

Symposium on **Cancer Control** in the **Western Pacific** *cum*
Launching of **The Cancer Atlas 2nd Edition** (Chinese Version)

Session I: Cancer Control in the Western Pacific

SPEAKER



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Dr Bernie Towler is the Principal Medical Adviser in the Population Health & Sport Division in the Commonwealth Department of Health, Canberra. She is a Public Health Physician with 20 years' experience in diverse areas ranging from emergency response, communicable diseases surveillance and control and pandemic influenza to clinical epidemiology, chronic disease prevention and management, palliative and end of life care and systematic review of health literature. She continues weekly clinical practice in the Emergency Department of The Canberra Hospital.

Dr Towler's primary role in the Department currently is to provide clinical and public health expertise and policy advice in relation to preventive health programs to reduce preventable morbidity and mortality caused by cancer, chronic disease and substance misuse. Dr Towler is the Departmental representative on a wide range of external committees and public health forums and chairs stakeholder forums for the implementation of biennial bowel cancer screening.

Abstract:

Sharing experiences in the Australian Colorectal Cancer Screening Program

Background

The Australian National Bowel Cancer Screening Program (NBCSP) commenced in 2006 with two age cohorts (55 and 65 year olds) invited to undertake screening using a centralised mailed invitation and immunochemical faecal occult blood test (iFOBT). Further age cohorts were added over time and in 2014, the Australian government committed to funding full biennial screening for all Australians aged 50-74 years by 2020. The program currently invites 50, 55, 60, 65, 70 and 74 year olds, with remaining biennial cohorts being added progressively.

Aim

- To share our experiences, to date, of the program, including:
- the challenges of a staged introduction of age cohorts to achieve biennial screening by 2020;
- engaging the community and professional groups to improve program participation;
- program communications;
- evidence on program impact and outcomes in cancer down staging and mortality; and
- tackling the needs of underscreened groups

Results

The NBCSP has screened over 2.5 million Australians since its inception in 2006 and detected approximately 4 000 suspected or confirmed cancers and over 12 000 advanced adenomas. Recent data matching analysis has shown that the program has resulted in a 15% (corrected for lead time bias) reduction in bowel cancer mortality for those invited to screening in comparison with non-invitees; and the program iFOBT has high accuracy.

Discussion

The NBCSP is the only Australian national screening program that is centrally directed and administered by the Australian Government in partnership with Australian State and Territory governments who also provide colonoscopy and treatment services. Program challenges include suboptimal participation of the target population and, in particular, low participation in some hard-to-reach groups. We are working with professional groups, undertaking a communications campaign and preparing to develop and implement an enhanced national cancer screening register which will improve the program to further reduce bowel cancer deaths in Australia.