



Sistema informativo europeo sugli screening: CANSCREEN ECIS

GISCoR
gruppo italiano screening coloretale

Radisson Blu Ghr Rome,
Roma, 21-22 novembre 2024

**XVII CONGRESSO
NAZIONALE 2024**

Carlo Senore
SSD epidemiologia e screening – CPO
AOU Città della Salute e della Scienza



Nessun conflitto di interesse

Canscreen ECIS



International Agency for Research on Cancer

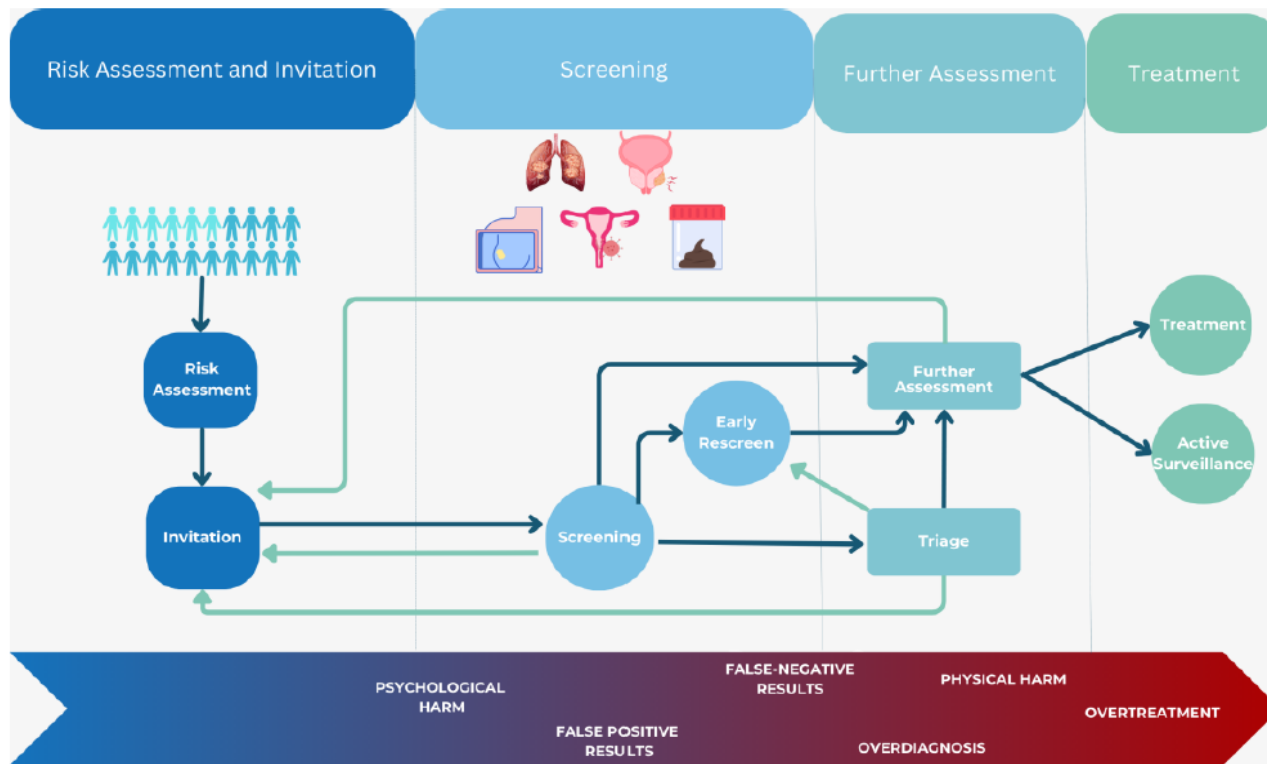


Obiettivi

- Rendere disponibili strumenti per il monitoraggio sistematico e la valutazione degli indicatori di qualità del processo e degli esiti dei programmi di screening
- Migliorare la qualità dei programmi di screening europei



Indicatori di qualità



- Screening opportunistico
- Indicatori precoci di impatto

- Barriere e disuguaglianze
- Organizzazione



**CanScreen
ECIS**

Erasmus MC
Erasmus

Brian Sheridan, Eveline Heijnsdijk, Harry de Koning

Indicatori di qualità

Indicator Categories	Indicators
1. Risk assessment and invitation	1. Risk assessment 2. Invitation Coverage
2. Screening and triage	3. Examination Coverage 4. Participation Rate 5. Retention Rate 6. Test result 7. Positive Predictive Value Screening test 8. False Positive Rate 9. Episode Sensitivity 10. Compliance with triage <i>Lung/cervix</i> Compliance with early rescreen

Quality indicators

Indicator Categories	Indicators
3. Further Assessment	11. Compliance with Further Assessment 12. Detection rate <i>Lung</i> Unnecessary biopsies/resections <i>Lung</i> Incidental findings <i>Prostate</i> Compliance with biopsy
4. Treatment	13. Compliance with treatment <i>Prostate</i> Active surveillance
5. Harms	14. Complications Screening Test 15. Complications Further Assessment
6. Opportunistic Testing	16. Opportunistic testing
7. Impact Indicators	17. Cause-Specific Mortality 18. Crude Incidence Rate 19. Interval Cancer Rate

Canscreen ECIS tool

Data Submission platform - Italy (national level)

	Landscape survey	Quantitative tools	Indicators calculated
Breast cancer 	Fill out & submit form ()	X Template ? Guide	Breast cancer indicators
Cervical cancer 	Fill out & submit form ()	If you have datasets for multiple primary screening tests, please fill out different form for each test: - Fill out & submit form () - Fill out & submit a 2nd form () X Template ? Guide	Cervical cancer indicators
Colorectal cancer 	Fill out & submit form ()	If you have datasets stratified by sex please use separate form for each sex and each primary screening test. Otherwise use a single form for each primary screening test: - Fill out & submit form () - Fill out & submit a 2nd form () - Fill out & submit a 3rd form () - Fill out & submit a 4th form () X Template ? Guide	Colorectal cancer indicators
Lung cancer 	Fill out & submit form ()	X Template	Available soon

- Piattaforma per la raccolta e la sottomissione dei dati
- Strumenti di analisi dei dati
- Cruscotto interattivo accessibile sul portale del progetto



International Agency for Research on Cancer



Centre for global health inequalities research



Tabelle raccolta dati

Subsequent screening

	F1 Referred for treatment	F2 Negative	Outcome unknown	F1 Further assessment performed
40-44				—
45-49				—
50-54	264	1099	0	1363
55-59	349	926	0	1275
60-64	704	1326	0	2030
65-69	587	814	0	1401
70-74				—
75-79				—
Age unspecified				—
	1904	4165	0	6069

Subsequent screening

	G1 Benign lesions	G2 CIS detected	G3 Invasive breast cancers detected	G4 Other histology	Outcome unknown	F1 Referred for treatment	B5 Screened population for which histological result is available
40-44						—	
45-49						—	
50-54	60	27	165	1	11	264	
55-59	59	31	253	4	2	349	
60-64	94	84	510	3	13	704	
65-69	52	72	444	5	14	587	
70-74						—	
75-79						—	
Age unspecified						—	
	265	214	1372	13	40	1904	

Copertura da inviti

età 50 - 69

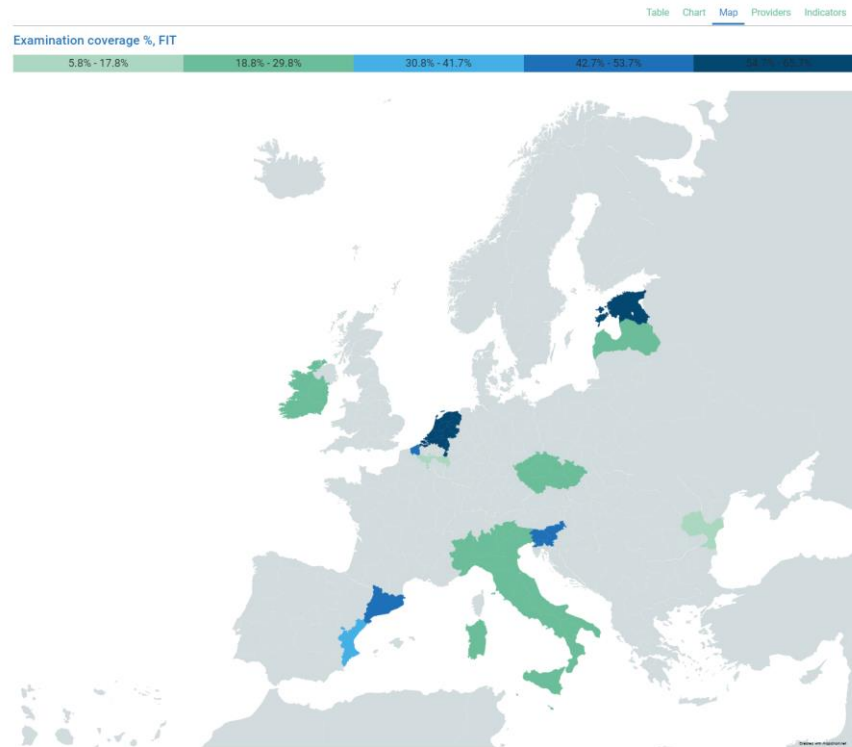
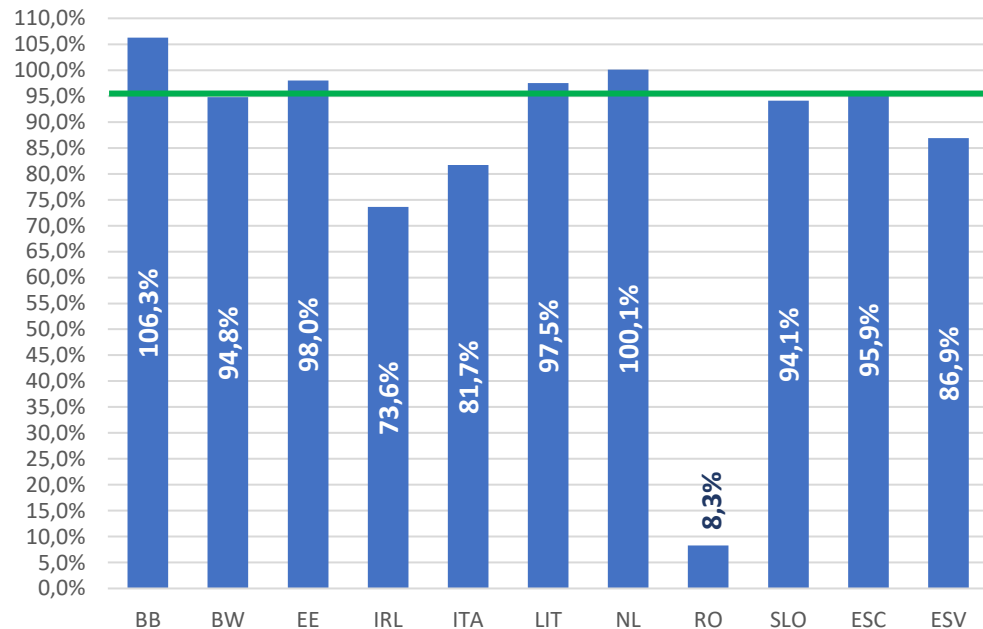
Invitation coverage %, FIT

	Sex	N	D	%	Index year	Ages
 Belgium, Brussels	♀ + ♂	127,459	119,909	106.3	2019	○○●●●○○○
 Belgium, Wallonia	♀ + ♂	443,963	468,454	94.8	2019	○○●●●○○○
 Estonia	♀ + ♂	73,121	74,629	98.0	2020	○○○○●●○○
 Ireland	♀ + ♂	284,255	386,405	73.6	2019	○○○○●●○○
 Italy	♀ + ♂	6,995,017	8,561,551	81.7	2022	○○●●●○○○
 Lithuania	♀ + ♂	656,670	673,335	97.5	2018	○○○○○○○■
 Luxembourg	♀ + ♂	63,744	53,771	118.5	2021	○○○○●●○○
 Netherlands	♀ + ♂	1,722,269	1,720,655	100.1	2022	○○○○●●○○
 Romania, Sud-Est, Su...	♀ + ♂	91,300	1,100,098	8.3	2023	○○●●●○○○
 Slovenia	♀ + ♂	273,076	290,067	94.1	2019	○○●●●○○○
 Spain, Cataluña	♀ + ♂	900,918	939,577	95.9	2019	○○●●●○○○
 Spain, Comunidad Val...	♀ + ♂	578,178	665,352	86.9	2022	○○●●●○○○

Copertura da inviti

Età

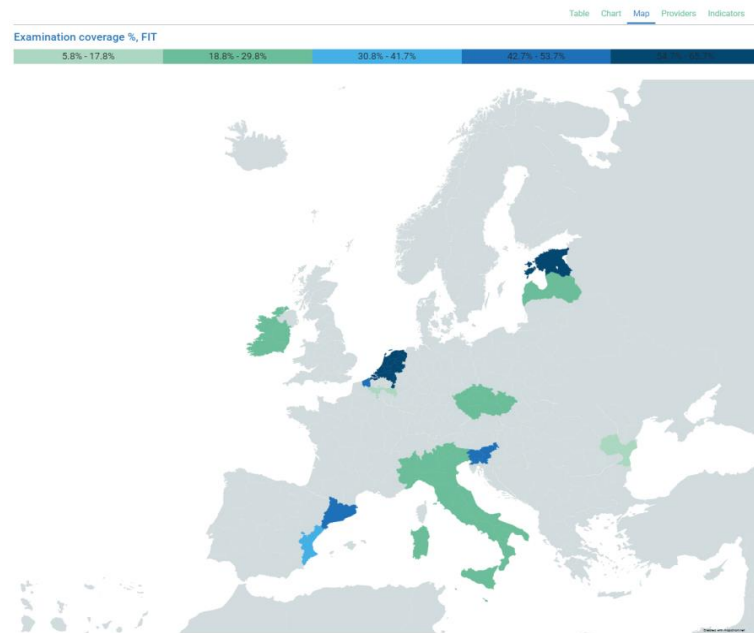
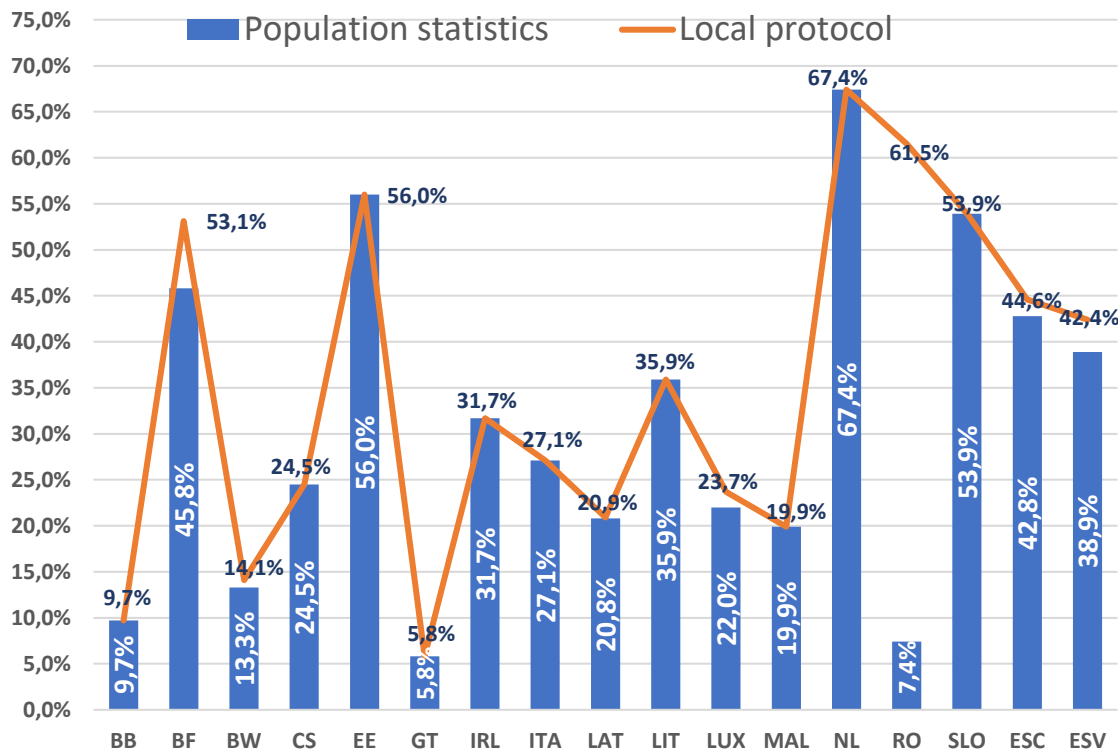
► 55 - 69



Copertura da esami

Età

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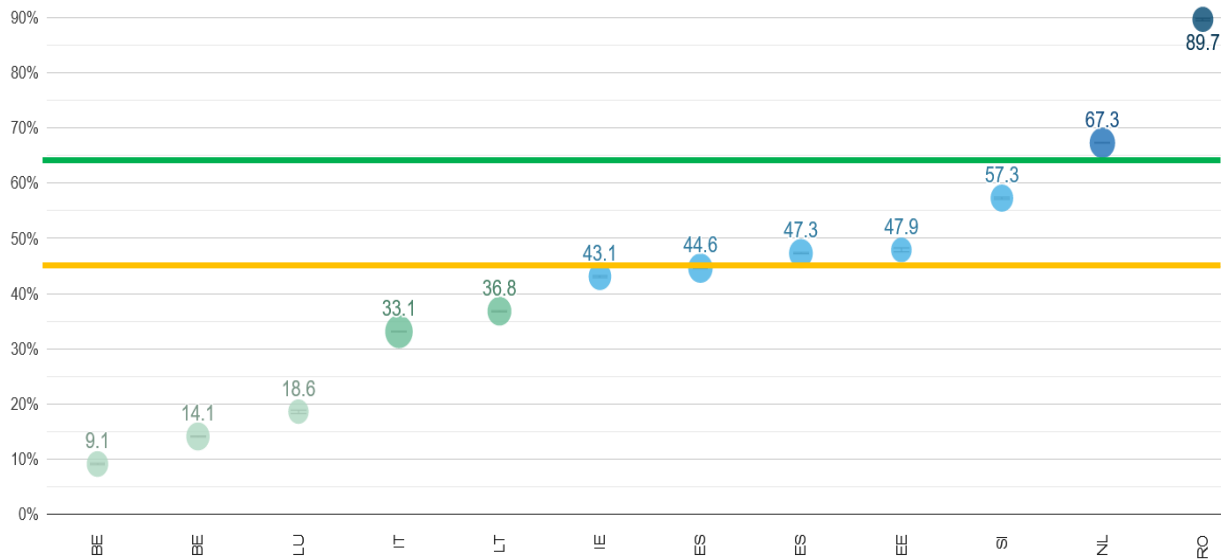


Partecipazione

Età

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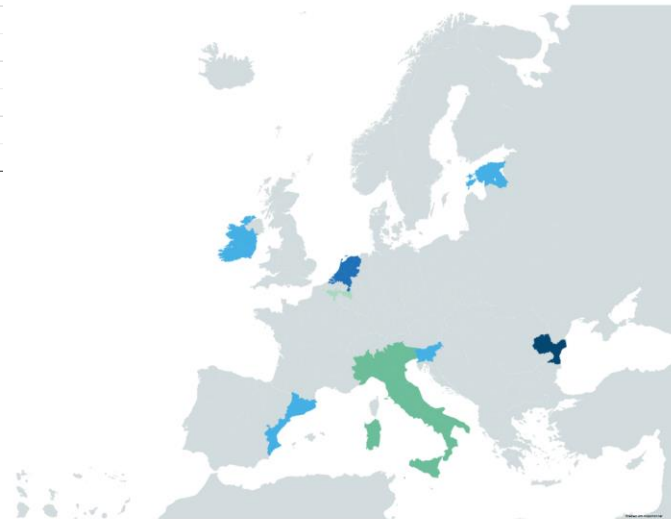
Participation rate %, FIT



Participation rate %, FIT



Scientific advisors: Paolo Armaroli, Lisa Giordano, Cristiano Piccinelli,
Carlo Senore (CPO Piemonte)
Technical advisors: Marco Callegaro, Andrea Ortolano (CPO Piemonte)

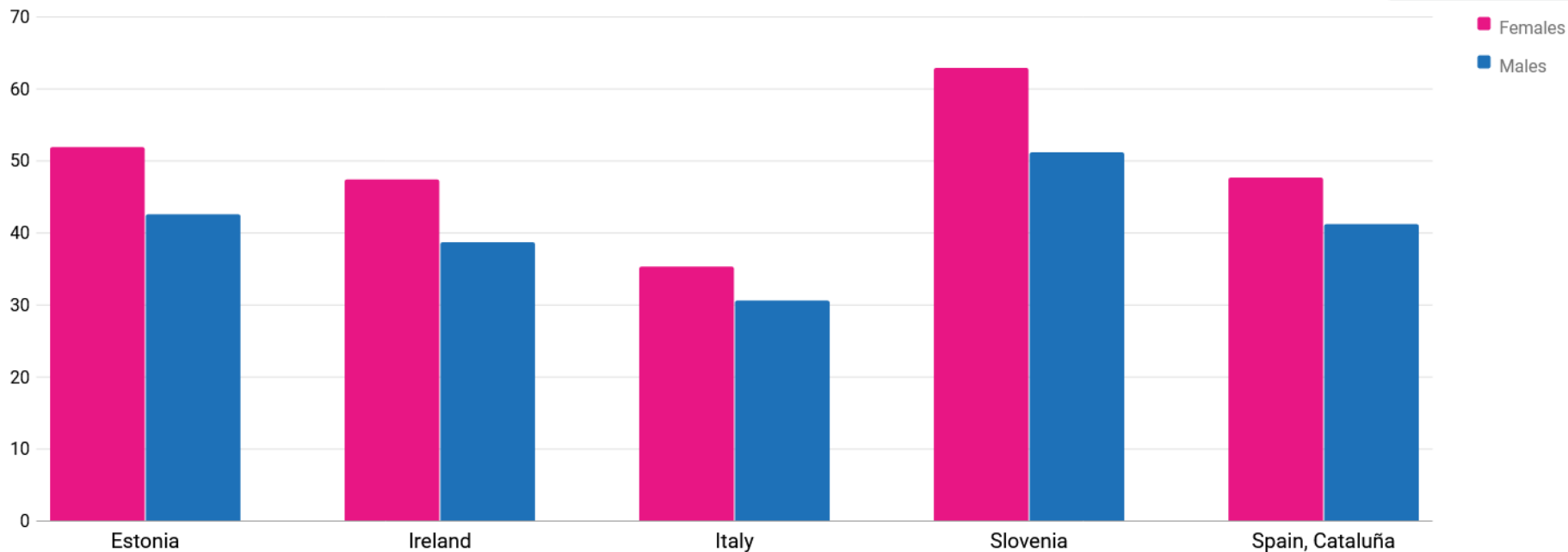


Partecipazione - per sesso

Età

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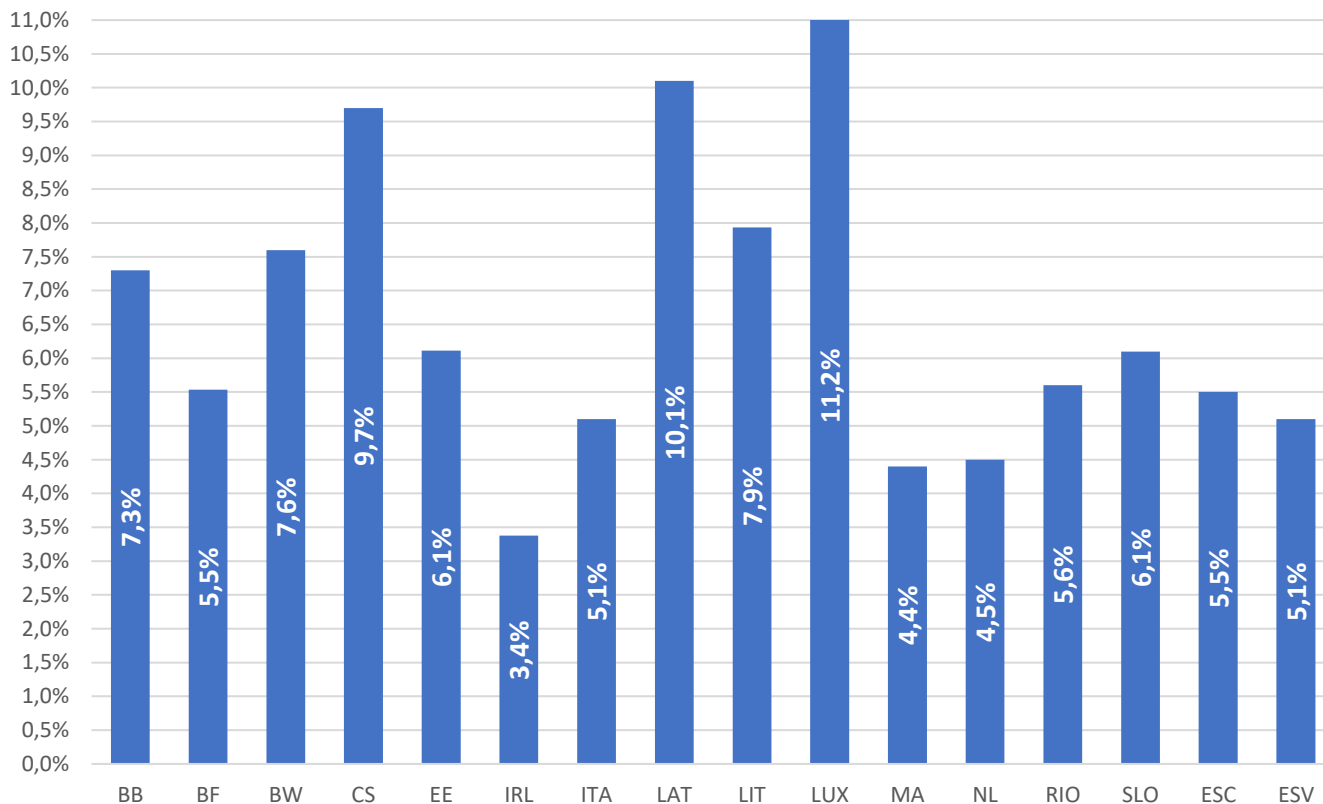
Participation rate %, FIT



Positività

Età

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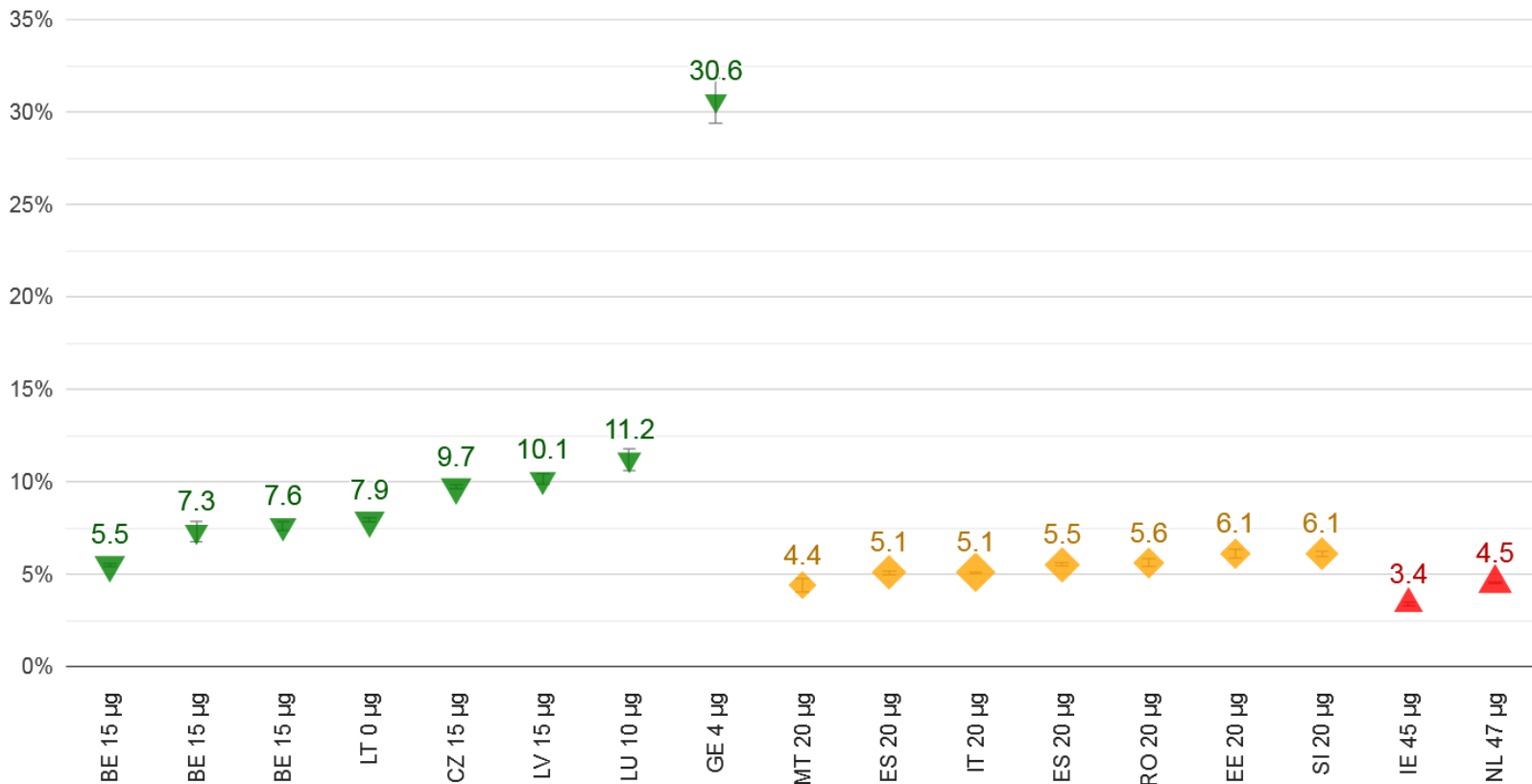


Età

Positività

per cut-off adottato

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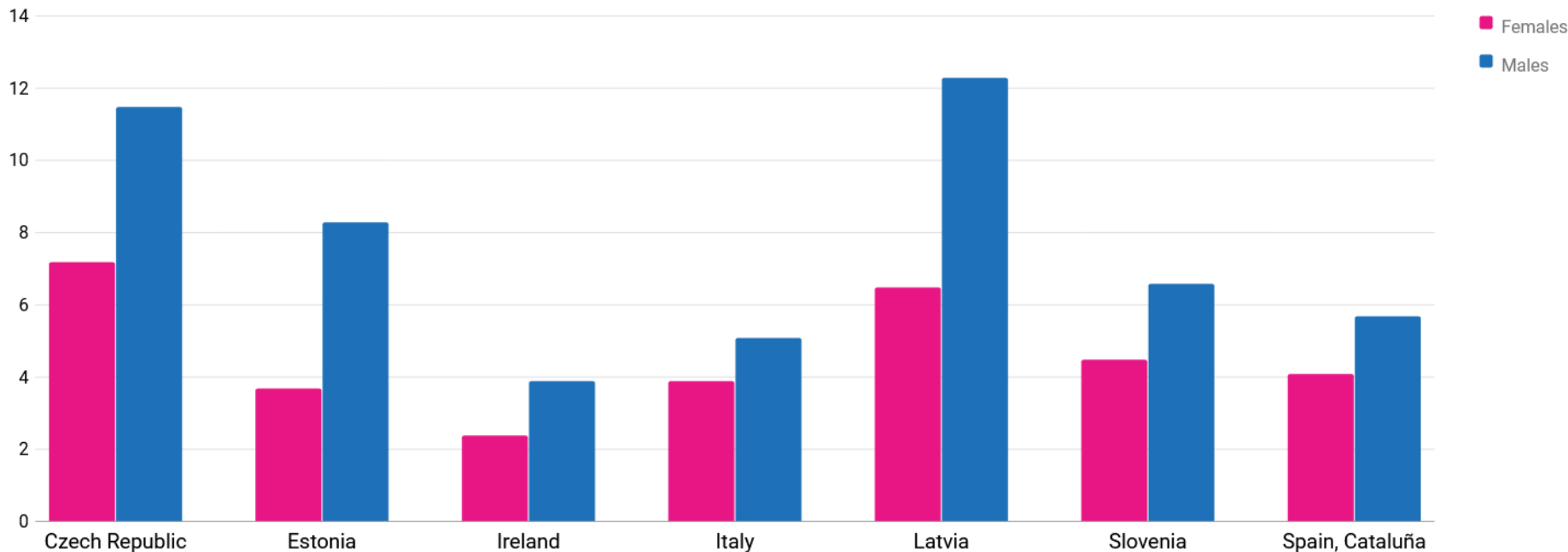


Positività – per sesso

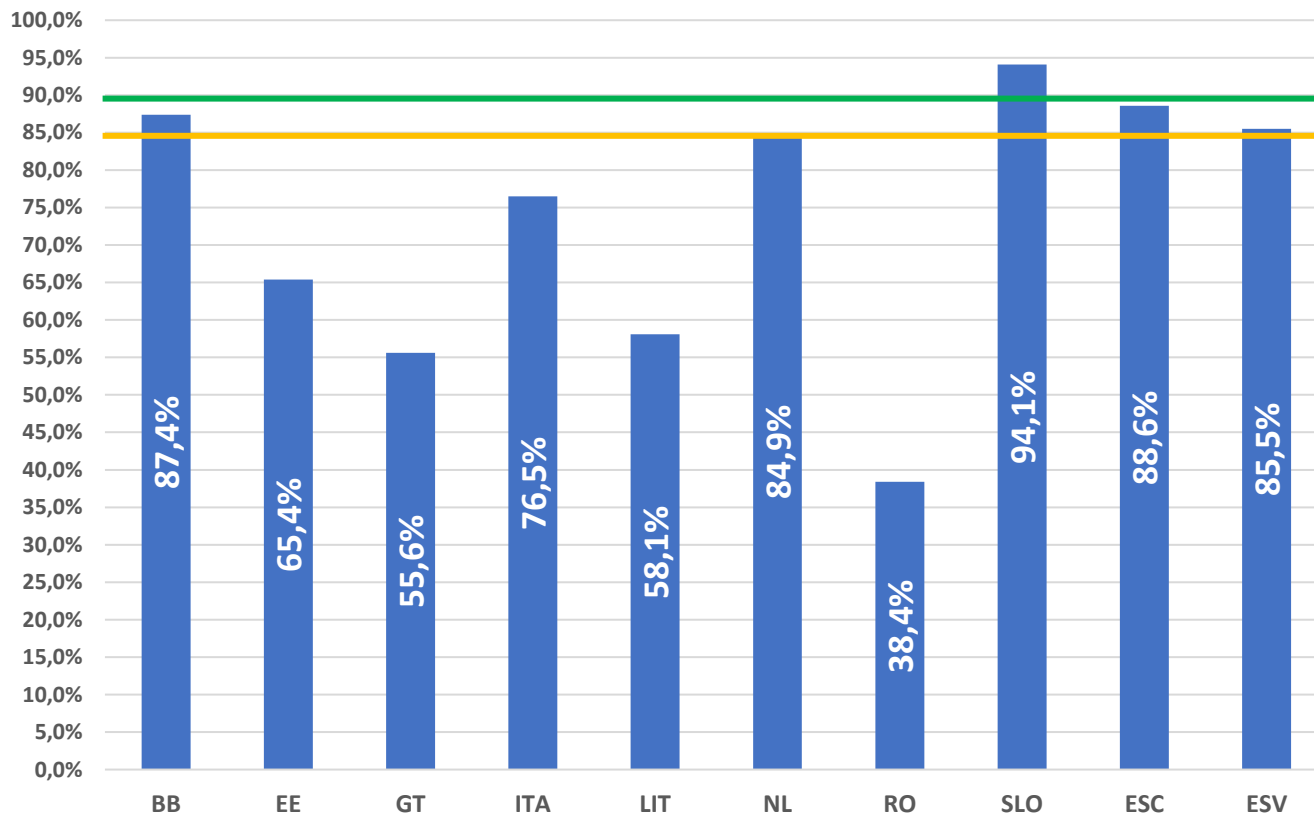
Età

► 55 - 69

Test result - Positivity rate %, FIT



Adesione all'invio in colonscopia



Età

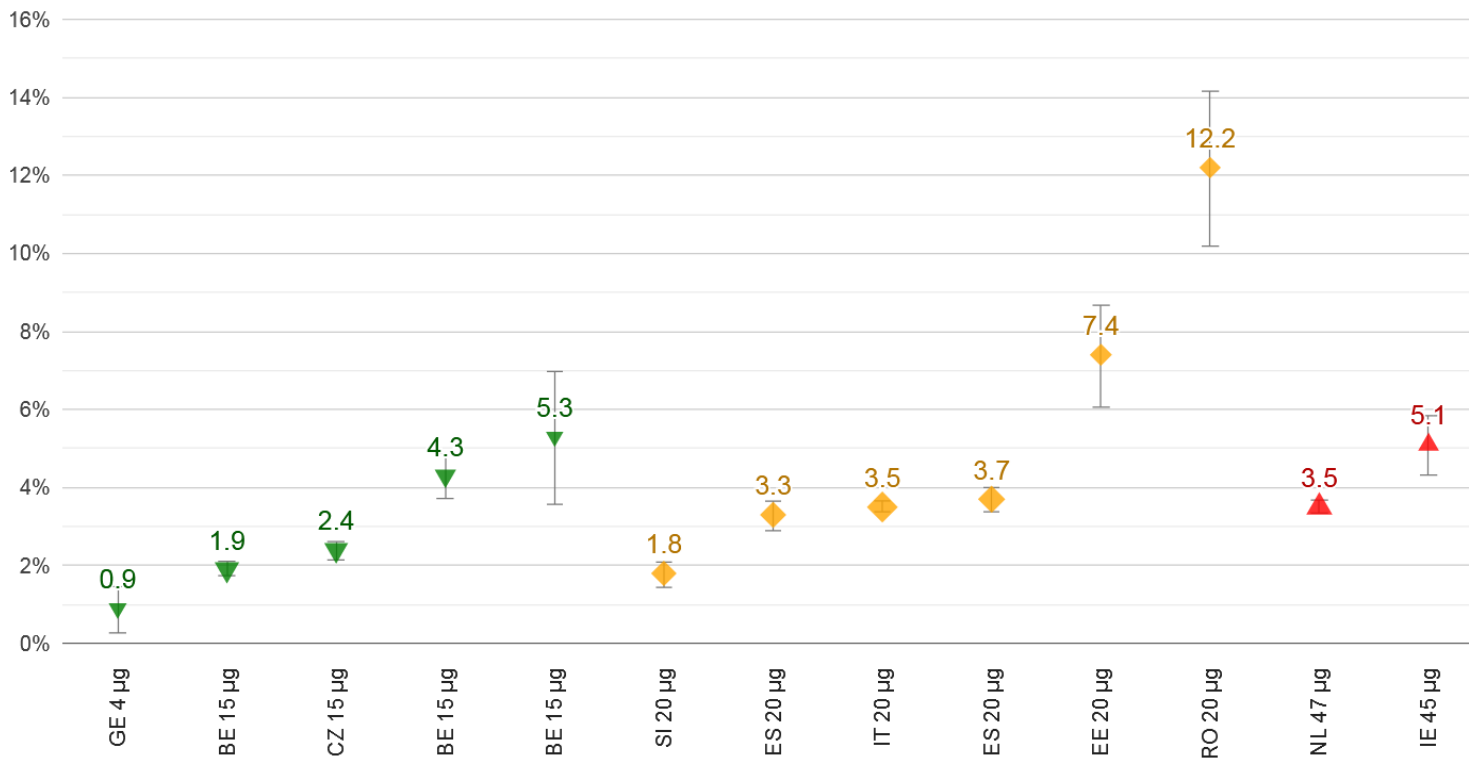
➤ 55 - 69



PPV CRC

Età

55 - 69

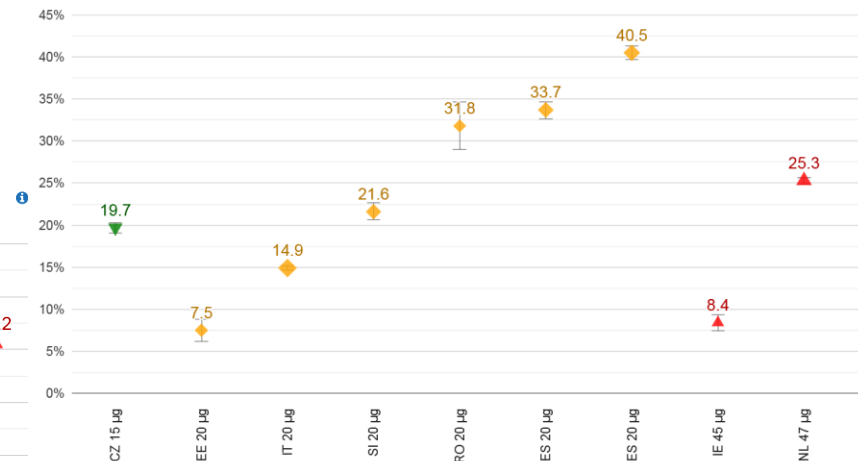
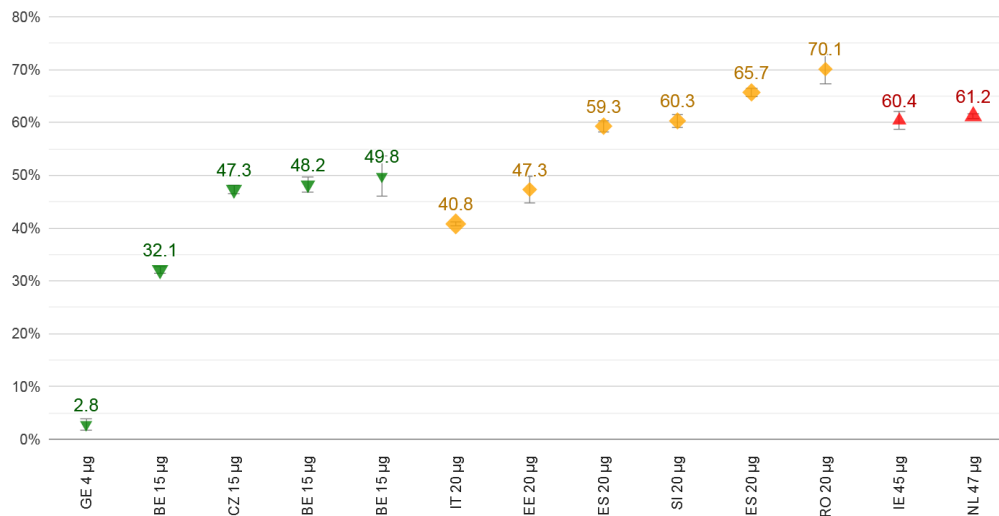


Età

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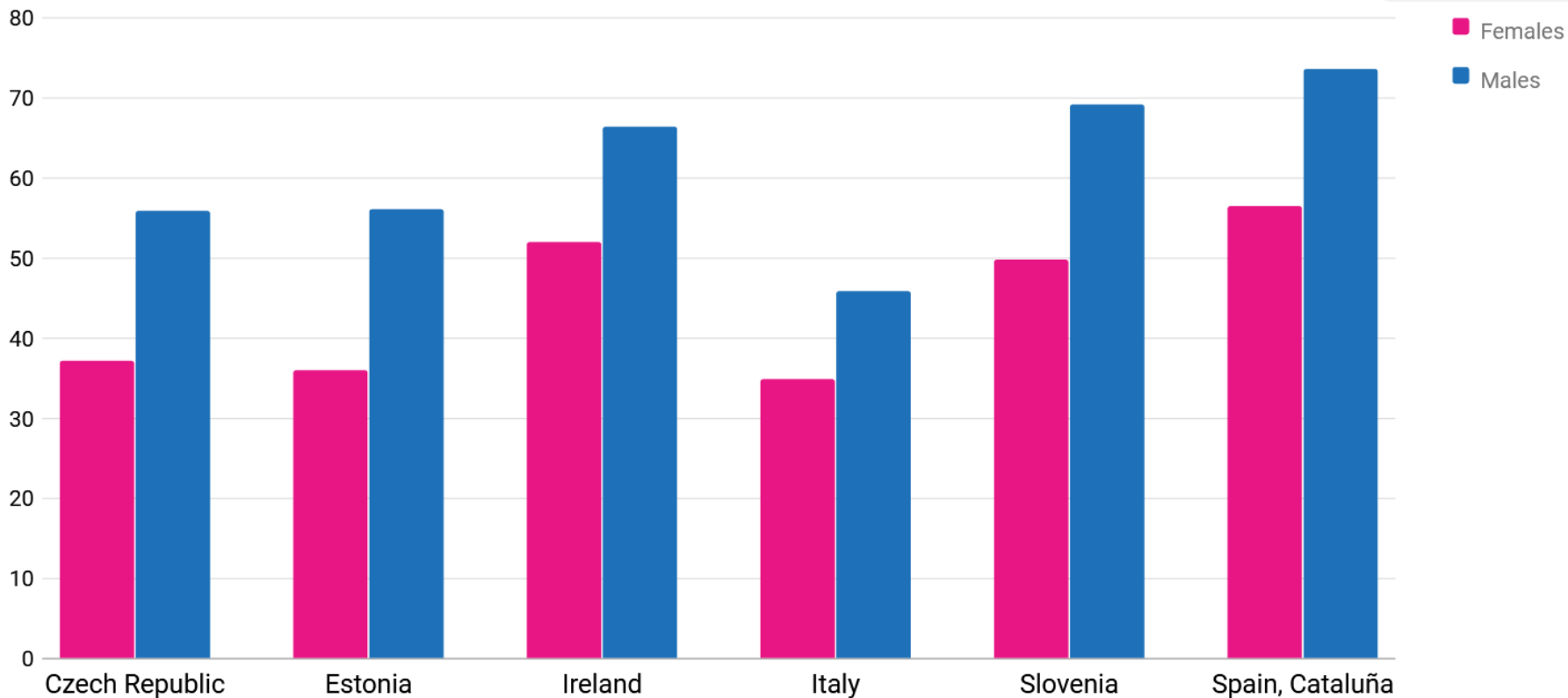
PPV adenoma avanzato

PPV ogni adenoma



PPV ogni adenoma per sesso

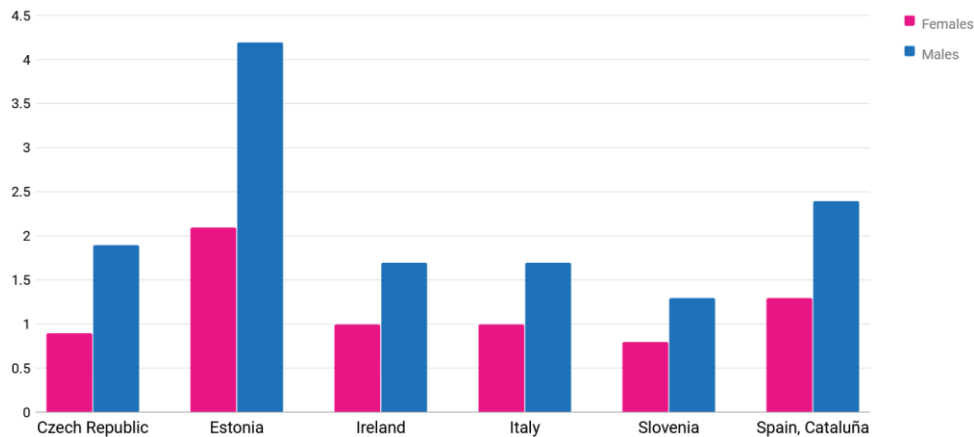
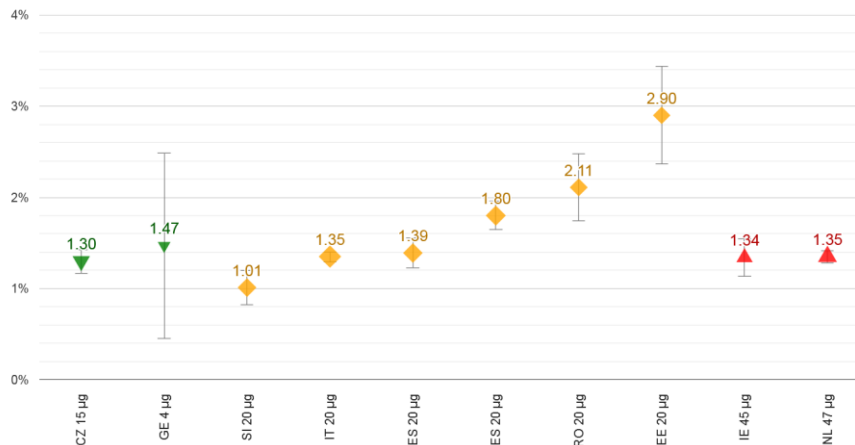
➤ 55 - 69



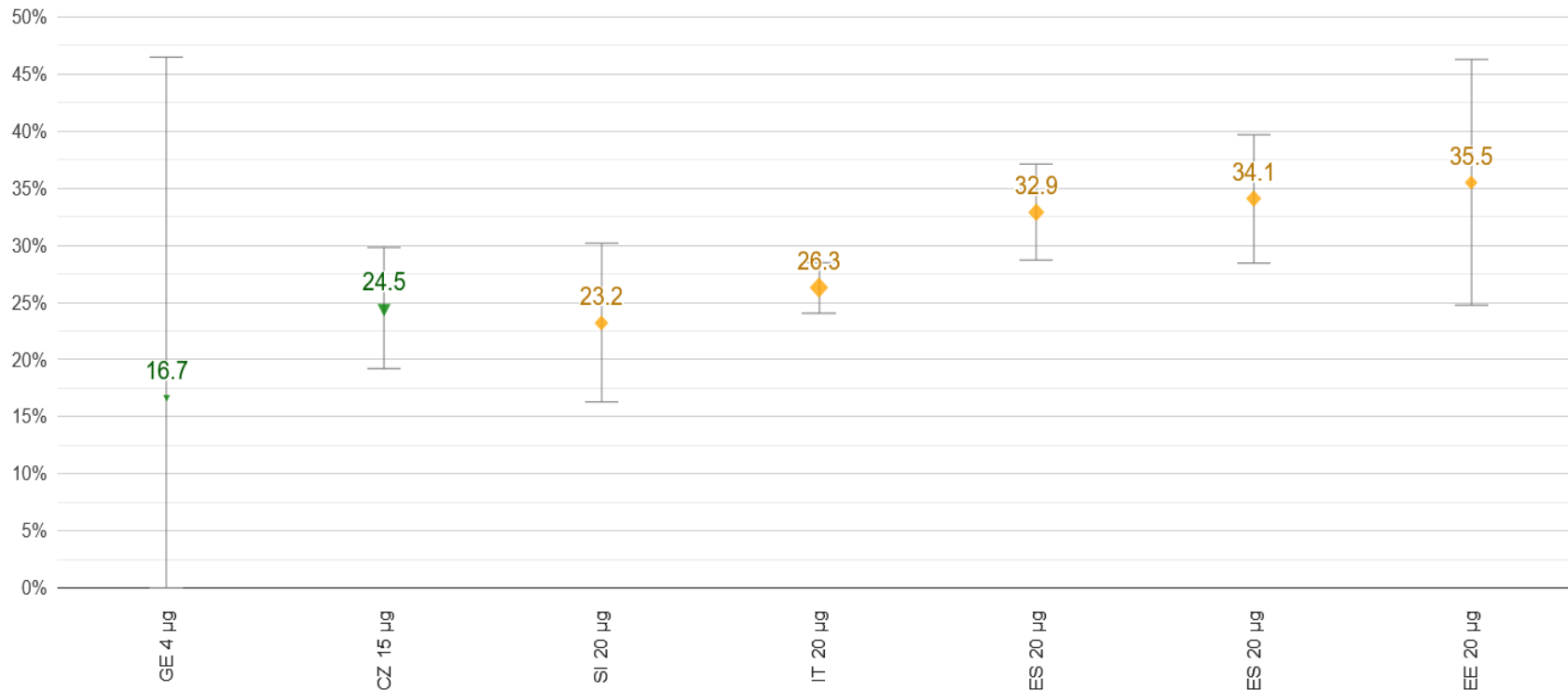
DR Cancro

Età

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Proportion Stage III+ %, FIT



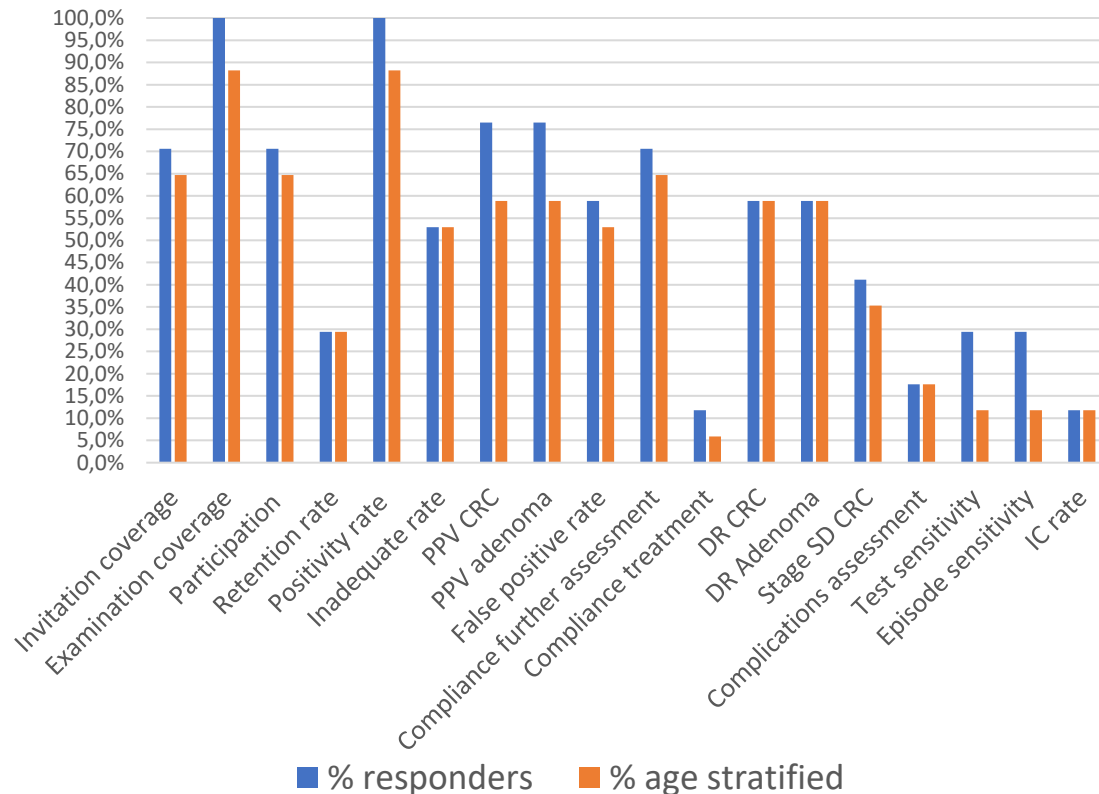
Completezza dei dati – programmi FIT

17 programmi da 14 paesi

4 : età di inizio a 55 anni

5 : età di stop a 69 anni

7 : dati stratificati per sesso



- Disponibilità di dati è ancora limitata in molti programmi
- L'adozione di differenti classificazioni per alcuni esiti contribuisce a determinare la variabilità osservata
- Scarsa attenzione agli indicatori relative al trattamento
- Confrontabilità degli indicatori resta limitata
 - Non tutti i programmi forniscono dati stratificati per i fattori che influenzano gli esiti
 - La tipologia dei dati (aggregate) limita le possibilità di analizzare l'impatto di diversi fattori (qualitativi e quantitativi)



Conclusioni

Nell'ambito della JA europea Canscreen sono previsti progetti pilota che prevedono l'utilizzo di dati individuali per il calcolo degli indicatori e per il confronto di diversi protocolli

Occorre definire

- l'approccio alla costruzione dei database e all'analisi dei dati
- le regole di accesso e condivisione dei dati



Grazie a

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Andrea Ortale

Eric Lucas

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