Lower GI Suspected Cancer – Recognition & Referral

- Any age Anal/rectal/abdo mass
- Anal/rectal/abdo mass ≥ 40
  - Abdo pain AND wt loss
- Abdo pain OR wt loss ≤ 60
  - CBH* OR Fe def anaemia
- ≥ 50 Abdo pain OR wt loss
- ≤ 50 CBH* OR Fe def anaemia
- ≥ 50
  - Abdominal pain
  - Rectal bleeding

FIT testing has a very high negative predictive value for colorectal cancer

Consider GI referral or advise & guidance if concerns/persistent symptoms
Consider repeat FIT in 3m & if remains <10 bowel ca can be excluded

FIT

Triage with FIT – Timing
>100ug/gm – 2WW investigation
>10 <100ug/gm – Urgent investigation
< 10ug/gm – Safety netted W/L

≥ 60
- Abdo pain AND wt loss
- ≥ 60 non Fe def anaemia
- ≥ 50 Rectal bleeding
- ≥ 60
- CBH*
- Fe def anaemia

≥ 50 Rectal bleeding AND 1 or more
- Wt loss
- CBH*
- Abdo pain

≥ 50 Abdo pain

< 10

≥ 10

≥ 40
- Abdo pain
- Rectal bleeding
- ≥ 40

CBH – Change in bowel habit – please specify how bowels have changed.
To constipation – Ix by CTVC/CT abdo
To diarrhoea – Ix by colonoscopy

Based on NICE NG12. Section 1.3 Lower GI tract cancer