


OMED COLORECTAL CANCER SCREENING COMMITTEE MEETING

Saturday, May 19, DDW Washington, 2007

Presenter: L Rabenek

Ontario's Colorectal Cancer Screening Program: A Model for Resourcing Colonoscopy

Linda Rabeneck, MD, MPH





Ontario's Health Care System

- Single payor, universal access, publicly funded
- Cancer Care Ontario (CCO) – agency of the Ministry of Health

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New Cases in Ontario: 2007

| | |
|-------------------|--------------|
| Lung | 7,900 |
| Breast | 8,500 |
| Prostate | 8,900 |
| Colorectal | 7,800 |

Canadian Cancer Statistics

Deaths in Ontario: 2007

| | |
|-------------------|--------------|
| Lung | 6,800 |
| Colorectal | 3,250 |
| Breast | 2,000 |
| Prostate | 1,650 |

Canadian Cancer Statistics



- **FOBT**
- **Flexible Sigmoidoscopy**

CMAJ 2001;165:206-8

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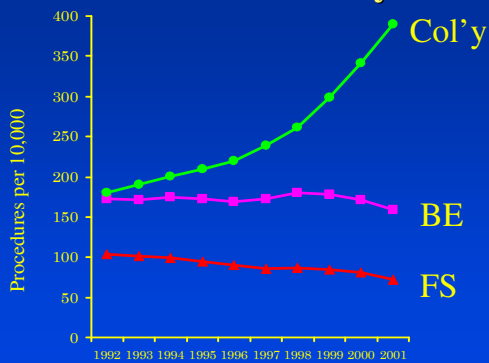
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How Many of Us Are Getting Screened?

Less than 20%

Rabeneck L et al. Am J Gastroenterol 2004;99:1141-44.

Procedures in Men 50-74 yrs



Increased Colonoscopy

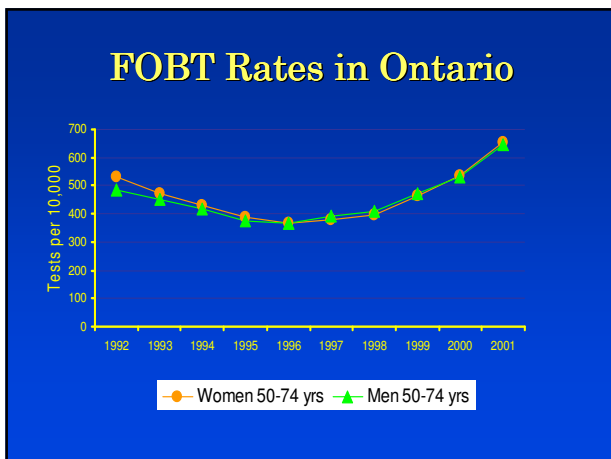
- Rural areas
- Higher income

Singh et al. CMAJ 2004;171:461-5

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Ontario Expert Panel

- Population-based FOBT screening, beginning at age 50 yr

1999

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CBC.CA News - Full Story

Ontario introduces \$193 M colon cancer screening program

Minister of Health,
George Smitherman

January 23, 2007



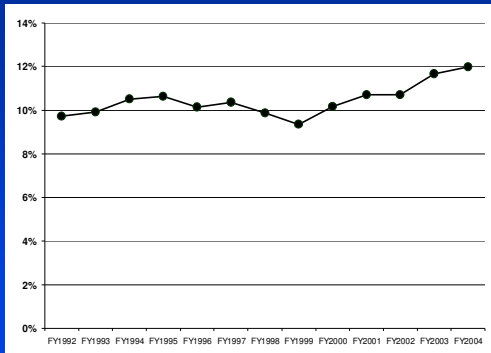
Province-wide CRC Screening Programs Announced

1. Ontario
2. Manitoba
3. Alberta

Our Challenge in Ontario

- 2.8 million 50-74 years
- <20% screened
- Colonoscopy access constrained
- Colonoscopy quality varies

Colonoscopies in Private Clinics



Ontario CRC Screening Program

- Invitations to screen
- Timely access
- Quality assurance
- Tracking of outcomes

Databases to Support Ontario CRC Screening Program

- Physician claims (OHIP)
- Hospitalizations (CIHI)
- Ontario Cancer Registry (OCR)

**Ontario CRC
Screening Program**

- FOBT for average risk (≥ 50 yr, no family history of CRC, no symptoms)
- Colonoscopy for increased risk (≥ 1 first degree relative with CRC)

**Ontario CRC
Screening Program**

- Year 1: Colonoscopy for increased risk (April 2007)
- Year 2: Roll-out “Branded FOBT Kits”

**Ontario CRC
Screening Program**

- Stakeholder engagement
- Colonoscopy standard
- Increase colonoscopy capacity
- Public media campaign
- Roll-out of Branded FOBT kits

CCO Colonoscopy Standard



Colonoscopy Standard

- Cancer Care Ontario Program in Evidence-Based Care
- Multidisciplinary
- Evaluate published literature
- Environmental scan (web)

Target Audience

- All physicians and institutions performing colonoscopy in support of Ontario CRC Screening Program

Evaluate the Evidence

- Physician endoscopist
- Institution
- Performance

Institution

- Infection control (CPSO)
- Monitoring during and after administration of conscious sedation (ASGE & CSGNA)
- Resuscitation capacity (CPSO)

Performance

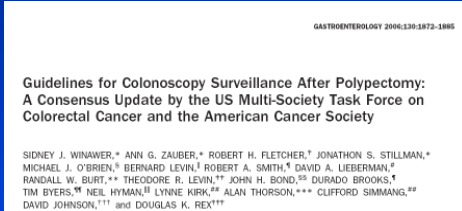
- Cecal intubation rate: 95%
- Perforation rate (US Multi-Society Task Force on CRC):
 - Screening: $\leq 1/2000$
 - All: $\leq 1/1000$

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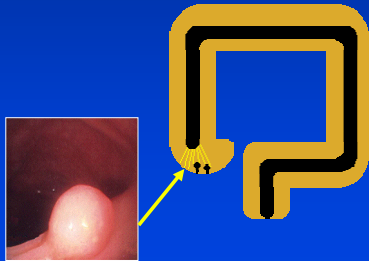
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Colonoscopy Surveillance



Gastroenterology 2006;130:1872-1885.

2007/08 Colonoscopy Allocation



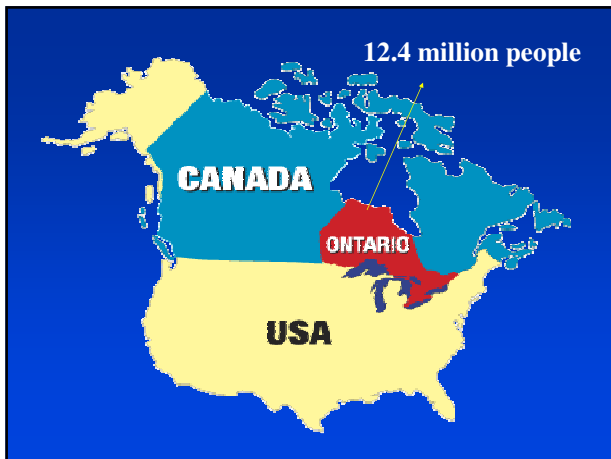
Principles

- Population-based
- Within each region (LHIN)
- Geographic distribution within LHIN

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Eligibility Criteria

- Hospital - Public Hospitals Act
- ≥ 500 colonoscopies (2005/06)
- $\geq 1\%$ of hospital-based colonoscopies
- Capacity for ≥ 500 more (2007/08)

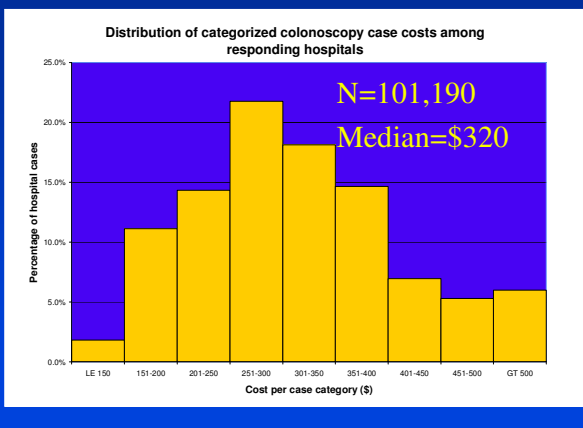
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Hospital Survey (Feb 07)

- 86 hospitals invited (97% of all hospital based colonoscopies)
- Survey indicated:
 - Willingness to increase volumes
 - Magnitude of increased volumes
 - Cost per case



Year 1 Budget

- \$11 M for colonoscopies
- \$11 M/\$320 = 34,375
- North Simcoe Muskoka (LHIN 12): 5% of persons age 50-74
- North Simcoe Muskoka: 1,718 colonoscopies in 2007/08

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**North Simcoe Muskoka
(2007/08)**

- 5% of colonoscopies to be allocated
- Collingwood General: 500
- Orillia Soldiers': 500
- Royal Victoria: 809

**Monthly Reporting:
All Colonoscopies**

- Wait times
- Volumes
- Indication for procedure
- Performance (cecal intubation; bowel prep; perforation)

Conclusions

- Ontario – 1st province to introduce a CRC screening program
- Based on FOBT/Colonoscopy
- Colonoscopy standard
- Colonoscopy allocation – population-based

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Conclusions

- Reporting requirements - for all colonoscopies
- Program infrastructure - will support change in screening technology in future
