

Affordable and Effective Colorectal Cancer Screening at Home

A recent study offers good news about non-invasive stool-based colorectal cancer screening tools.

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Fecal Immunochemical Tests Affordable and Effective for Colorectal Cancer Screening

As we emerge from the initial waves of COVID-19, patients may have been reluctant to take more time out of their life for a colonoscopy prep, procedure and recovery. Fortunately, non-invasive stool-based screening tools, such as fecal immunochemical tests (FIT) and multi-target stool DNA (mt-sDNA or Cologuard), are practical options that allow patients to provide a sample in the comfort of their home and could address access and care gap issues as they are less expensive.

According to a [new study](#) presented during the Scientific Forum at the American College of Surgeons Clinical Congress 2022, these non-invasive stool-based screening methods are equally effective for screening for early-stage colorectal cancer (CRC). Pavan K. Rao, MD, a general surgery resident at Allegheny Health Network in Pittsburgh, Pennsylvania, presented study results that evaluated 117,519 enrollees within the Highmark claims database who underwent CRC screening in 2019. The researchers found:

- About 60% of patients taking either the fecal immunochemical test or the DNA test at home instead of having a routine colonoscopy had early-stage cancer, but a FIT detected it at one-fifth the cost.
- The total annual costs for the tests were \$6.47 million—\$1.1 million for a FIT (about \$24 per test) and \$5.6 million for mt-sDNA (about \$121 per test). Costs were calculated using Medicare reimbursement rates.
- Transitioning all non-invasive CRC screening to FIT would result in \$3.9 million in savings annually in the study population.

Similarly, these results support previous studies out of [Japan](#) and the [Netherlands](#) that found FIT was more cost-effective than other types of non-invasive CRC screening tests. This provides our healthcare system with an efficient alternative at a reduced cost that maintains patient outcomes without compromising the quality of care.

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