**Abstracts**

**P294 OVER-AGE SELF-REFERRALS IN THE ENGLISH BOWEL CANCER SCREENING PROGRAMME – ARE THEY THE WORRIED WELL?**

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**Introduction** The English Bowel Cancer Screening Programme (BCSP) invites people aged 60–74 and registered with a GP, to complete a faecal occult blood test (FOBt) every two years. People with abnormal tests are then referred for further assessment, with most going on to have a colonoscopy.

Over the age of 75 individuals can ‘self-refer’ into the Programme. The size of this population is increasing and is more health conscious. We were therefore interested in understanding the demographics of this group of individuals.

**Methods** Data on subjects aged 75+ who requested guaiac FOBs between 2010 and 2017 was interrogated according to age, gender, positivity of the test, fitness for colonoscopy, cancers and adenomas detected.

**Results** During this time period 205,034 gFOB tests were completed by 185,637 subjects (aged 75–105). 54% of these individuals were male compared to 49% of those aged 60–74.

Numbers of people who self-refer are increasing annually but still represent <2% of all tests performed (1.3% in 2013 to 1.8% in 2019).

Positivity in the over 75’s was 2.8% compared to 1.9% in the 60–74 age range. Of those positive 85% attended SSP appointments, with 95% fit for colonoscopy (89% and 97% in 60–74 year olds), however only 88% of those went on to have this procedure (compared to 95% of 60–74 year olds).

Cancer detection rates were higher, and normal colonoscopies lower in these individuals compared to those in the 60–74 age group (cancer:17.3% vs 8.7%; normal:9.6% vs 16.6%), with little difference in the adenoma detection rates.

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**Conclusions** Whilst numbers of over-age referrals are on the increase they remain a small proportion of the subjects

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**Abstract P293 Figure 1 Expected (continuous) and observed (dotted) probability of AN by risk score. The table shows number of individuals with and without AN in each risk score category. The expected probability was calculated based on the equation, developed through a logistic regression model in the Spanish cohort. The observed probability is the prevalence of AN in our study sample**

**Conclusion** A risk score, which combines quantitative FIT, age and sex can accurately estimate the risk of having AN in a symptomatic British population.

**REFERENCE**