those aged 50 to 75. Details and commencement dates of phases two and three will be announced in due course.

A spokesman for the DH reminded those born in 1942 to seize the chance to enrol in the programme on or before December 31 this year, or else they will lose the eligibility as their age will exceed the upper limit next year.

"Faecal Immunochemical Test (FIT)-negative participants under the Programme should receive FIT re-screening every two years in order to maximise the Programme's capability to prevent colorectal cancer. Starting from the end of September this year, the first batch of FIT-negative participants has begun to receive re-screening notifications via SMS, email or postal mail. They can visit any enrolled primary care doctor (PCD) clinic to receive subsidised FIT re-screening services," the spokesman said.

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 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.

To date, 690 PCDs have enrolled in the Programme covering nearly

1 006 locations, and 97 per cent of these locations will not charge any co-payment. In addition, 178 colonoscopy specialists have joined the Programme to provide colonoscopy examination services at 354 service locations. If no polyp removal is necessary, about 80 per cent will not require additional charges. If polyp removal is needed, about 70 per cent will not require additional charges.

As of June 30, i.e. the first 21 months after the launch of the Pilot Programme, 76 359 eligible persons had participated and undergone FIT screening. Among the participants who had submitted FIT tubes with analysed results, 9 637 persons (around 13 per cent) had positive results. Among those who underwent colonoscopy examination services, 5 721 persons (around 69 per cent) had polyps removed that revealed colorectal adenomas. As their polyps have been removed in the course of examination, there is no chance for these polyps to become cancerous. The programme has demonstrated the importance of undergoing timely screening tests for identifying people at increased risk of disease for early treatment.

The spokesman said, "Among the participants who received colonoscopy services, 523 participants were diagnosed with colorectal cancer and have received referral, representing a detection rate of six per cent. Preliminary assessment of 319 colorectal cancer cases revealed that the majority (60 per cent) belonged to the early stages, thus having a more favourable prognosis."

Colorectal cancer is the most common cancer locally. In 2015, there were 5 036 newly diagnosed colorectal cancer cases, accounting for 16.6 per cent of all new cancer cases, or about one in six new cancer cases. In 2016, colorectal cancer resulted in 2 089 deaths, accounting for 14.7 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.

To combat the threat of non-communicable diseases (NCDs) including cancers, the Government this year announced "Towards 2025: Strategy and Action Plan to Prevent and Control Non-communicable Diseases in Hong Kong", setting out nine local targets to be achieved by 2025, which include reducing the risk of premature mortality from cancer.

Those who are interested in the Programme can visit the DH's thematic website www.colonscreen.gov.hk for more information and find a list of enrolled PCDs. The DH has also set up a dedicated hotline (3565 6288), which is operated by trained staff to provide a direct response to public enquiries as a more convenient service for the public.

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