Patients Skip Follow-Up Tests For Colon Cancer

By ACSH Staff — September 21, 2010

Patients are neglecting follow-up fecal blood tests [1] to screen for colon and rectal cancer within the recommended two years of their initial test, researchers of a new study published in the Annals of Family Medicine say. In fact, of the 11,110 recruited study subjects between the ages of 52 and 78 who underwent a fecal occult blood test, 46.8 percent failed to have either a repeat test or any other form of follow-up colorectal cancer screening.

As opposed to a colonoscopy, which requires anesthesia and sometimes a day off work, a fecal blood test requires patients to take a stool sample themselves and mail it in to a laboratory or doctor’s office. “Fecal blood tests have been shown to possess good predictability as well as low overhead costs to both the patient and the doctor,” explains ACSH’s Dr. Gilbert Ross. “They’re simple to administer and fairly reliable. It’s a good preliminary test, but it’s definitely not as sensitive or specific as a colonoscopy — which is still the gold standard for diagnosing cancerous and pre-cancerous colon polyps. Further, colonoscopy involves removing polyps as well, so treatment and diagnosis can occur simultaneously.”

But ACSH’s Dr. Elizabeth Whelan cautions the tests have their drawbacks. “I would never consider a fecal blood test over a colonoscopy,” she says. “It may be more expensive, but your first colonoscopy is the most important, and if you can get through that one and continue to get it regularly — which is about every five to 10 years — then your chances of getting colon cancer are very small.”

Lead study author Dr. Joshua J. Fenton, assistant professor of family and community medicine at the University of California, Davis, believes a fecal blood test is “a lot like a mammogram or a Pap smear — it’s a test that you need to do on a regular basis if you want it to give you the benefit you’re looking for, reducing your risk of dying of colon cancer.”

“Indeed, it is the lack of follow up after one negative test that becomes problematic. Patients are supposed to do this test every few years because one negative result doesn’t mean you can relax and forget about the problem — you have to keep doing it,” says Dr. Ross.

Drawing upon his previous experience as a practicing physician, Dr. Ross believes physicians should be more vigilant about following up with their patients. “Doctors should have a system for making sure patients’ samples make it back to their office for testing. You have to make sure patients don’t fall through the cracks, and since fecal blood tests are part of a routine physical exam, that shouldn’t be a problem — but as this study shows, it too often is.”

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