

PRESS RELEASE

31st July 2007

Preventative CT scanning of asymptomatic patients can be safe and effective?

The Clinical Advisory Committee of Diagnostic Imaging (CACODI) was set up in January 2007: It asked experts in their field to review evidence-based clinical papers and research to examine the role of diagnostic imaging in preventative medicine, looking specifically at CT screening in the early detection and prevention of certain diseases.

Key findings of the Committee following the review of published international medical papers

Colon

- CT Colonography is increasingly being recognised as a cost effective tool for colon cancer screening. In experienced hands it has been shown to be able to pick up colon cancer at its earliest most curable stages. NICE have approved CT screening for use in the NHS for high-risk asymptomatic patients. The current NHS screening procedure using faecal occult blood testing misses half of all existing cancers and most colon polyps (known cancer precursors).

Heart

- Coronary artery Calcium scoring is now well established as the most powerful risk factor for coronary artery disease either alone or in combination with other existing risk factors. The detection of preclinical disease allows for lifestyle changes and early treatment which is thought to be able to prevent future heart attack and stroke.

Lung

- The International Early Lung Cancer Action Programme (I-ELCAP) has shown that lung cancer can be identified at its earliest stages suggesting a significant improvement in mortality can be made. Deaths from lung cancer could be reduced by up to 80% if people at a suitable level of risk enrolled in a screening programme. No other intervention from the past 40 years has had any impact on lung cancer mortality.

Radiation

- The doses of radiation involved are very small in comparison to total lifetime exposure.
- Any theoretical harmful effects are either too small to measure in a meaningful way and likely to be outweighed by the potential benefits derived from early diagnosis of serious conditions.

The Committee did not look at whole body scanning but the scanning of specific areas of the body, lung, heart and colon.

The aims of the Committee are to inform political policy on medical imaging (and CT in particular) with regards private provision and establish a framework more focussed on safety, clinical effectiveness and quality rather than cost-effectiveness.

Key findings about Clinical Effectiveness are as follows:

Coronary Heart Disease

- Cardiovascular disease remains Britain's premier cause of death and in 40% the first symptom is sudden death.
- Although there is currently no confirmatory trial evidence, recent research showed that 30-40% of people told that their calcium score was high and they were high risk would make a significant lifestyle change. Finding a high coronary calcium level, and starting conventional treatment to lower coronary risk as would be used in secondary prevention of heart disease – statins, blood pressure lowering, weight loss etc, - is expected to have a positive impact on mortality,
- This remains the subject of study, but secondary prevention – i.e., treatment of those who have symptomatic heart disease – is known to be of benefit, and it seems likely that in those with known but asymptomatic heart disease as indicated by a raised coronary calcium will be of benefit to a significant number of people.

Colon Cancer

- Colon cancer is the third most common cause of cancer in the UK and the second leading cause of cancer death. Screening methods can pick up the disease at its earliest most curable stages.
- The National CT Colongraphy Trial (ACRIN) in the US, soon to be published, is likely to pave the way for CTC to be included as a primary screening option
- NICE have approved CTC for use in the NHS for high-risk asymptomatic patients.
- The current NHS screening programme using faecal occult blood testing misses half of all cancers and most polyps.

Lung Cancer

- Lung cancer is the leading cause of death from cancer in both men and women in the UK, and 80% of patients are diagnosed at a stage where the disease is advanced and incurable.

- There is much interest in screening individuals with heavy smoking histories in the hope that this will allow diagnosis at an earlier stage when treatment is more likely to be curative.
- The International Early Lung Cancer Action Programme (I-ELCAP) reported the curability of lung cancer, using 10-year survival rates. The results showed that deaths from lung cancer could be reduced by 80% if people at a suitable level of risk enrolled in a screening programme.
- Low dose CT, remains controversial, but because it is an effective screening for diagnosing lung cancers at an early stage is considered by some experts to be a valuable screening tool allowing for curative therapy in lung cancer if caught early enough.

Ends

Notes to Editors

Our thanks to the following for their input to the Report:

Acting Chair: John Marshall, Frost Professor of Ophthalmology

- Charlotte Atkins, MP, Health Select Committee
- Dr David Burling, Consultant Radiologist, St Marks Hospital
- Frank Cook, MP
- Dr Jeremy George, Consultant Respiratory Physician, University College Hospital
- Dr Geoffrey Glazer, Federation of Independent Practitioners Organisations
- Dr Ian Gibson, MP
- Dr John Giles, Consultant Cardio-vascular Radiologist, Conquest Hospital and Clinical Director, Lifescan
- Dr Paul Jenkins, Consultant Physician, Barts Hospital and Medical Director, European Scanning Centre
- Dr Peter Mace, Assistant Medical Director, BUPA Wellness
- Trevor Perry, Director Government Affairs, GE Healthcare
- Dr Phil Shorvon, Association of Independent Radiologists
- Dr Rick Steeds, Consultant Cardiologist, University Hospital Birmingham
- Dr Stuart Taylor, Consultant Radiologist University College Hospital
- Jim Thurston, Radiation Protection Advisor, Kings College Hospital
- Dr David Sliney, US Army Centre for Health promotion and preventive medicine

Those who attended a meeting include:

- Richard Evans, CEO, College and Society of Radiographers
- Baroness Finlay of Llandaff
- Evan Harris, MP

For a full copy of the Report please visit www.cacodi.org.uk

Media enquiries please contact

Lisa ter Haar: lisa@onlyconnectsolutions.com - 07973 819 395

Fiona Gale: Fiona@onlyconnectsolutions.com - 07770 977 497

