

IARC coordinates new EU Guidelines on Colorectal Cancer Screening and Diagnosis

Colorectal cancer second most common cause of cancer deaths in Europe and fourth worldwide

3 February 2011.- To underline the importance of quality assurance in cancer screening, the first edition of the European Guidelines for Quality Assurance in Colorectal Cancer Screening and Diagnosis is being released at midday today, on the eve of the World Cancer Day. Scientific evidence shows that screening can help significantly to detect colorectal cancer early and reduce mortality due to the disease, ranked the second most deadly cancer in Europe.

The comprehensive Guidelines were developed for the European Commission in an international collaborative project coordinated by the International Agency for Research on Cancer (IARC). Over 90 experts from 23 European countries and 9 other countries across the globe reviewed the evidence and agreed recommendations and standards for quality assurance and best practice applicable to a wide spectrum of cultural and economic health care settings in the EU. They cover the entire screening process from invitation and organisation through to diagnosis and management of the abnormalities detected through screening. "The guiding principles and many of the recommendations are relevant not only to Europe, but to all regions of the world", said Dr Christopher Wild, Director of IARC, the WHO cancer research organization.

Colorectal cancer (CRC) is a significant health problem that is getting worse. Currently, CRC is the [fourth most common cause of cancer deaths worldwide](#). [In the EU, the burden of CRC](#) is particularly high and it ranks as the second most common cause of cancer deaths. There is good evidence from randomized controlled trials that systematic, early detection can reduce mortality due to the disease.

Quality assurance guidelines provide guiding principles and recommendations on how to implement every part of a screening program, including not just performance of a screening test, but also diagnosis and treatment: the guidelines are multidisciplinary and are based on a comprehensive review of the evidence.

Quality assurance in cancer screening is highly important due to the sheer number of people taking part in screening programmes: for those who are discovered to have pre-cancerous lesions or early cancer, there is the opportunity to treat it more successfully. However, for those without these signs, screening provides reassurance. Because the majority falls into the latter category it is important that procedures ensure that only minimal risk is associated with colorectal screening.

Dr Christopher Wild continued: "These Guidelines are the result of a major international cooperation and the authors, editors and other contributors are to be congratulated. We must now turn to their widespread application to promote the vital international exchange of information and experience between programmes that is essential for continuous quality improvement across national borders."

Dr Wild also points out that publication of the Guidelines on the eve of the World Cancer Day is very welcome as it helps draw attention to the fact that in addition to screening, primary prevention is fundamental to cancer control. "Reducing exposure to modifiable risk factors for colorectal cancer, such as physical inactivity, obesity, consumption of alcoholic beverages, [red or processed meats](#), and tobacco smoking, combined with screening will translate to a significantly reduced burden of this cancer".

About IARC

The International Agency for Research on Cancer (IARC) is part of the World Health Organization. Its mission is to coordinate and conduct research on the causes of human cancer, the mechanisms of carcinogenesis, and to develop scientific strategies for cancer control. The agency is involved in both epidemiological and laboratory research and disseminates scientific information through publications, meetings, courses and fellowships. If you wish your name to be removed from our press release e-mailing list, please write to com@iarc.fr.

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