



STATE OF ALABAMA DEPARTMENT OF
PUBLIC HEALTH

Donald E. Williamson, MD
State Health Officer

June 25, 2012

Dear Colleagues:

Physicians can save lives in Alabama by screening all of their patients aged 50 and older for colorectal cancer (CRC). In 2009, 2,650 cases were diagnosed and 913 people died of CRC, making CRC the second leading cause of cancer deaths in Alabama. In addition, more than 40 percent of CRC cases are diagnosed at stage 3 or 4 in our state. The Alabama Department of Public Health is in the middle of a 5-year grant from the Centers for Disease Control and Prevention (CDC) to change these statistics. This CDC grant funds the FITWAY Colorectal Cancer Prevention Program, with a goal that 80 percent of Alabamians aged 50 and older will be screened by 2014.

Colonoscopy is considered by many to be the gold standard for CRC screening. However, many patients have inadequate insurance to cover colonoscopy, lack time to complete the test, or simply lack willingness to undergo the procedure. To screen every eligible Alabamian, physicians must offer screening tests beyond colonoscopy. According to a recent study in the *Archives of Internal Medicine*, nearly double the number of people complete CRC screening when offered a choice between a stool test and a colonoscopy (69 percent) compared to a group of people offered colonoscopy alone (38 percent).*

Please consider offering a fecal immunochemical test (FIT) to patients who experience barriers to colonoscopy. FITs are a new type of take-home stool test that is more sensitive and easier for patients to complete than older types of guaiac fecal occult blood tests. The FIT is recommended as an acceptable screening modality for CRC by the United States Preventative Services Task Force and should be completed annually. FITs come in a variety of styles to suit different patient and physician preferences.

If you are interested in incorporating the FIT in your CRC screening practices, please review the most recent guidelines and carefully read the enclosed informational sheet: *The Clinicians Reference: Fecal Occult Blood Testing (FOBT) for Colorectal Cancer Screening*. This resource, created by the American Cancer Society and National Colorectal Cancer Roundtable, lays out the best practices for using stool tests and details differences between test types. Notably, older

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guaiac tests, like the Hemoccult II, are no longer recommended for colorectal cancer screening. A flyer describing different types of the new FITs is also enclosed.

Please help us reach our goal of screening 80 percent of Alabamians 50 and older by screening your patients for CRC with the recommended test of their choice. For more information, visit ADPH.org/fitway.

Sincerely,



Donald E. Williamson, M.D.

State Health Officer

EA/TLP

Attachments

Reference:

*John M. Inadomi, MD; Sandeep Vijan, MD, MS; Nancy K. Janz, PhD; Angela Fagerlin, PhD; Jennifer P. Thomas, BS; Yunghui V. Lin, RN, MA; Roxana Muñoz; Chim Lau, BA; Ma Somsouk, MD, MAS; Najwa El-Nachef, MD; Rodney A. Hayward, MD. Adherence to Colorectal Cancer Screening A Randomized Clinical Trial of Competing Strategies. *Arch Intern Med.* 2012;172(7):575-582. doi:10.1001/archinternmed.2012.332