The benefits of an organised screening approach in reaching the target population through population-based invitations, reminders and follow-up strategies

Lawrence von Karsa
Quality Assurance Group
Section of Early Detection and Prevention

International Agency for Research on Cancer
Lyon, France
Cancer Screening in the European Union

Report on the implementation of the Council Recommendation on cancer screening

First Report

L v Karsa, A Anttila, G Ronco, A Ponti, N Malila, M Arbyn, N Segnan, M Castillo-Beltran, M Boniol, J Ferlay, C Hery, C Sauvaget, L Voti, P Autier

International Agency for Research on Cancer

Lyon, France

Financial support of EU Health Programme (ECN/EUNICE/ECCG)
EU Guidelines for Quality Assurance in Breast, Cervical and Colorectal Cancer Screening


2nd Edition 2008

1st Edition 2010

Financial support through:

a) EU Health Programme,

b) UEGF, ACS, CDC

International Agency for Research on Cancer

Lyon, France
Programme screening requires: **public responsibility, coordination, supervision**.

The screening policy should at least:

- Be defined by law or **official** regulation, decision, directive or recommendation
- Specify **screening test**, examination interval, eligible group of persons
- Provide for **public financing** of participation in screening (apart from own contribution)
Organised screening programmes

- **Responsible** national or regional **team** for implementation (coordinating service delivery, quality assurance, and reporting of performance and results)

- **Comprehensive** guidelines, **rules** and standard operating procedures

- **Quality assurance structure** with supervision and monitoring of the screening process

- **Ascertainment** of the population disease burden
Population-based screening requires a high degree of organisation in order to

- identify and invite each eligible person in the target population (promotes equity in access to health care)

- assure that the invitational activities are performed reliably and effectively and are adequately coordinated with the subsequent steps in the screening process

Source: von Karsa et al. 2008
Opportunistic vs population-based invitation

➢ Opportunistic screening *

• Attendance depends on the initiative of the individual or a health care professional

• Services tend to be less efficient and effective
  - Lower proportion of target population attends
  - Less success in reaching disadvantaged groups

For references: von Karsa et al. 2008, Segnan et al. 2010
Opportunistic vs population-based invitation

Population-based screening

- Tools for increasing compliance with screening protocol (invitations & reminders)
- Tools for monitoring and analyzing performance quality (testing, follow-up, clinical management) (linkage studies, performance audit)
- Tools for piloting and evaluating improvements in the screening process (randomized public health policy)
Opportunistic vs population-based invitation

- Population-based screening *
  - Tools for increasing compliance with screening protocol (invitations & reminders)
  - Tools for monitoring and analyzing performance quality (testing, follow-up, clinical management) (linkage studies, performance audit)
  - Tools for piloting and evaluating improvements in the screening process (randomized public health policy)
Conclusions

- A population-based to invitation of the target population to cancer screening programmes provides an infrastructure that can be used to improve compliance and performance.
- However the approach itself does not guarantee success. Otherwise guidelines would not be needed for population-based programmes.
Thank you for your attention