

# COLORECTAL SCREENING | Which option is best?

*Just to be clear...doing ANY option is better than doing NO option!*



	Cologuard™	PillCam (Capsule Endoscopy)	guiac FOBT (fFOBT)	FIT (Fecal Immunochemical Test)	Colonoscopy
% of Cancers Detected	92%	Rule-Out Tool	25-79%	74%	95%
% of Large Pre-Cancer Polyps Detected	42%	89%	20-24%	20-24%	95%
Fall Positive Rate for Cancer or Polyps	13% (^ with age)	33%	10-15%	10-15%	0%
Care Setting	In-Home	In-Home	In-Home	In-Home	Surgical Center
How It Works	<ul style="list-style-type: none"> <li>• Stool Sample/Mailed</li> <li>• Results Sent to Provider</li> </ul>	<ul style="list-style-type: none"> <li>• Adjusted Diet</li> <li>• Swallow Pill Camera (Expels in 6-8 hrs)</li> <li>• Provider reads results remotely</li> </ul>	<ul style="list-style-type: none"> <li>• Stool Sample/Mailed</li> <li>• Results Sent to Provider</li> </ul>	<ul style="list-style-type: none"> <li>• Stool Sample/Mailed</li> <li>• Results Sent to Provider</li> </ul>	<ul style="list-style-type: none"> <li>• Prep Prior</li> <li>• Light Sedation</li> <li>• Outpatient Procedure</li> </ul>
Requires Script or Referral	Yes	Yes	Yes	Yes	Yes
Advantages	<ul style="list-style-type: none"> <li>• Convenience/Comfort</li> </ul>	<ul style="list-style-type: none"> <li>• Convenience/Comfort</li> <li>• Detection of bleeding location</li> </ul>	<ul style="list-style-type: none"> <li>• Convenience/Comfort</li> </ul>	<ul style="list-style-type: none"> <li>• Convenience/Comfort</li> </ul>	<ul style="list-style-type: none"> <li>• Gold Standard for cancer AND pre-cancer detection removal</li> <li>• Precise and specific</li> <li>• Allows for marking/baseline measurements</li> </ul>
Disadvantages/Risks	<ul style="list-style-type: none"> <li>• High false-positive rate</li> <li>• Doesn't detect cancer precursors</li> <li>• Requires follow-up colonoscopy if positive</li> </ul>	<ul style="list-style-type: none"> <li>• Risk for obstruction</li> <li>• 19% miss rate for small bowel tumors</li> <li>• 11% miss rate for small bowel lesions</li> <li>• Doesn't identify location of lesions, etc.</li> <li>• Limited visibility due to prep cleanse</li> </ul>	<ul style="list-style-type: none"> <li>• Blood detection—stomach to rectum?</li> <li>• Less sensitive than FIT</li> <li>• More costly than FIT</li> <li>• No NSAIDS, vitamin C or citrus 7-days prior</li> <li>• No red meat 3-days prior to test</li> </ul>	<ul style="list-style-type: none"> <li>• Blood detection—stomach to rectum?</li> <li>• Potential miss of non-bleeding tumors</li> <li>• Inaccurate if not refrigerated or delayed</li> <li>• CRC ruled out only 79% of the time</li> </ul>	<ul style="list-style-type: none"> <li>• Abdominal discomfort during prep process</li> <li>• Visibility based on thorough prep cleanse</li> <li>• Potential for perforation</li> <li>• Risks related to complications related to anesthesia, including death</li> </ul>
Ideal Candidate	High risk patients who can't tolerate procedure	High risk patients who can't tolerate procedure	High risk patients who can't tolerate procedure	High risk patients who can't tolerate procedure	Patients w/o risk factors like age or sensitivities to anesthesia
Who Should Not Do This Test	History of polyps, family history of colon cancer, positive result from previous screening, IBD or hereditary syndromes	History of polyps, family history of colon cancer, positive result from previous screening, IBD or hereditary syndromes	History of polyps, family history of colon cancer, positive result from previous screening, IBD or hereditary syndromes	History of polyps, family history of colon cancer, positive result from previous screening, IBD or hereditary syndromes	High level of acuity Anesthesia sensitivities
How Often Should This Test Be Done	every 1-3 years	every 1-3 years	annual	annual	based on findings
Costs	\$500-\$650 private pay Coverage based on plan	\$1,020-\$2,556 private pay Coverage based on plan	\$48-\$149 after Medicare Coverage based on plan	\$24-\$121 after Medicare Coverage based on plan	Screening not subject to co-pay Procedure for polyp removal subject to insurance plan
Next Steps	Colonoscopy	Colonoscopy	Colonoscopy	Colonoscopy	Begin Treatment Plan

SOURCES: nih.org, health.harvard.edu, cancer.org, gastro.org, colorguard.org, gminsights.com, webmd.com, gi.md, cancertodaymag.com