

Positive result for new DNA blood test for bowel cancer

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Professor Graeme Young presented at the Digestive Diseases Week conference in Chicago last week.

(Medical Xpress)—A team of Australian scientists has presented evidence that a new blood test for bowel cancer based on two genes that "leak" into the blood can detect 65 per cent of bowel cancer cases.

The successful detection rate increased to 73 per cent for cancers that

are Stage II or higher.

The data were presented in Chicago at the Digestive Diseases Week (DDW) conference by Professor Graeme Young from the Flinders Centre for Innovation in Cancer at Flinders University.

During the conference, Professor Young was also presented with the Charles G. Moertel Award from the International Digestive Cancer Alliance and the World Endoscopy Organisation for his contributions to [bowel cancer](#) screening globally.

According to Professor Young, the test could be a candidate for population screening in the future and its sensitivity for cancer justifies prospective evaluation in a large screening population.

"A [blood test](#) is likely to overcome some of the barriers to screening with faecal tests. It might prove to be acceptable to those failing to participate in screening using established methods, which at the moment are primarily based around faecal tests," Professor Young said.

"If this test becomes available in the future I think the message would need to be that the faecal test is the best place to start for people who are due for screening. Then the plasma test would be for those people who can't or won't screen with a faecal test," he said.

Australian biotechnology company Clinical Genomics co-developed the test with CSIRO and the new test has been clinically validated in collaboration with the Flinders Centre for Innovation in Cancer at Flinders University.

Dr Larry LaPointe, CEO of Clinical Genomics, is a co-author of the presentation and says he looks forward to commercialising the test in the future.

"The test is covered by a range of pending patents and these new data give reason to be optimistic about the prospect of improving screening rates by providing another option for people who can't or won't screen for bowel cancer using home-based tests ," said Dr LaPointe.

According to Dr LaPointe, the test could be available in Australia on a "user pays" basis as soon as early spring 2014.

"These results show the test has the potential to underpin a cost-effective blood test that identifies those with a curable bowel cancer. This has the potential to save many lives by complementing existing [screening](#) programs," added Dr LaPointe.

The results were based on blood specimens collected at an Australian and Dutch hospital from more than 2,000 volunteers who were scheduled for colonoscopy or for bowel surgery.

Provided by Flinders University

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