Negligible drop in neoplastic lesion Dx after first round of FIT

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(HealthDay)—After the first round of a fecal immunochemical test

(FIT)-based, multiple-round, long-term screening program, there is a negligible reduction in detection rates for neoplastic lesions in the proximal versus the distal colon, according to a study published online Oct. 2 in the *Annals of Internal Medicine*.

Manuel Zorzi, M.D., from the Veneto Tumour Registry in Padova, Italy, and colleagues conducted a retrospective study involving persons aged 50 to 69 years who completed six rounds of FIT screening and assessed long-term detection rates for advanced adenoma and colorectal cancer.

The researchers found that a total of 123,347 participants had 441,647 FITs between 2002 and 2014. From the first to the second screening round, the detection rate for proximal colon cancer declined (0.63 to 0.36 per 1,000 screenees); across six rounds, there was a steady decrease in distal colon and rectal cancer (distal colon: 1.65 in the first round to 0.17 in the sixth round; rectum, 0.82 in the first round to 0.17 in the sixth round). For advanced adenoma, similar trends were found. One hundred fifty cases of interval cancer were diagnosed. The proportional interval cancer rate was higher in the proximal colon than the distal colon or rectum (25.2 versus 6.0 or 9.9 percent, respectively).

"This FIT-based, multiple-round, long-term screening program had a negligible reduction in detection rates for neoplastic lesions in the proximal versus the distal colon after the first round," the authors write.

Several authors disclosed ties to the pharmaceutical and imaging industries.

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