Status of colorectal cancer screening program in the Canton of Vaud, Switzerland

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WEO Colorectal Cancer Screening Committee
Vienna 2018
Swiss Context

- Healthcare primarily organized by canton
- Universal coverage with compulsory, private, basic insurance (LAMal), annual deductibles of 300 to 2500 CHF
- CRC screening historically not reimbursed by basic insurance
- Federal law in 2013:
  1. CRC screening tests reimbursed by base insurance for those age 50 to 69 years: Colonoscopy and FIT
  2. Deductible covered by insurance in the context of organized screening programs
- Most recent national data (2012) shows CRC screening rates are approximately 22%\(^1\), majority by colonoscopy

Vaud program history

- Canton of Vaud: first breast cancer screening program in Switzerland in 1999
- The foundation for breast cancer screening expanded to manage CRC screening
- Multi-disciplinary steering committee created in 2012 – partnership of gastroenterologists, general practitioners and pharmacists
- No pilot program – FOPH wanted coverage of the entire canton
- First patients included in October 2015
- First mailed invitations in October 2016
Vaud program summary

• Target population of ~180,000 average risk adults 50-69 years
• Invitations by mail with information brochure
• Inclusion via general practitioner, either after invitation or spontaneously
• Tests offered:
  – OC Sensor FIT every 2 years, threshold 15 μg/g, picked up at pharmacy and returned by mail to central laboratory
  – Colonoscopy every 10 years, referral by GP to gastroenterologist of choice
• High risk and surveillance patients not included in program
• Software across sites: MC-SIS (Multi-Cancer Screening Information System)
Services reimbursed without deductible

- Consultation with general practitioner for information, choice of FIT and colonoscopy
- Complete FIT kit and analysis
- Screening colonoscopy
- Colonoscopy following a positive FIT
- Histopathology after colonoscopy

Not included:
- 10% charge to patient for all services
- Colonoscopy prep
- GP consultations after a positive FIT

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Distinctive aspect of program

Emphasis on shared decision making

- Aim: every citizen given choice of participating
- Mailed brochure designed as decision aid
- Entry via GP visit, with specific reimbursement, meant to encourage discussion
- Challenges: GP visit can be a barrier, complexity of invitation info, risk of mixed messages
Distinctive aspect of program

Equal offering of colonoscopy and FIT
- Stakeholders felt colonoscopy should be offered
- Gastroenterology resources sufficient in models:
  - Staggered invitations over 5 to 9 years
  - 35% participation with FIT
  - 15% with colonoscopy
  - 25 gastroenterologists in the canton performing 270–300 colos/year
- GP training program emphasized importance of offering both tests

1. Aimed to reduce variation in practice

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Situation elsewhere in Switzerland

Tests offered:

FIT + Colo:
GE, VD, TI, UR

FIT: JU, NE

To be determined:
VS, FR, BL, BS, SO
Involvement of General Practitioners

- GPs must elect to participate in the program and obtain access to the online software
- Initial participation slow
- By the end of 2017, nearly 500 of ~600 GPs were participating
- Survey of GPs participating in Vaud:
  - 2/3 report discussing CRC screening with 75+% of their patients
  - 2/3 report offering both screening modalities. Among those proposing 1 test, colonoscopy still predominates
Research on patient choice

- Using national Sentinel surveillance system to:
  - Understand current practices
  - Test an intervention for equal offer of FIT and colonoscopy
- Baseline results: higher uptake among GPs offering both FIT and colonoscopy
- Pragmatic RCT underway of a mailed training package to encourage GPs to offer choice

Braun et al, SMDM 2018, Montreal
Thank you!

Questions?

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Extra slides
Estimation durée du déploiement des invitations : 5 à 9 ans

<table>
<thead>
<tr>
<th>Variables prises en compte</th>
<th>valeur moy.</th>
<th>étendue testée</th>
<th>Estimation activité endoscopique par GE #colos/gastro/an (5 ans)</th>
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<td>Participation FIT (1e tour)</td>
<td>35%</td>
<td>20-50%</td>
<td>271-300</td>
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<td>Participants tour précédent</td>
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