# A survey aimed to collect quantitative information about screening activity during the pandemic emergency





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## No conflict of interest to declare



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Thank you!

UK, England

UK, Scotland

UK, Northern Ireland

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Spain, Basque country

France

The Netherlands

Slovenia

Ireland

Czech Republik

Italy

Finland

Switzerland, Vaud

Sweden, Stockolm

Canada, Ontario

Taiwan



## Modeling the impact of disruption

Experts from all around the world joined forces in the **COVID-19** and **Cancer Global Modelling Consortium (ccgmc.org)** to simulate different scenarios of disruption and recovery strategies and predict both long-term health outcomes and short- and long-term costs and savings.

Modelling results are suggesting that screening interruptions

- would increase the number of late stage cancers and of deaths.
- may have a higher impact in the older age groups

Their impact is related to

**Duration** of the disruption

Participation during the recovery period

Catch-up strategy



# Monitoring the impact of disruption

Close monitoring of established indicators of screening performance to document the impact of the pandemic providing

- input to inform and validate modelling
- information
  - ☐ to estimate the long-term impact of the delay
  - ☐ to estimate expected time to a complete recovery
  - ☐ to assess the ability of the program to achieve the expected targets and to make quick adjustments as problems became apparent.
  - uptake to assess the effect of measures implemented to restart programs and possibly increase the screening uptake

#### COMMENTARIES

Colorectal Cancer Screening in the Novel Coronavirus Disease-2019 Era EVELIEN DEKKER

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On behalf of the Expert Working Group on COVID-19 of the WEO Colorectal Cancer Screening Committee





#### **International Cancer Screening Network**

#### **Colorectal Cancer Screening Interest Group**

Iris Lansdorp-Vogelaar Co-Chair Carlo Senore Co-Chair

#### Monitoring screening during the COVID-19 emergency

The ICSN CRC interest group has designed a project, aimed to collect aggregated quantitative data about screening activity and outcomes, using a standardized data template, to calculate key indicators of activity and performance



#### **Data collection**

- Volume of activity: invitations and examinations
- Participation
- Screening tests results
- Compliance with colonoscopy assessment
- Waiting time for colonoscopy
- Screening outcomes
  - neoplasia yield
  - stage distribution of screen-detected CRCs
- Interval cancer rate



### **Data collection**

#### Data are stratified by

- Sex
- Age
- Screening history

Collected for 2020 and for the corresponding period in 2019 or 2018 (reference year for comparison)



Cancer site:	Colorectal Cancer	Country / Region:
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## Historic information

Year of screening introduction

# Current screening strategy

		Age	
Screening test	from:	to:	Interval
FIT			2

Index year	Index year Reference year - Reference ye		Reference period - activity	Reference period - invitations	Refernce period - participation
2020	2018	2018	January - June	January - June	January - September

# Table 1: Population (Men+Women)

#### A

	Target population	Screening interval	Screening test	Annual target population
40-44		2	FIT	0
45-49		2	FIT	0
50-54		2	FIT	0
55-59		2	FIT	0
60-64		2	FIT	0
65-69		2	FIT	0
70-74		2	FIT	0
75-79		2	FIT	0
Unknown *		2	FIT	0
Total	0			0

\* Only enter applicable data here ('Unknown') that cannot be broken down by age group





Table 3: Further assessment indication

		D1	D2	D3		D4		Rate of indic follow- colonose	up	r			D1_r	D2_r	D3_r		D4_r	
		Individuals screened in 2020	Positive screening tests	Negative screening tests	Total adequate tests	Inadequate screening tests	Test result unknown	Positive To	tal %	•			Individuals screened in 2018	Positive screening tests	Negative screening tests	Total adequate tests	Inadequate screening tests	Test result unkno wn
	40-44				0		0					40-44				0		0
	45-49				0		0					45-49				0		0
	50-54				0		0					50-54				0		0
	55-59				0		0					55-59				0		0
Initial	60-64				0		0				Initial	60-64				0		0
screening	65-69				0		0				screening	65-69				0		0
	70-74				0		0					70-74				0		0
	75-79				0		0					75-79				0		0
	Unknow n *				0		0					Unkno wn				0		0
	Total	0	0	0	0	0	0					Total	0	0	0	0	0	0
								•										
	40-44				0		0					40-44				0		0
	45-49				0		0					45-49				0		0
	50-54				0		0					50-54				0		0
	55-59				0		0					55-59				0		0
Subseque	60-64				0		0				Subsequent	60-64				0		0
nt	65-69				0		0				screening	65-69				0		0
screening	70-74				0		0					70-74				0		0
	75-79				0		0					75-79				0		0
	Unknow n *				0		0					Unkno wn *				0		0
	Total	0	0	0	0	0	0					Total	0	0	0	0	0	0



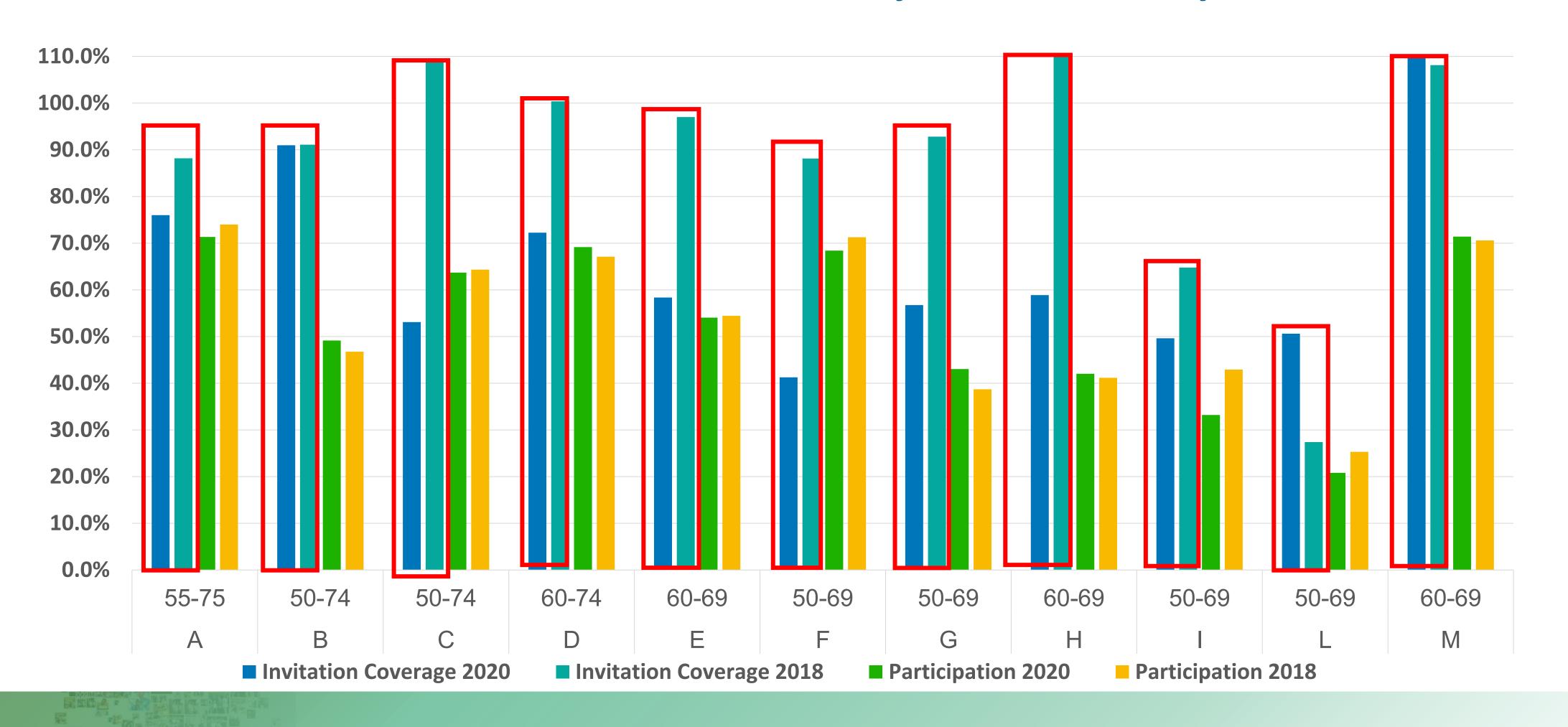


# Invitation coverage

# Participation

N subjects invited in the year/Annual target population

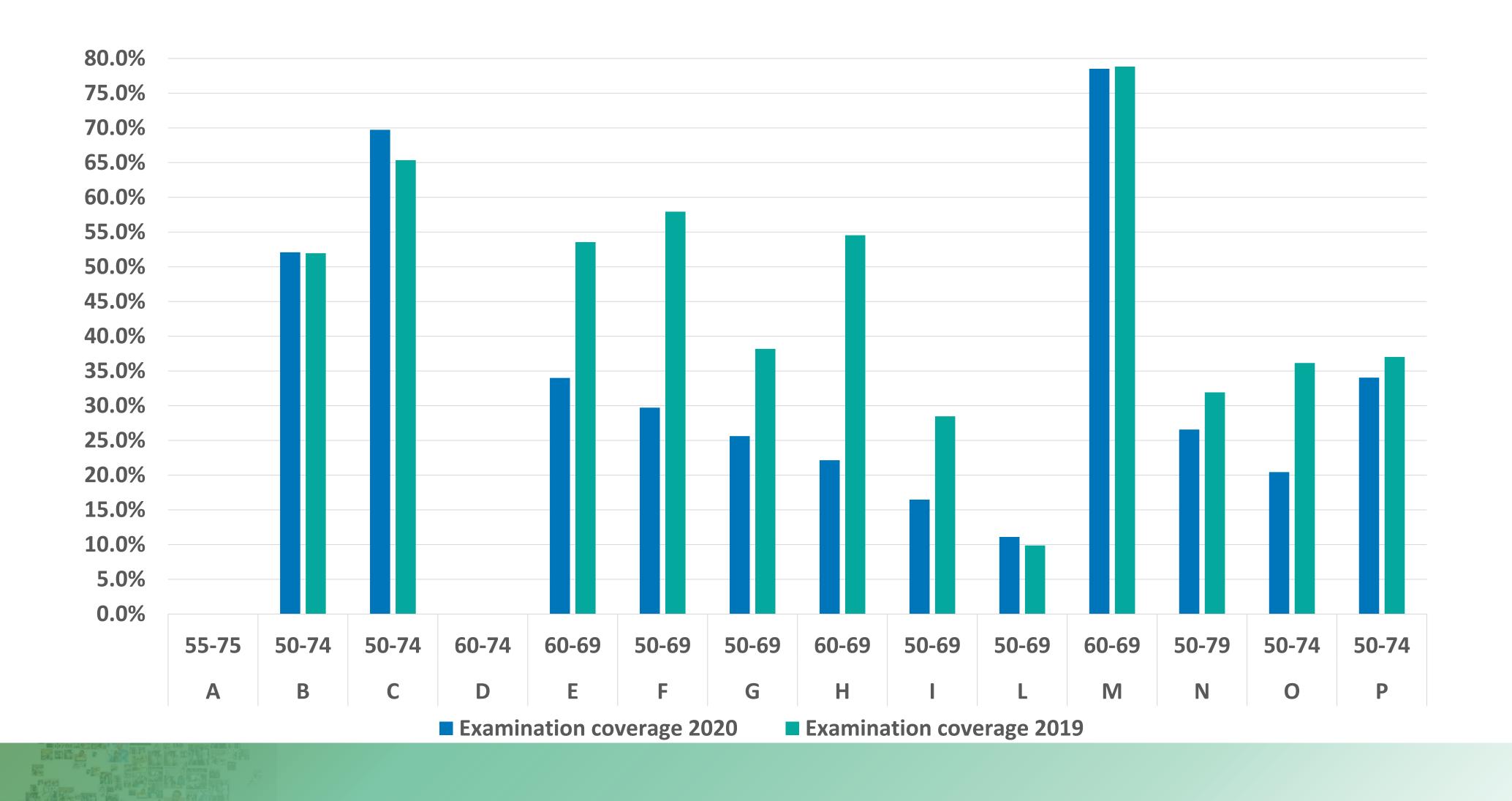
N subjects attending screening within June 30<sup>th</sup> of the following year / N subjects invited in the year





# Examination coverage

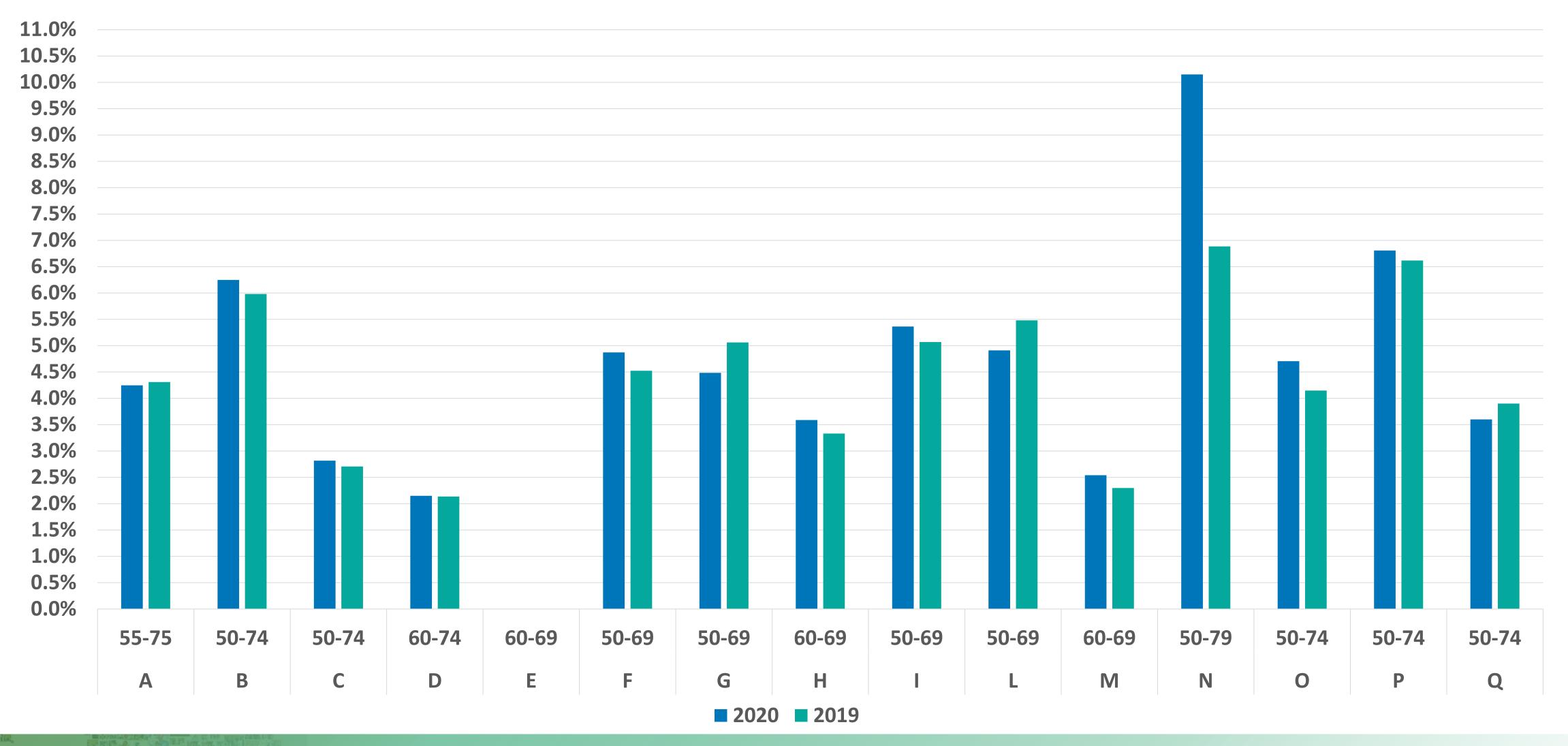
## N subjects examined in the year/Annual target population





# Positivity rate

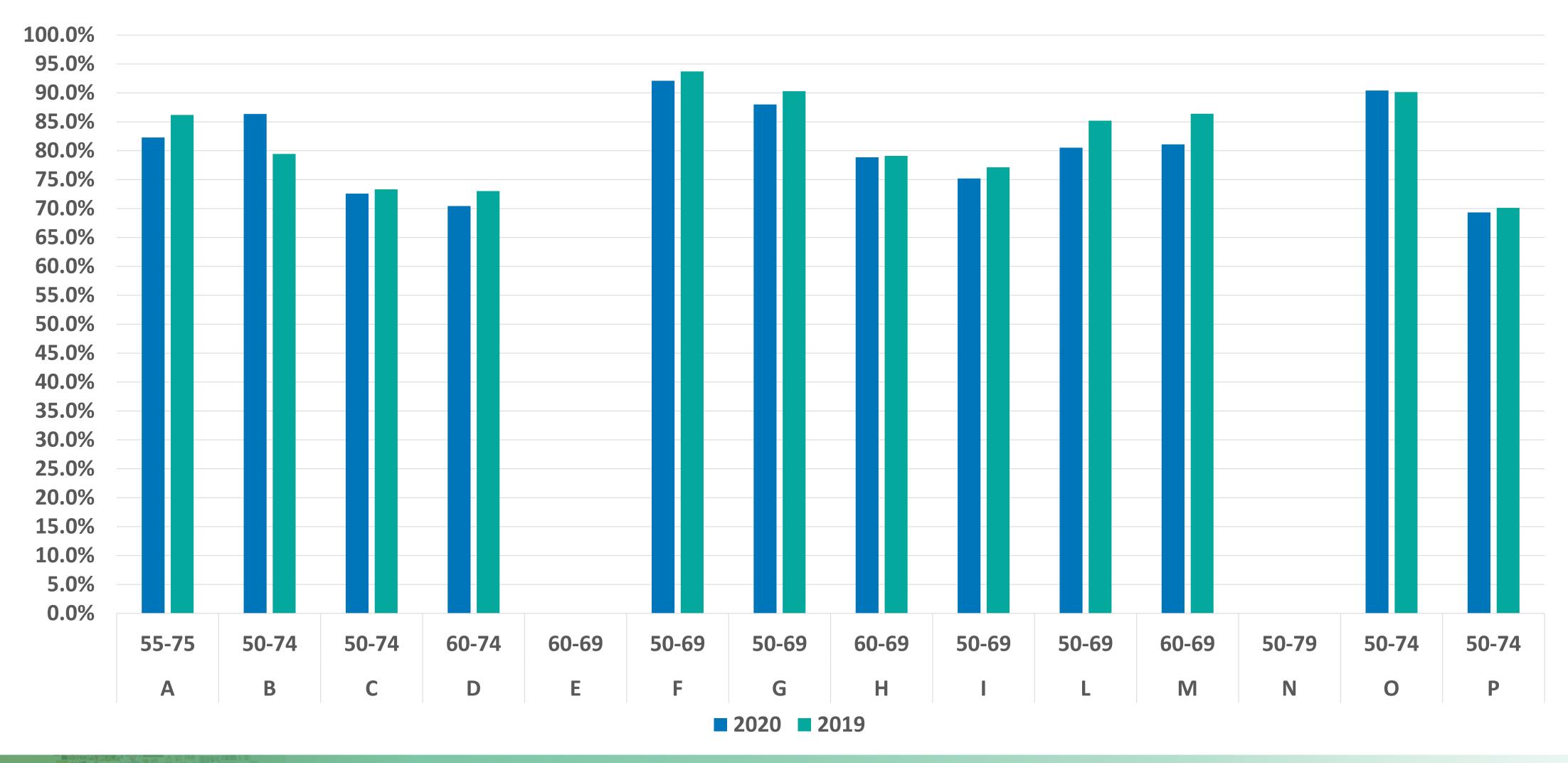
## N subjects with a FIT+ results/N subjects with a valid FIT result





# Compliance with colonoscopy referral - FIT + subjects

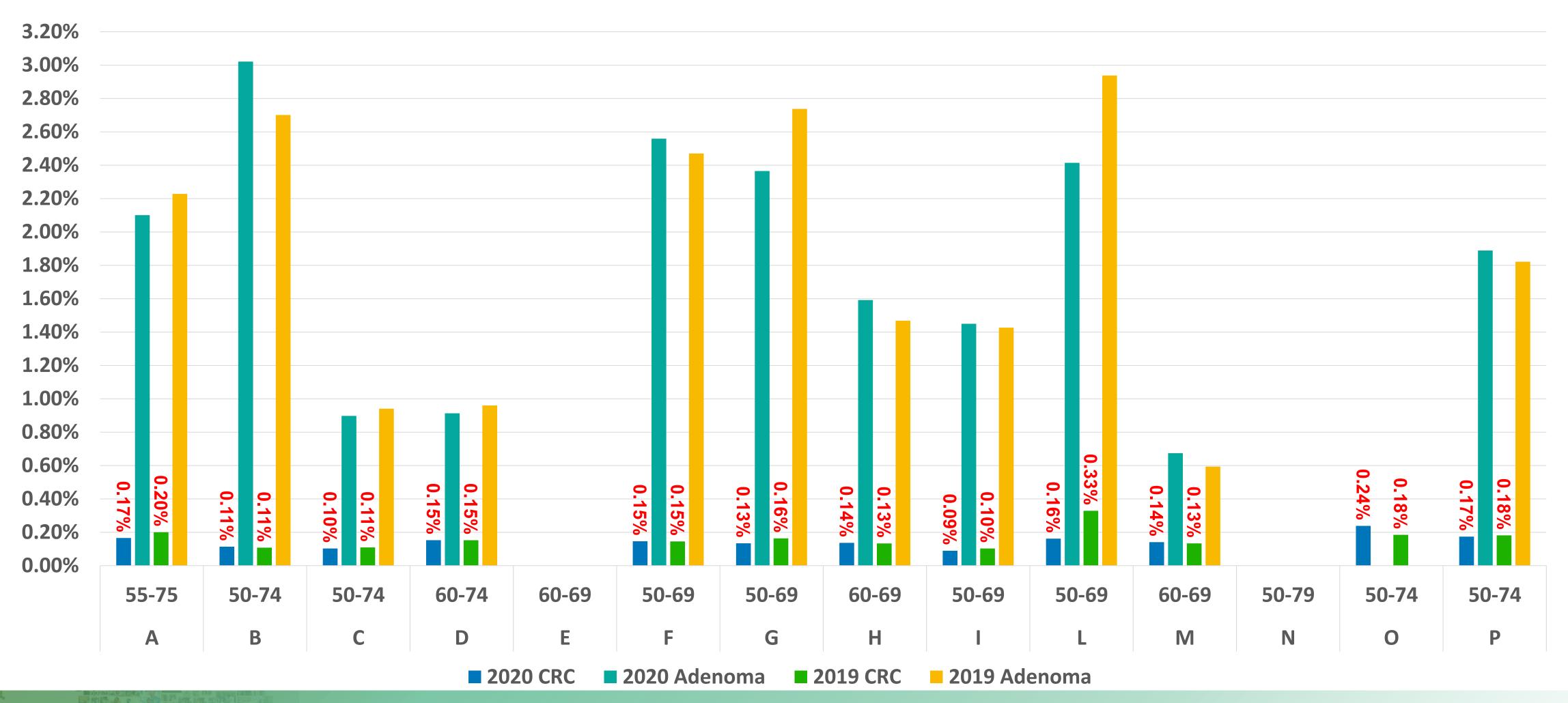
N subjects performing a TC/N subjects with FIT+ result in the year





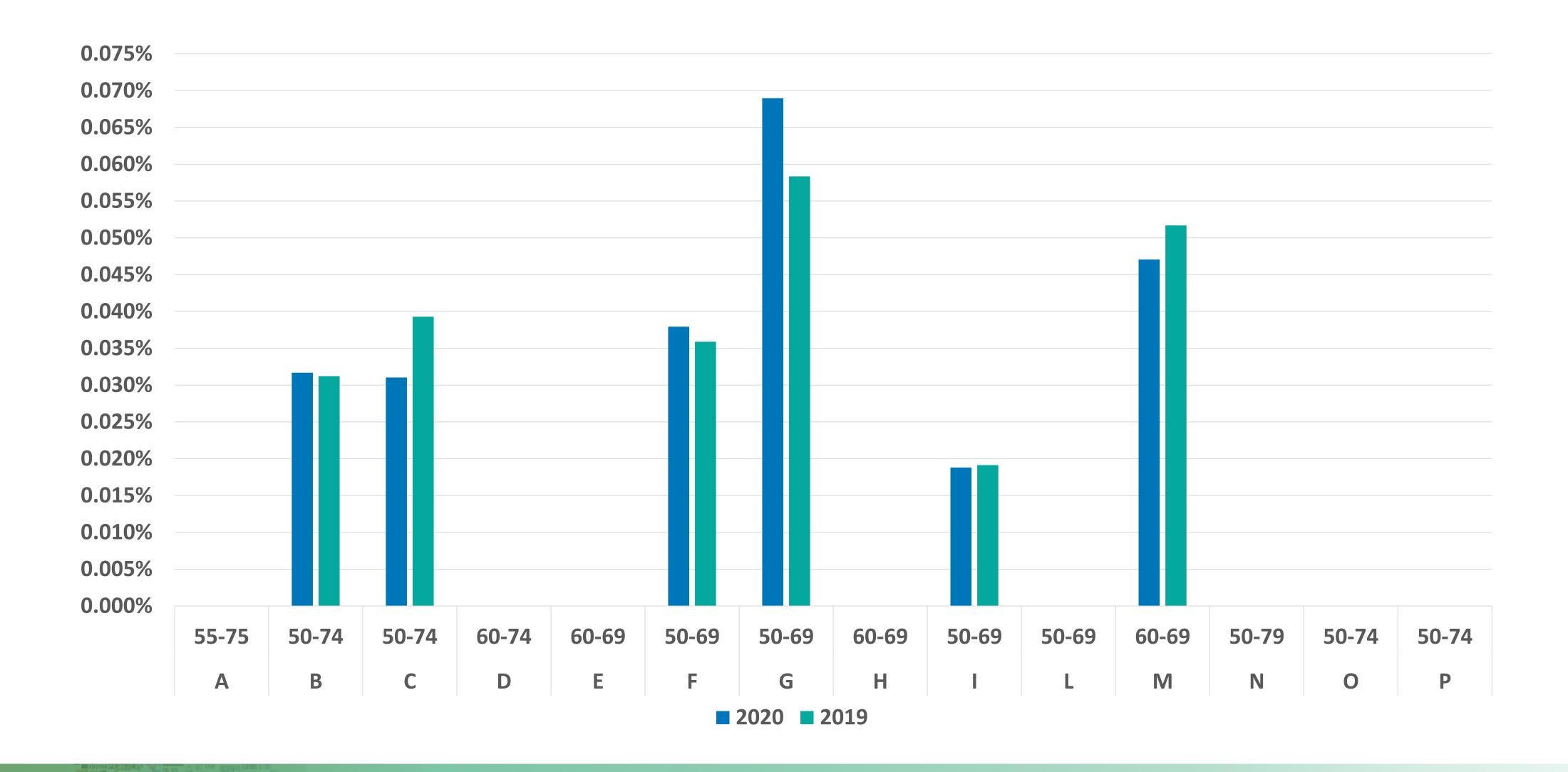
## Detection rate CRC - Adenoma

## N subjects detected with CRC-Adenoma /N subjects examined





# Detection rate - stage III-IV CRC





# Conclusions

#### Quantitative data collection is feasible

changing the timing and the format of the monitoring reports might be difficult in some countries

#### Participation rates were not showing sharp decline

effective recovery plans during the second half of the year prioritization schemes

Compliance with referral for TC assessment among FIT + subjects slightly decreased

most programs did not stop performing assessment TC for FIT + subjects

We are observing screening outcomes of people invited in 2020 when the delay was likely still limited Most programs were not able to cover their annual target population

a backlog was therefore maintained also in 2021

We would then need to get information about screening outcomes of people who could not be invited in 2020



#### Thank you to

Mireille Broeders
Iris Lansdorp-Vogelaar
Doug Puricelli-Perin

# Thank you for your attention

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Table 4: Participation in follow-up colonoscopy for further assessment after a positive screening test

		E1	E2a	E2b	E2c	<b>E</b> 3				Follow-up colonoscopy ¡	performance rate	
		Positive screening tests in 2020	Follow-up colonoscopy performed within 3 months from positive screening test	Follow-up colonoscopy performed between 3 and 9 months from positive screening test	Follow-up colonoscopy performed > 9 months from positive screening test	Follow-up colonoscopy not performed yet	Total known colonoscopy performance status	Unknown colonoscopy performance status	Follow-up colonoscopy performed within 3 months from positive screening test	Follow-up colonoscopy performed between 3 and 9 months from positive screening test	Total known colonoscopy performance status	%
	40-44	0					0	0				
	45-49	0					0	0				
	50-54	0					0	0				
	55-59	0					0	0				
	60-64	0					0	0				
Initial screening	65-69	0					0	0				
	70-74	0					0	0				
	75-79	0					0	0				
	Unkno wn *	0					0	0				
	Total	0	0	0	0	0	0	0				
									·			
	40-44	0					0	0				
	45-49	0					0	0				
	50-54	0					0	0				
	55-59	0					0	0				
Subsequent	60-64	0					0	0				
screening	65-69	0					0	0				
	70-74	0					0	0				
	75-79	0					0	0				
	Unkno wn *	0					0	0				
	Total	0	0	0	0	0	0	0				

Table 5 : Screening outcome

		G1	G2	G3	G4	G5	G6		
		Adequate tests in 2020	Follow-up colonoscopy performed	No lesion detected	Adenomas	Colorectal cancers	Other lesions	Total screening outcome known	Screening outcome unknown
	40-44	0	0					0	0
	45-49	0	0					0	0
	50-54	0	0					0	0
	55-59	0	0					0	0
	60-64	0	0					0	0
Initial screening	65-69	0	0					0	0
	70-74	0	0					0	0
	75-79	0	0					0	0
	Unknown *	0	0					0	0
	Total	0	0	0	0	0	0	0	0
	40-44	0	0					0	0
	45-49	0	0					0	0
	50-54	0	0					0	0
Subsequent	55-59	0	0					0	0
screening	60-64	0	0					0	0
	65-69	0	0					0	0
	70-74	0	0					0	0
	75-79	0	0					0	0
	Total	0	0	0	0	0	0	0	0



#### Table 6 : Staging of screen detected cases

CRCs diagnosed amor	ng subjects	H1	H2	H3	H4			
screened in 20	screened in 2020		Stage II	Stage III	Stage IV	Stage ?	Colorectal cancers	Refused treatment
	40-44					0	0	
	45-49					0	0	
	50-54					0	0	
	55-59					0	0	
Initial carooning	60-64					0	0	
Initial screening	65-69					0	0	
	70-74					0	0	
	75-79					0	0	
	Unknown *					0	0	
	Total	0	0	0	0	0	0	0
	40-44					0	0	
	45-49					0	0	
	50-54					0	0	
	55-59					0	0	
Subsequent screening	60-64					0	0	
Subschaciff sereciffing	65-69					0	0	
	70-74					0	0	
	75-79					0	0	
	Unknown *					0	0	
	Total	0	0	0	0	0	0	0

