

Election Priorities 2007

Bowel cancer control



The Cancer Council Australia calls on the next Australian Government to reduce bowel cancer mortality by:

- Phasing in eligibility for the National Bowel Cancer Screening Program to all Australians aged over 50 as recommended by the NHMRC by 2012;
- Leading the creation of a national framework for the full implementation of the National Bowel Cancer Screening Program during the next parliamentary term of office;
- Committing to a substantial increase in funds for the National Bowel Cancer Screening Program to meet demonstrated population need and underpin quality assurance.

Why the federal election is the ideal opportunity to build on the existing national bowel cancer screening commitment

Bowel cancer claims more than 80 Australian lives each week¹ and its impact will increase significantly as our population ages. Screening prevents more than a third of bowel cancer deaths among the screened population.²

In May 2005, The Cancer Council Australia welcomed the Federal Government's budget commitment to phase in a National Bowel Cancer Screening Program as potentially one of the most important cancer control measures ever introduced in Australia. A platform has been laid for a future Australian Government to expedite rollout of the program, extend eligibility to people aged over 50 as recommended by the National Health and Medical Research Council² and create a robust framework for the program's implementation in agreement with the states and territories.³

While the program promises to deliver the greatest gains in reduced cancer mortality of all the initiatives announced in the Government's *Strengthening Cancer Care* package in 2005, a significant number of additional lives could be saved through expediting the program and expanding the age cohort in line with scientific evidence.

Developing a robust national framework

A key to Australia's success in screening to prevent breast and cervical cancer mortality has been the establishment of national agreements, articulating jurisdictional roles and responsibilities, funding arrangements, national data management systems and quality assurance measures.

¹ Cancer in Australia: an overview. Australian Institute of Health and Welfare, 2007.

² Clinical practice guidelines for the prevention, early detection and management of colorectal cancer, National Health and Medical Research Council, 2006.

³ Moving forward on bowel cancer screening in Australia, forum report, The Cancer Council Australia, 2006.

The Cancer Council Australia calls on the next Australian Government to establish, within the next parliamentary term, a rigorous national framework with the jurisdictions aimed at ensuring the National Bowel Cancer Screening Program meets its potential to save Australian lives as supported by top-level evidence.

As well as leading the states and territories in the cooperative development of a framework, the next Australian Government needs to assess the cost of full program implementation, which is estimated at being well in excess of the current commitment, and agree to a funding structure that meets demonstrated need in terms of lives saved and quality assurance.

The framework should feature:

- a national approach, agreed to and supported by all jurisdictions, to underpin quality assurance in program delivery, including workforce planning, training and support;
- a system for adequate data collection and analysis ensuring that the program's effectiveness can be measured and that the program can be continually adjusted according to demonstrated need;
- inter-jurisdictional agreement on minimum standards and the establishment of a mandatory mechanism to monitor quality controls in colonoscopy provision.
- forward planning and investment to manage colonoscopy waiting lists.
- further development of formal measures to support GPs in the performance of their key role in the program.
- monitoring of participation in the program and investment in targeted communication strategies to reach population groups that are shown to experience lower participation rates, such as men, Indigenous and non-English speaking population groups and people with a disability;
- further consideration of the role of gastroenterological nurses in contributing to the National Bowel Cancer Screening Program; and
- a process for extending the screening age cohort to all Australians aged over 50, as recommended by the NHMRC.

Australia's world-leading success in reducing cervical cancer mortality through population-based screening and the establishment of an effective breast cancer screening program should be emulated in the control of bowel cancer, the nation's second-highest cause of cancer death (after lung cancer).⁴

⁴ Cancer in Australia: an overview, 2006, Australian Institute of Health and Welfare, 2007.