

HOW HAS THE PARTICIPATION RATE INCREASED BY ROUND IN THE BASQUE COUNTRY COLORECTAL CANCER SCREENING (SPAIN)?

Portillo I, Idigoras I, Bilbao I, Arana-Arri E, Hurtado JL, Unanue S, Mendizabal N

Background

The colorectal cancer (CRC) screening started in 2009 as a population-based programme, after Regional Parliament Agreement in 2008. Screening test and diagnosis: biennial faecal quantitative immunochemical test (FIT) and colonoscopy under sedation for positive cases. Population target: 50-69 years of age (approximately 586,700 inhabitants). Coverage: around 100% in first, 85% in second, 56% in third invitation and 3% in fourth invitation at the end of 2015.

Aim: To analyze participation rates by round and type of participation by sex and age in the period 2009-2015.

Methods:

Main strategies carry out to increase participation rate: 1) screening free of charge; 2) Coordinating Office to plan, organize and evaluate the screening; 3) a free phone line; 3) Involving Primary Care; 4) Software linked with clinical data bases; 5) sending invitation and kit to individual address; 6) Facilities to drop the kit in Health Centers; 7) reminder letters. Participant: people with valid test (positive/negative)/people invited. First invitation, Initial participant (second, third or fourth invitation), regular and irregular participants were analyzed by sex and age. SPSS v23.0 was used.

Results:

1,193,604 invitations were processed. 66.5% participate in first invitation, 31.6% were initial and 91.8% regular participants in second round. In these 2 rounds significant differences ($p < 0.001$) were found by sex and age (higher in women and > 60 years). In third round 23.3% were initial, 95.8% regular and 76.2% irregular participants without differences. 15.0% were initial, 96.8% regular and 74.8% irregular in fourth round. Trends increased in regular participants and decreased in initial participants ($p < 0.001$).

Conclusions:

First participation is a key for increasing successive participation. Initial and irregular participants become regular participants in successive rounds. Strategies to incorporate non participants in previous rounds must be taken into account, in order to assure a high protection and public health impact.