Vaughan Gething AC/AM Y Gweinidog lechyd a Gwasanaethau Cymdeithasol Minister for Health and Social Services Llywodraeth Cymru Welsh Government

Ein cyf/Our ref MA-P/VG/2064/19

Leanne Wood AM
National Assembly for Wales
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11 June 2019

Dear Leanne,

I am writing in response to the issue you raised in Plenary on 21 May regarding lowering the bowel screening starting age to 45.

The UK National Screening Committee (UKNSC) advises Ministers in the four UK countries about how to deliver population screening programmes. It brings academic rigour and authority to what is an extremely complex area and is a world leader in its field. The UKNSC currently recommends bowel screening between the ages of 50 and 74. If new evidence shows that asymptomatic screening from a younger age is beneficial, and it is subsequently recommended by the UKNSC, then a change to the starting age of the programme will be given the appropriate consideration.

As you are aware, the Welsh Government has recently committed to expand the programme to include men and women aged 50-59 by 2023. The risk of bowel cancer increases sharply from the age of 50 and the evidence shows that screening people in this age group would enable more bowel cancers to be picked up at an earlier stage, when treatment is likely to be more effective and survival chances improved. In order to put in place the significant additional colonoscopy capacity to achieve the reduction in starting age and increased test sensitivity, it is important the bowel screening programme is expanded in a phased and measured manner. This will ensure all people with suspected cancers can continue to be promptly investigated and treated. Public Health Wales has completed modelling as to how the bowel screening programme can be optimised which has been agreed by the Welsh Government and health boards. The target date for completion provides a realistic timescale in which to achieve this.

Additionally, since January 2019, Bowel Screening Wales has been providing new faecal immunochemical testing (FIT) as part of the routine screening programme. This new screening test will fully replace the current guaiac faecal occult blood test (gFOBt) by the end of the summer. As well as being more accurate, the new test is easier for people to use and evidence shows it will improve uptake in the screening programme. Wales will therefore be only the second country in the UK, after Scotland, to have fully replaced the bowel screening test. We also intend to gradually increase the sensitivity of this new test over the next four years so that more cancers can be detected.

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Rydym yn croesawu derbyn gohebiaeth yn Gymraeg. Byddwn yn ateb gohebiaeth a dderbynnir yn Gymraeg yn Gymraeg ac ni fydd gohebu yn Gymraeg yn arwain at oedi.

We welcome receiving correspondence in Welsh. Any correspondence received in Welsh will be answered in Welsh and corresponding in Welsh will not lead to a delay in responding.

Anyone with possible signs and symptoms of cancer should contact their GP, who will decide whether to refer them via the urgent suspected cancer pathway. It is important that young people with a family history of bowel cancer speak to their GP who can refer them to the All Wales Medical Genetics Service. We have recently put in place additional provision for all those diagnosed with bowel cancer to be tested for a genetic abnormality called Lynch Syndrome, which increases the risk of several types of cancer. Wales will soon be the first UK country to be delivering this additional test to everyone diagnosed with bowel cancer.

Our broader approach to improving cancer services and outcomes is set out in the Cancer Delivery Plan for Wales, which was updated in November 2016. The plan has a focus on the earlier detection of cancer and further information can be found at:

http://gov.wales/topics/health/nhswales/plans/cancer-plan/?lang=en

Thank you for raising this important issue.

Yours sincerely,

Vaughan Gething AC/AM

Y Gweinidog lechyd a Gwasanaethau Cymdeithasol Minister for Health and Social Services