



General Practice and the National Bowel Cancer Screening Program

The National Bowel Cancer Screening Program saves lives—but it can only work with the support of general practices. The evidence is clear that a recommendation from a primary healthcare provider is an important motivator for participation in bowel cancer screening.

How does the National Bowel Cancer Screening Program work?

The Program mails eligible 50—74 year olds bowel screening kits to complete at home. The Program is expanding and \$95.9 million was provided in the 2014 Budget to accelerate the expansion—from 2019 all eligible people aged 50—74 years will be invited to screen every two years. The ages at which people will be invited are:

Year	Eligible Ages
2017	50, 54, 55, 58, 60, 64, 68, 70, 72, 74
2018	50, 54, 58, 60, 62, 64, 66, 68, 70, 72, 74
from 2019	50, 52, 54, 56, 58, 60, 62, 64, 66, 68, 70, 72, 74

Check participant eligibility for receiving the National Bowel Cancer screening kit through the [online eligibility calculator](http://www.cancerscreening.gov.au/eligibility) (www.cancerscreening.gov.au/eligibility).

Why is bowel screening important?

- Australia has one of the highest rates of bowel cancer in the world—around 17,000 people are diagnosed each year.
- If found early 9 out of 10 cases of bowel cancer can be successfully treated.
- Around 9 out of 10 Australians diagnosed with bowel cancer are over 50 years old.
- Faecal occult blood test screening is recommended at least every two years for people over the age of 50 who are at, or slightly above, average risk for bowel cancer (about 98% of the population).
- Since the Program began in 2006, over 3.5 million Australians have been screened and about 186,000 participants have had a diagnostic assessment to follow up a positive result. Of those assessed, 1 in 32 have been diagnosed with a confirmed or suspected cancer and 1 in 7 have had an adenoma detected.

- A 2014 study found that people who were invited to screen through the Program had 15% less risk of dying from bowel cancer, and were more likely to have less-advanced bowel cancers when diagnosed, than people who were not invited.

How can general practices support participation in the Program?

- Displaying brochures, flyers and posters —[Order Program Resources](#)
- Talking to patients aged 50—74 years about bowel cancer screening—[Download Clinical Resources](#) or [Check when an individual will get a kit](#)
- Demonstrating how to use a kit. Order demonstration kits at NBCSP@health.gov.au
- Sending a letter to 49 year olds to encourage participation—[Download a template letter](#)
- Knowing the Program—for GPs these [Short Videos](#) on the NBCSP include information on screening, classification of risk and referral to colonoscopy. For nurses this one hour [Webinar](#) includes information on bowel cancer, screening and how nurses working in general practice can approach bowel screening with patients.

How can general practices support better reporting?

- The annual [NBCSP Monitoring Report](#) includes data on participation, positivity and diagnostic assessment rates. Reporting from health care professionals is critical to monitoring outcomes. GPs are asked to:
 - Submit the [GP Assessment Form](#) electronically or by post or fax to notify the Program Register of referral/non referral for colonoscopy or other bowel examination for participants with a positive result. Provision of information will attract a payment.
 - Indicate whether a patient referred for colonoscopy is an NBCSP participant to assist with reporting to the Program Register. Program stickers are available by calling the Program Info Line on 1800 118 868.

Participation Rates

Program participation rates by small geographic area (i.e. suburb) can be found at the [Australian Institute of Health and Welfare Data Tables](#).

More information

Go to [National Bowel Cancer Screening Program website](#) (www.cancerscreening.gov.au/bowel) or call the Program Info Line on 1800 118 868