Technoleg Iechyd Cymru
Health Technology Wales

Topic Exploration Report

Topic explorations are designed to provide a high-level briefing on new topics submitted for consideration by Health Technology Wales. The main objectives of this report are to:

1. Inform discussions on new topics received by HTW.
2. Determine the quantity and type of evidence available on a topic.
3. Assess the topic against HTW selection criteria.

Topic:	Faecal immunochemical tests in primary care for the diagnosis of patients presenting with symptomatic bowel disease
Topic exploration report number	TER011
Referrer:	Jared Torkington, Cardiff & Vale UHB
Topic exploration undertaken by:	Health Technology Wales

Aim of Search

Health Technology Wales researchers searched for evidence on the use of faecal immunochemical testing (FIT) in primary care, for people presenting with symptomatic bowel disease.

Summary of Findings

NICE Diagnostics Guidance 30 (published July 2017) makes recommendations on the clinical and cost effectiveness of quantitative faecal immunochemical tests to guide referral for colorectal cancer in primary care. This NICE Guidance was based on a de novo systematic review and economic evaluation, which has since been published separately.

Conclusions

NICE Diagnostics Guidance 30 provides an assessment of the existing evidence (up to March 2016, the date of last search) on the use of faecal immunochemical tests to guide referral of suspected colorectal cancer from primary care. The search did not identify any other relevant subsequently published sources of secondary research. It may be possible to adapt or adopt evidence-based recommendations from NICE DG30. In order to establish whether further research beyond that included in NICE DG30 is needed, the question of interest needs to be confirmed and refined.

Areas of Uncertainty

There was uncertainty around the proposed aim of the appraisal and whether a more specific research question was required. In particular, whether the NICE DG30 would be suitable for adaptation, or whether there were aspects not explored by NICE DG30 that could be addressed through HTW appraisal.

Feasibility of Technology Assessment

There is potential for FIT to provide a clear benefit to patients and NHS Wales as a 'rule out' test, avoiding unnecessary referrals for colonoscopy. FIT will be introduced for symptomatic patients in Wales (as per NICE DG30), so there is considerable interest from stakeholders in this technology. However, there is uncertainty around the proposed aim of this appraisal how it will complement NICE DG30, and a relevant research question needs to be clarified.

HTW's Assessment Group concluded to progress this topic to Evidence Appraisal. This will be published as EAR007 – please refer to this for the final agreed inclusion criteria for evidence.

Brief literature search results

Resource	Results
HTA organisations	
Healthcare Improvement Scotland	No results found
UK guidelines and guidance	
SIGN	No results found
NICE	NICE Guideline NG12: Suspected cancer: recognition and referral. https://www.nice.org.uk/guidance/NG12 NICE Diagnostics guidance DG30. Quantitative faecal immunochemical tests to guide referral for colorectal cancer in primary care: https://www.nice.org.uk/guidance/dg30 Supporting evidence review to NICE DG30: https://www.nice.org.uk/guidance/dg30/documents/diagnostics-assessment-report
Secondary literature and economic evaluations	
Cochrane library	No relevant results
Medline	Westwood, M., I. Corro Ramos, S. Lang, M. Luyendijk, R. Zaim, L. Stirk, M. Al, N. Armstrong and J. Kleijnen (2017). "Faecal immunochemical tests to triage patients with lower abdominal symptoms for suspected colorectal cancer referrals in primary care: a systematic review and cost-effectiveness analysis." Health Technol Assess 21(33): 1-234. Westwood, M., S. Lang, N. Armstrong, S. van Turenhout, J. Cubiella, L. Stirk, I. C. Ramos, M. Luyendijk, R. Zaim, J. Kleijnen and C. G. Fraser (2017). "Faecal immunochemical tests (FIT) can help to rule out colorectal cancer in patients presenting in primary care with lower abdominal symptoms: a systematic review conducted to inform new NICE DG30 diagnostic guidance." BMC Med 15(1): 189. The search did not identify any relevant secondary evidence published since NICE DG30 and its supporting assessment report.
CRD database	Searched for any secondary evidence published prior to NICE DG18. None identified.
epistemonikos.org	Searched for any secondary evidence published prior to NICE DG18. None identified.
Primary studies	
Cochrane library	No relevant results
Ongoing primary research	
	Quantitative Immunochemical Fecal Occult Blood Test in Symptomatic Patients (FIKA). NCT02491593. Recruitment status: unknown. Date of completion: unknown. Quantitative Versus Qualitative Fecal Immunochemical Tests (FIT) to Prioritize Urgency of Colonoscopy Referral. NCT02037646. Recruitment status : completed. Date of completion: December 2016.
Other	
Evidence identified by topic proposer	Cubiella, J., J. Digby, L. Rodriguez-Alonso, P. Vega, M. Salve, M. Diaz-Ondina, J. A. Strachan, C. Mowat, P. J. McDonald, F. A. Carey, I. M. Godber, H. B. Younes, F. Rodriguez-Moranta, E. Quintero, V. Alvarez-Sanchez, F.

	Fernandez-Banares, J. Boadas, R. Campo, L. Bujanda, A. Garayoa, A. Ferrandez, V. Pinol, D. Rodriguez-Alcalde, J. Guardiola, R. J. Steele and C. G. Fraser (2017). "The fecal hemoglobin concentration, age and sex test score: Development and external validation of a simple prediction tool for colorectal cancer detection in symptomatic patients." Int J Cancer 140(10): 2201-2211. McDonald, P. J., J. Digby, C. Innes, J. A. Strachan, F. A. Carey, R. J. Steele and C. G. Fraser (2013). "Low faecal haemoglobin concentration potentially rules out significant colorectal disease." Colorectal Dis 15(3): e151-159. Mowat, C., J. Digby, J. A. Strachan, R. Wilson, F. A. Carey, C. G. Fraser and R. J. Steele (2016). "Faecal haemoglobin and faecal calprotectin as indicators of bowel disease in patients presenting to primary care with bowel symptoms." Gut 65(9): 1463-1469. Quyn, A. J., R. J. Steele, J. Digby, J. A. Strachan, C. Mowat, P. J. McDonald, F. A. Carey, I. M. Godber, H. B. Younes and C. G. Fraser (2018). "Application of NICE guideline NG12 to the initial assessment of patients with lower gastrointestinal symptoms: not FIT for purpose?" Ann Clin Biochem 55(1): 69-76. Westwood, M., I. Corro Ramos, S. Lang, M. Luyendijk, R. Zaim, L. Stirk, M. Al, N. Armstrong and J. Kleijnen (2017). "Faecal immunochemical tests to triage patients with lower abdominal symptoms for suspected colorectal cancer referrals in primary care: a systematic review and cost-effectiveness analysis." Health Technol Assess 21(33): 1-234. Westwood, M., S. Lang, N. Armstrong, S. van Turenhout, J. Cubiella, L. Stirk, I. C. Ramos, M. Luyendijk, R. Zaim, J. Kleijnen and C. G. Fraser (2017). "Faecal immunochemical tests (FIT) can help to rule out colorectal cancer in patients presenting in primary care with lower abdominal symptoms: a systematic review conducted to inform new NICE DG30 diagnostic guidance." BMC Med 15(1): 189.

Date of search:	July 2018
Concepts used:	faecal immunochemical test and variations/synonyms