

SCENARI PER L'AGGIORNAMENTO DEL PROTOCOLLO DI SCREENING DEI TUMORI COLORETTALI

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PREVENZIONE SERENA

COSTO-EFFICACIA

Cost-effectiveness of colorectal cancer screening programmes using sigmoidoscopy and immunochemical faecal occult blood test

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Table 4. Cost, effect and net benefit for all the included strategies for a cohort of 100,000 subjects invited for screening.

	No screening	FS	FIT	FS + FIT
CRC cases, <i>n</i>	1517	1372	1312	1264
CRC deaths, <i>n</i>	528	460	442	414
CRC prevented (%)	–	10%	14%	17%
CRC deaths prevented (%)	–	13%	16%	22%
Life-years lost, <i>n</i>	19,431	18,025	17,700	17,119
Life-years saved, <i>n</i> ^a	–	1406	1731	2312
Life-years saved discounted, <i>n</i>	–	1207	1460	1959
Sigmoidoscopy, <i>n</i>	–	28,799	–	28,799
FIT, <i>n</i>	–	–	293,333	159,514
Colonoscopy, <i>n</i>	–	2592	12,115	9180
Cost CRC care (€) ^a	44,294,628	37,097,188	38,503,258	34,781,125
Cost screening (€) ^a	–	4,607,776	6,146,373	7,893,681
Total cost (€) ^a	44,294,628	41,704,964	44,649,631	42,674,806
Total cost discounted (€)	37,884,430	36,336,360	38,400,217	37,251,655
ICER vs. no screening, € per life-year saved	–	€ 15 saving per person	353	€ 6 saving per person
MNB ^b (€)	–	23,990,785	34,599,573	60,687,482

Risparmio netto di 6 euro per persona invitata con la strategia sequenziale attualmente in uso

CRC: colorectal cancer; FS: flexible sigmoidoscopy; FIT: faecal immunochemical test; MNB: mean net benefit; ICER: incremental cost-effectiveness ratio.

^aNot discounted.

^bMean net benefit was calculated by multiplying effect by willingness to pay and subtracting cost. Willingness to pay was assumed to be €50,000 per life-year saved.

PREVENZIONE SERENA



PREVENZIONE SERENA

**INVITO A FIT BIENNALE
A UOMINI E DONNE DI 50 – 54 ANNI DI ETÀ**

Invito a FS a 55 anni

ADERENTE

NON ADERENTE

Esegue una FS

**Continua con
programma FIT**

**FS positiva
Colonscopia**

**FS negativa
STOP screening
Protezione per 18-20 anni**

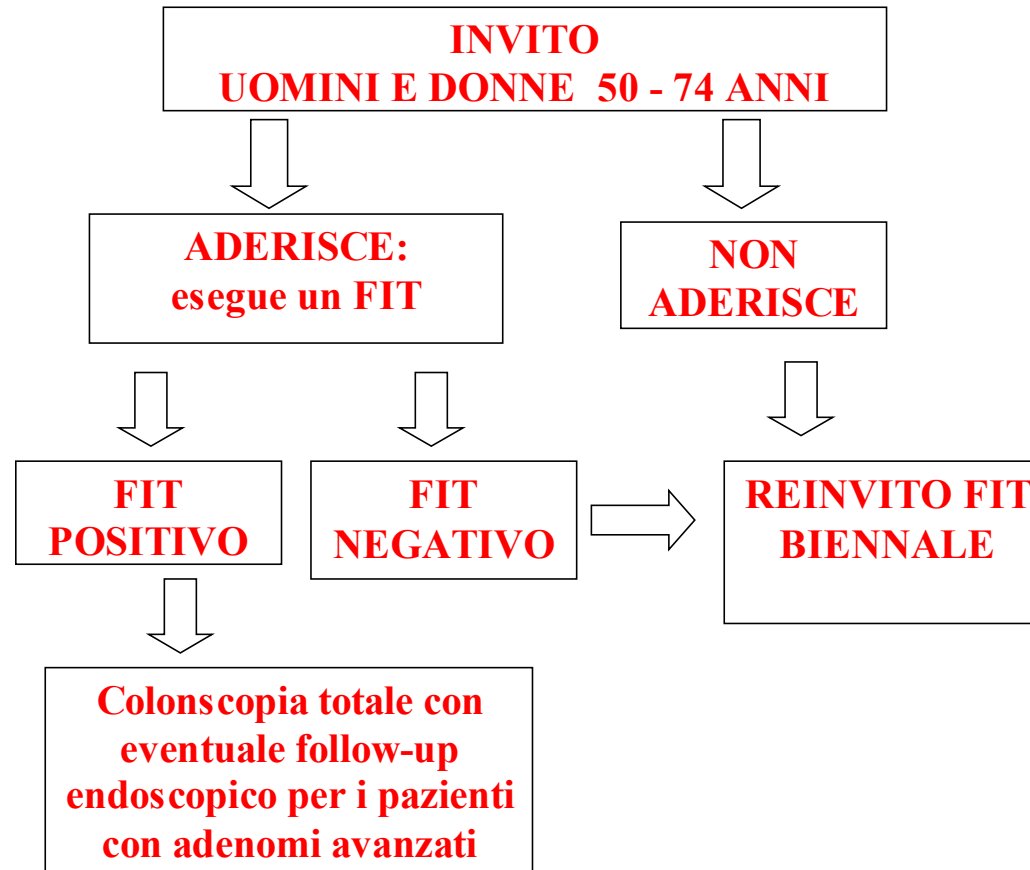
**Ipotesi di programma
Combinato : 1**

Scenario 2



**Ipotesi di programma
che prevede solo FIT
biennale
Scenario 1**

PREVENZIONE SERENA



SCENARI FUTURI: RISORSE A CONFRONTO

Scenario 1 - FIT biennale 50-74

Adesione	40%	50%
Test FIT	306.700	384.200
Colonscopie FIT +	20.625	25.830
Invii sorveglianza	5.155	6.460

Assunzioni:

- Livelli positività registrati nel programma:
6.8% media in fascia 50-74
- Quota colonscopie indotte da FS=10% (media regionale)

Scenario 2 - FIT biennale 50-74 con offerta FS a 55 anni* (chi aderisce a FS esce dal programma se esame negativo)

1 Colonscopia = 3 FS

Adesione	40%	50%
Test FIT	159.600	236.560
Colonscopie equivalenti	17.800	22.840
Invii sorveglianza	3.430	4.690

PREVENZIONE SERENA

SCENARI FUTURI: RISORSE A CONFRONTO

Risorse risparmiate con lo scenario di FIT+FS

Adesione		40%	50%
Test FIT	Numero test evitati	147.100	147.640
	Risparmio annuale	2.316.825 €	2.325.330 €
Colonscopie equivalenti		2.825	2.990
Invii sorveglianza		1.725	1.770



PREVENZIONE SERENA

**INVITO A FIT BIENNALE
A UOMINI E DONNE DI 50 – 54 ANNI DI ETÀ**

Assistiti 55-56 anni non aderenti FIT

Aderenti FIT

Invito a FS

Esegue una FS

Non aderente

**FS positiva
Colonscopia**

**FS negativa
STOP screening
Protezione per 18-20 anni**

**Continua con
programma FIT**

**Ipotesi di programma
Combinato : 2**

**FS offerta a non aderenti a
FIT a 55 anni**

COSA SUCCEDDE NEL RESTO DEL MONDO?



Brussels, 20.9.2022
COM(2022) 474 final

ANNEX

ANNEX

to the

Proposal for a Council Recommendation

on strengthening prevention through early detection: A new EU approach on cancer
screening
replacing Council Recommendation 2003/878/EC

Colorectal cancer:

Faecal immunochemical testing (FIT), quantitative with thresholds defined per sex and age and earlier test result is considered the preferred screening test for referring individuals to follow-up colonoscopy between 50 and 74 years old. Endoscopy may be adopted as a primary tool to implement combined strategies.