

Virtual chromoendoscopy for the real-time assessment of colorectal polyps in vivo: a systematic review and economic evaluation

**Addendum to the Technology Assessment Report commissioned by the
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At the 1st Diagnostics Advisory Committee meeting, a question was raised by the committee regarding the incidence of colorectal cancer in the economic model for patients receiving virtual chromoendoscopy compared to histopathology. In response to this question, the External Assessment Group (EAG) calculated the colorectal cancer incidence in these categories.

The School of Health and Related Research's (SchARR) bowel cancer screening (SBCS) model provided estimates of colorectal cancer incidence for patients in each of the categories in the EAG model, i.e. by whether patients had all adenomas resected and what surveillance interval they were assigned to (EAG report Table 34). These estimates ranged from 1.1% to 4.2%. We then calculated the incidence of colorectal cancer for the total population by multiplying these estimates by the proportion in each group. The calculated incidence of lifetime risk of colorectal cancer is 3.025% for those receiving histopathology, 3.020% for those receiving NBI, 3.045% for those receiving FICE and 3.021% for those receiving i-scan (Table 1).

Table 1 Lifetime risk of colorectal cancer for histopathology compared to virtual chromoendoscopy technologies

	Histopathology	NBI	FICE	i-scan
Lifetime risk of colorectal cancer	3.025%	3.020%	3.045%	3.021%