Hull and East Yorkshire Hospitals NHS Trust – Suspected cancer: recognition and referral pathway, lower gastrointestinal tract. This pathway is an example used in the NICE diagnostic guidance for Faecal immunochemical test to guide referral for colorectal cancer in primary care, and was not produced, commissioned or sanctioned by NICE. This was developed prior to the update to NG12 recommendation 1.3.4.

NICE GUIDANCE NG12
“SUSPECTED CANCER: RECOGNITION AND REFERRAL”

Section 1.3 Lower gastrointestinal tract cancers

Patient with lower GI symptoms

Follow NG12

Symptoms as in Section 1.3.1 – REFERRAL via 2WW pathway
- Aged 40 and over with unexplained weight loss and abdominal pain OR
- Aged 50 and over with unexplained rectal bleeding OR
- Aged 60 and over with
  - Iron-deficiency anaemia OR
  - Changes in their bowel habit

Symptoms as in Section 1.3.4
- Aged 50 and over with unexplained
  - Abdominal pain, OR
  - Weight loss, OR
- Aged under 60 with
  - Changes in bowel habit, OR
  - Iron deficiency anaemia, OR
- Aged 60 and over with anaemia even in the absence of iron DEFICIENCY
- Inflammatory bowel disease not considered likely

FIT testing offers no benefit and may delay referral in the above groups

FIT testing

>10 µg Hb/g faeces
Referral via 2WW Pathway

<10 µg Hb/g faeces
Consider Gastroenterology referral if clinical concerns/persistent symptoms
FIT testing has a very high negative predictive value for colorectal cancer