

Factors ID'd for CRC risk stratification with positive FIT

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(HealthDay)—Fecal hemoglobin concentration, sex, and age can be used to classify the risk of advanced colorectal neoplasia among individuals with positive results from fecal immunochemical tests (FITs), according to a study published in the September issue of *Gastroenterology*.

Josep M. Auge, M.D., from Hospital Clínic in Barcelona, Spain, and colleagues retrospectively analyzed data from a consecutive series of 3,109 [participants](#) with positive results from FITs (≥ 20 $\mu\text{g/g}$ of feces) included in the first round of the Barcelona colorectal cancer screening program (December 2009 through February 2012). A colonoscopy was performed in all patients and they were classified according to advanced or nonadvanced [colorectal neoplasia](#).

The researchers found that participants with advanced colorectal

neoplasia had significantly higher median fecal hemoglobin concentrations compared with participants with nonadvanced colorectal neoplasia (105 versus 47 $\mu\text{g/g}$; P age of 60 to 69 years (OR, 1.24); and fecal [hemoglobin concentration](#) >177 $\mu\text{g/g}$ (OR, 3.80). Sixteen risk categories were identified based on these factors, and the risk for advanced colorectal neoplasia was increased 11.46-fold among those in the highest risk category versus the lowest category.

"These factors should be used to prioritize individuals for colonoscopy examination," the authors write.

More information: [Abstract](#)
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