UK National Screening Committee

NHS

Screening Programmes

NICE

December 2011

UK NSC and case finding vs screening

NSC

UK National Screening Committee

The UK NSC advises Ministers and the NHS in all four UK countries

UK National Screening Committe (UK NSC)
Dr Anne Mackie, Director of Programmes

Funding and reporting

Department of Health (England)

Welsh Assembly Government Department for Health & Social Services

Scottish Government Health department

Northern Ireland Government Department of Health, Social Services & Public Safety

English Screening Programmes

Antenatal and Newborn

NHS Infectious Diseases in Pregnancy Screening Programme *(HIV, Hep B, Syphilis, Rubella susceptibility)*

NHS linked antenatal and newborn screening programme for Sickle Cell and Thalassaemia

NHS Fetal Anomaly Screening Programme *(Down's Syndrome, 18^{+0}-20^{+6} weeks ultrasound)*

NHS Newborn Blood Spot Screening Programme *(Cystic Fibrosis, MCADD, PKU, Congenital Hypothyroidism, sickle cell disorders)*

NHS Newborn Hearing Screening Programme

NHS Newborn and Infant Physical Examination Screening Programme *(Eyes, heart, hips and testes in boys)*

Young person and adult

NHS Abdominal Aortic Aneurysm Screening Programme

English National Screening Programme for Diabetic Retinopathy

These programmes are managed by the UK NSC

Cancer screening programmes

(managed by Prof Julietta Patnick, Director, reporting to Prof Mike Richards, National Clinical Director for Cancer, Department of Health)

NHS Breast Screening Programme
NHS Cervical Screening Programme
NHS Bowel Cancer Screening Programme

Welsh Screening Programmes

Antenatal and Newborn

Fetal Anomaly

Infectious diseases in pregnancy

Sickle cell & thalassaemia

Newborn Hearing Screening Wales

Newborn Bloodspot Screening Wales

Newborn & Infant Physical Examination

Adult

Breast Test Wales

Bowel Screening Wales

Cervical Screening Wale

Diabetic Retinopathy

Scottish Screening Programmes

Antenatal and Newborn

Infectious Diseases in Pregnancy

Fetal Anomaly Screening

Sickle Cell & Thalassaemia Screening

Newborn Hearing Screening

Newborn Blood Spot Screen-ing

Adult

Diabetic Retinopathy

Scottish Bowel

Screening Programme

Scottish Cervical Screening Programme

Scottish Breast Screening Programme

Northern Irish Screening Programmes

Antenatal and Newborn

Infectious Diseases in Pregnancy

Newborn & Infant Physical Examination

Newborn Blood Spot

Newborn Hearing Screening

Adult

Breast Screening

Cervical Screening

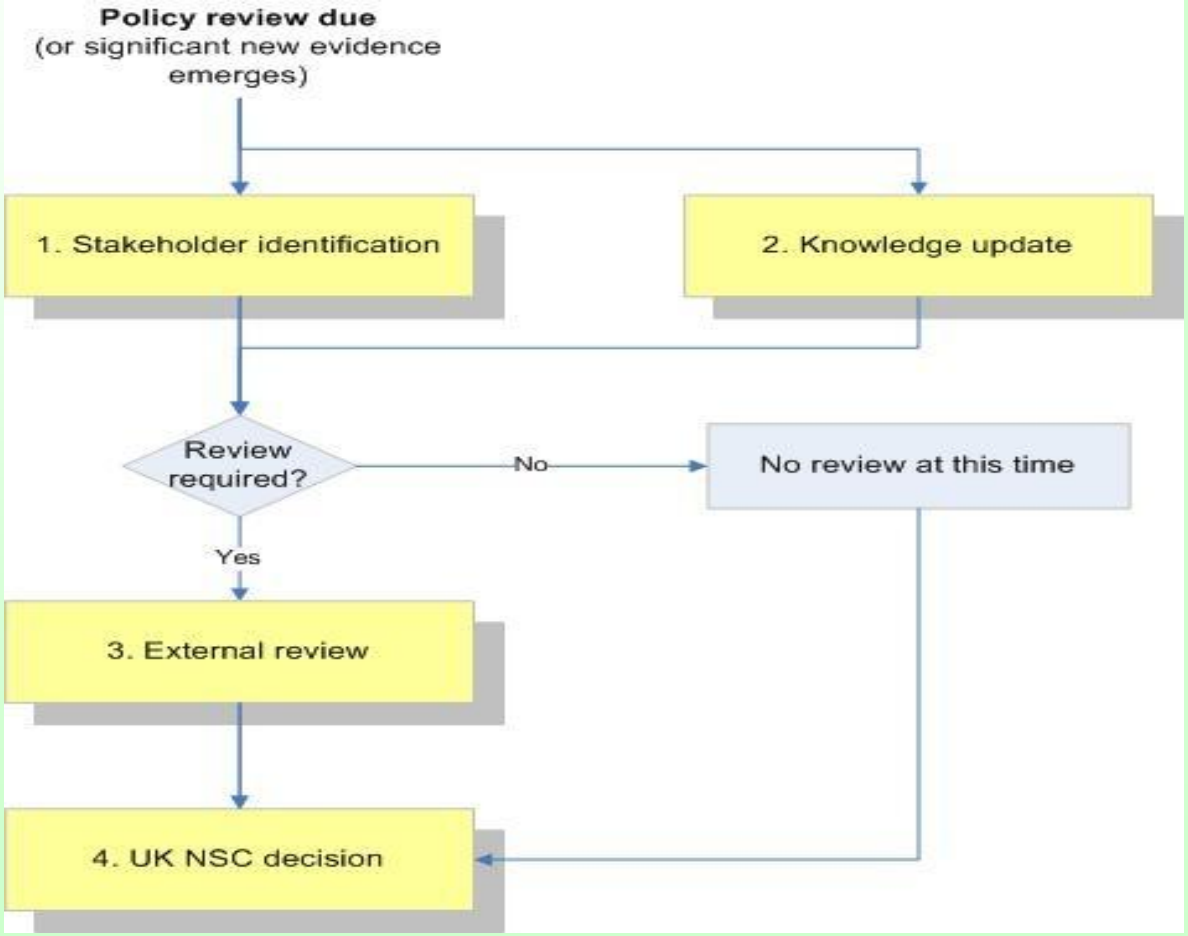
Diabetic Retinopathy

Screening Programme

WHO criteria for screening

- **The condition sought should be an important health problem**
- **There should be an accepted treatment for patients with recognised disease**
- **Facilities for diagnosis and treatment should be available**
- **There should be a suitable test**
- **The test should be acceptable**
- **The natural history of the disease should be understood**
- **There should be agreement on who to treat**
- **The cost of case finding should be balanced in relation to possible expenditure on medical care as a whole**
- **Case finding should be a continuous process**

Policy review process



Hepatitis B (policy currently under review)

The UK NSC policy on Hepatitis B screening in pregnancy

More Information

Hepatitis B and C are serious viral diseases which affect the liver and are blood borne. Both viruses may cause acute illness. However, in the majority of children these viruses become chronic with liver damage only becoming apparent in adulthood. The common way of spreading or acquiring the infection are babies born to hepatitis B or C positive mothers, sharing of toothbrushes or razors amongst family members, or intravenous drug abuse.

Mothers can pass on their infection to their baby. An infected baby may develop liver problems later in life. This can be prevented by immunisation of the newborn baby.

» Read more about Hepatitis B on the Contact a Family website

Policy Position

Screening should be offered to all pregnant women.

This policy is currently being reviewed as part of the UK NSC's regular review cycle of all policies.

The review process began in Apr 2011 and is estimated to be completed by Mar 2012.

Evidence Supporting the Policy

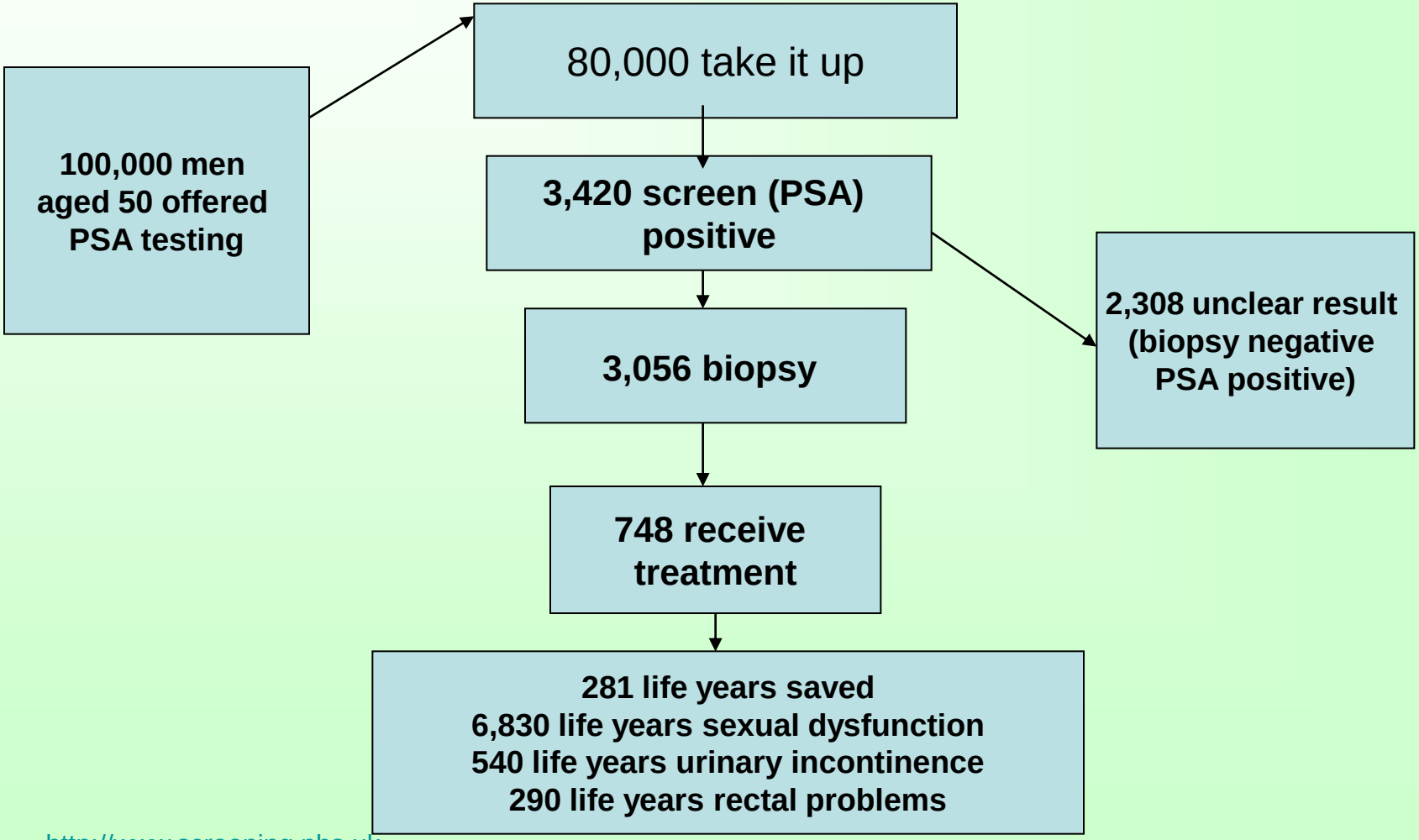
In August 2003, a publication Screening for infectious diseases in pregnancy was published by the Department of Health - for standards on hepatitis B testing see Section 5: Hepatitis B (p10-11).

Stakeholders

British Society for Immunology
Health Protection Agency
Royal College of Obstetricians and Gynaecologists

The stakeholder groups will be involved when the policy is next reviewed. If you think your organisation should be added, please contact us.

A flow chart for P Ca



Case finding vs. screening

Identify	High risk population	Whole demographically defined population
Numbers	Few people	Lots of people
Epidemiology	High prevalence	Low prevalence
Test characteristics	Diagnostic	Less sens and specific
Testing schedule	As required	Periodicity important
Cost effectiveness	High (you hope!)	Low

Case finding vs. screening cont.

Characteristics of clients	Patients ("sick" or seeking medical advice	well people
Inform	No formal information offered	Formal information on benefits / disbenefits
Invite	None	Formal process
Recall	None	Formal process
QA	Very unusual	Comes with deal. Formal
Failsafe	None (or clinical follow up)	Formal systems
Likelihood of benefit for individual	High	Low
Data	non-systematic data capture	systematic