

Introducing Faecal Calprotectin: The Northumberland Experience

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Drivers

- Increasing referrals for lower GI endoscopy
- Cost pressures
- Clinical diagnostic uncertainty: IBD vs IBS
- Potential risks of colonoscopy
- Non-specific non-invasive tests
- NHS challenges of moving from innovation to implementation

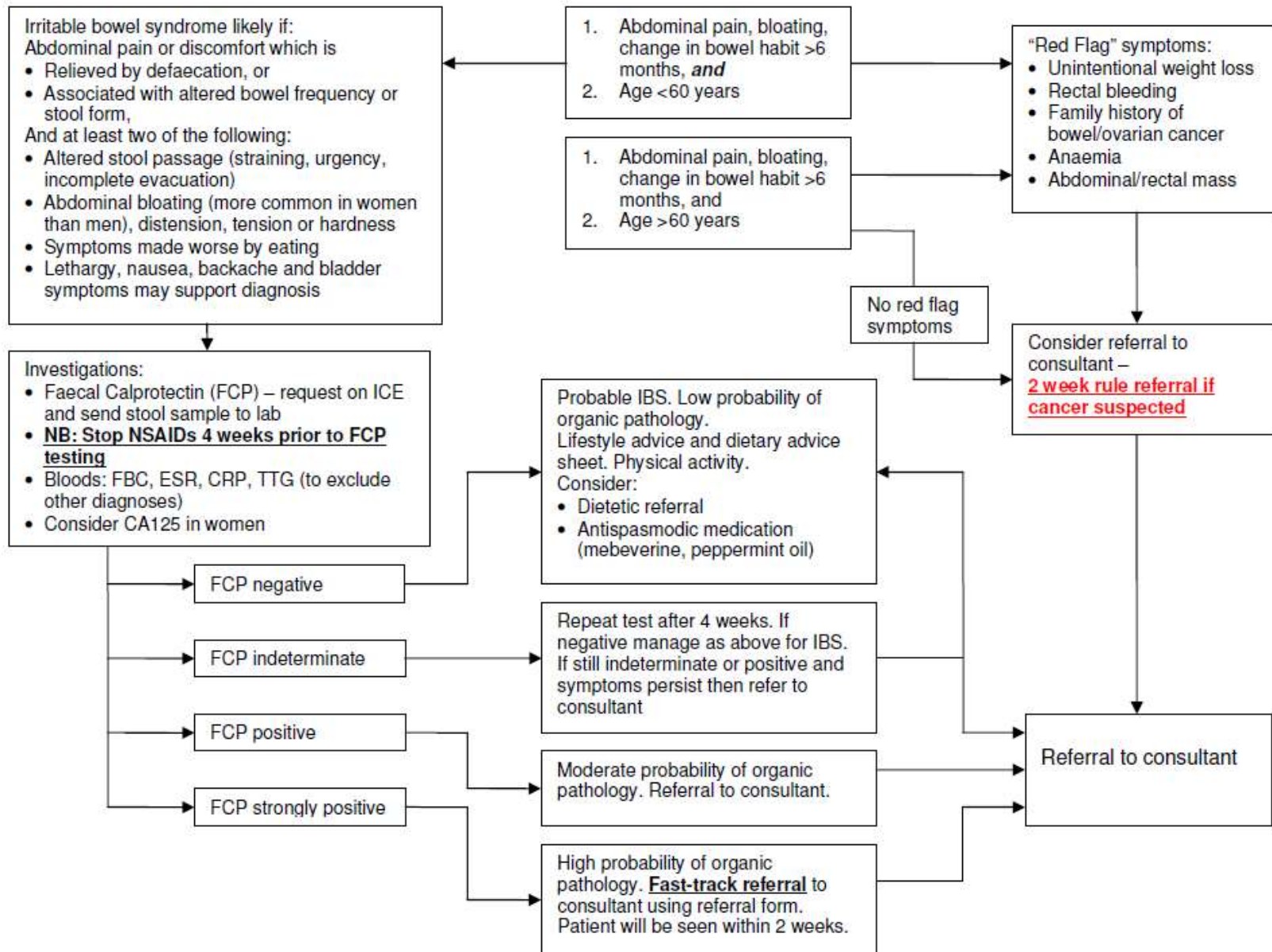
Getting Started

- Partners:
 - West Northumberland PBC Group
 - Northumbria Healthcare Foundation Trust
 - Gastroenterology
 - Biochemistry
 - North of Tyne PCT
 - NHS Technology Adoption Centre (NTAC)
 - North East NHS Commercial Hub
 - Evaluation: York Health Economics Consortium

Considerations

- Fully quantitative vs partially quantitative assay
- Lab-based vs Point of Care
- Cost (£17.5K over 2 years)
- Acceptability – patients & GPs/practice staff
- Infection Control

Northumberland Primary Care IBS Pathway (Based on NICE CG61 Pathway)



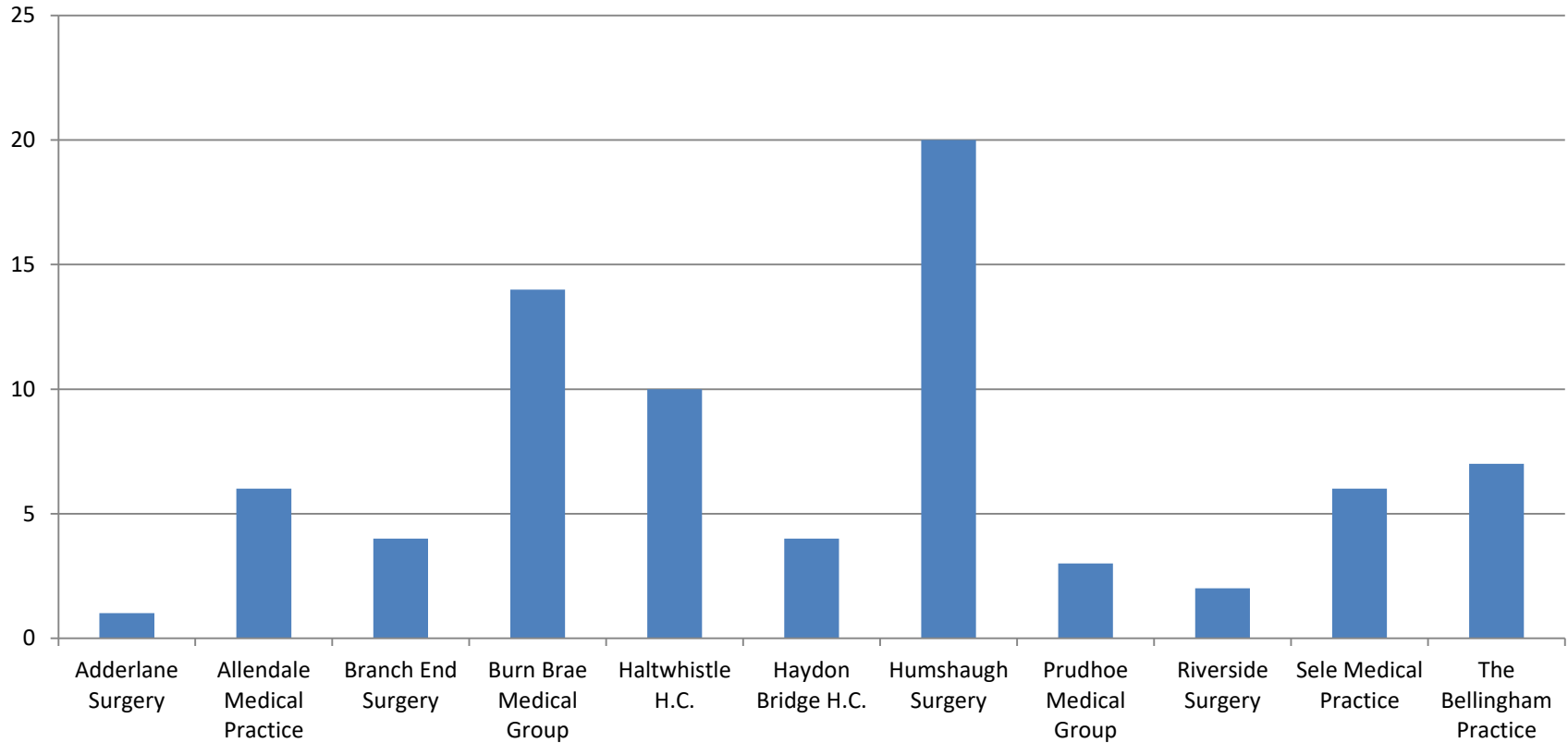
The Launch

- Went “live” from 1/10/11
- Initially 11/13 practices in West N’land
- Practice engagement via locality commissioning meetings
- GP Pack:
 - Northumberland IBS Pathway
 - Background info re FCP
 - Info for patients re sample collection
 - BDS advice sheet
- Subsequent roll-out across Northumberland

Pilot Outcomes

Calprotectin Assays by Practice, October 2011 - June 2012

Total 77 Assays



Pilot Outcomes

Referral for further tests by FCP results

| FCP results | No referral data | Not referred | Referred | Total |
|-------------------|------------------|--------------|------------|-------|
| Green (<30µg/g) | 1 | 39 | 3 | 43 |
| Amber (30-60µg/g) | - | 9 | 4 | 13 |
| Red (>60µg/g) | 2 | 4 | 15 | 21 |
| | 3 (4%) | 52 (67.5%) | 22 (28.5%) | 77 |

Pilot Outcomes

FCP test result by final diagnosis

| FCP result | IBD | Non IBD | Cancer | Total |
|-------------------|--------|----------|--------|-------|
| Green (<30µg/g) | - | 43 | 0 | 43 |
| Amber (30-60µg/g) | - | 13 | 0 | 13 |
| Red (>60µg/g) | 3 | 18 | 0 | 21 |
| | 3 (4%) | 74 (96%) | 0 | 77 |

Pilot Outcomes

- GP Survey April 2012:
 - 19 respondents
 - 18/19 aware of new pathway
 - 11/18 had requested FCP in previous 6 months
 - 11/18 said that FCP had helped with patient management
 - 7/18 (39%) said that referral(s) had been avoided as a result of using FCP

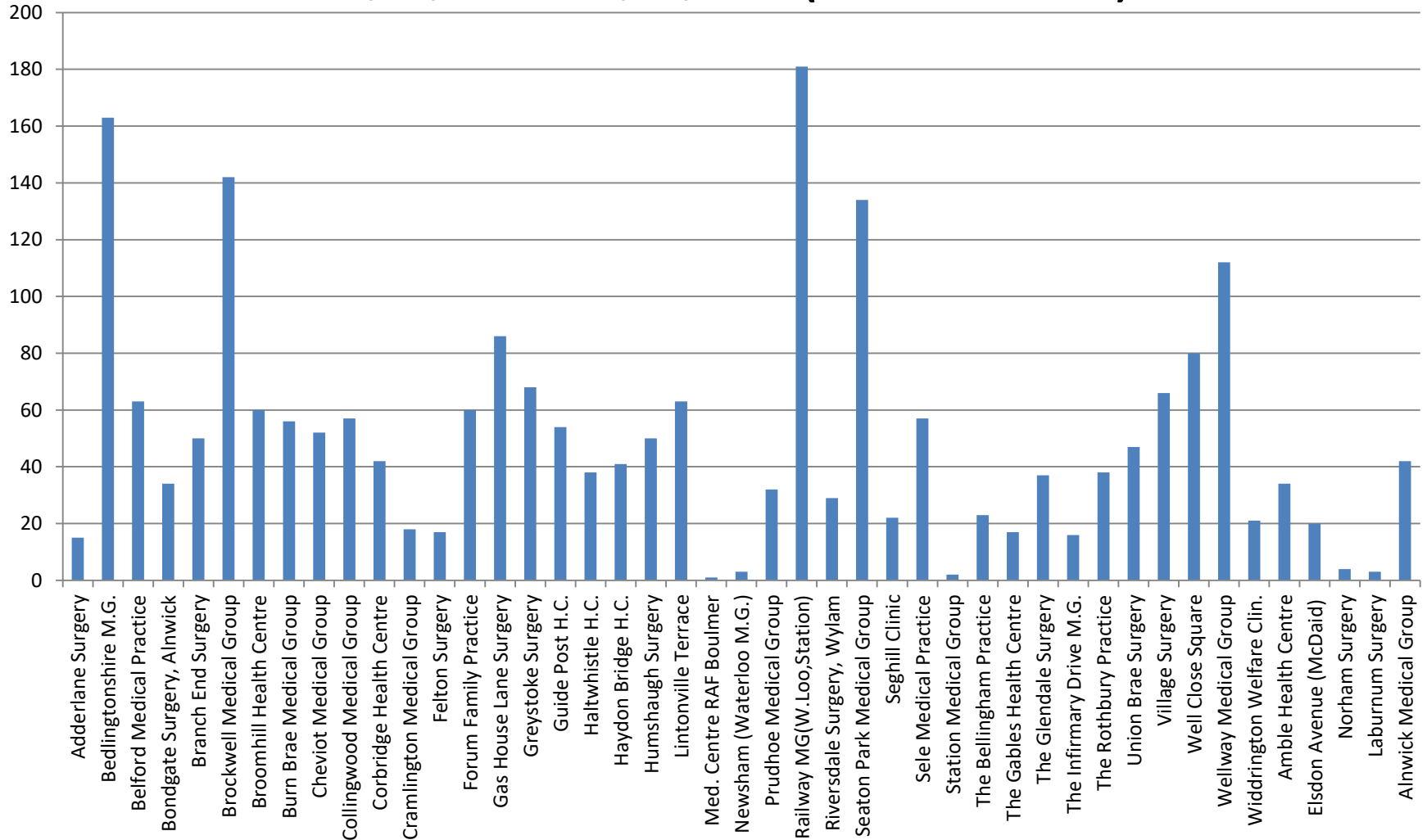
Evaluation

- York Health Economics Consortium
- Comparative evaluation of Northumberland and Durham Dales
- Issues:
 - Difficulty establishing activity and financial baseline – unable to complete full economic evaluation
 - GP deviation from pathway
 - How do you measure what you don't do?

Faecal Calprotectin Assays

Northumberland GP Practices

1/4/17-31/3/18 (Total 2252)



Summary

- Simple, non-invasive test
- Can help to avoid referral and endoscopy in young patients with no “red flag” symptoms
- High negative predictive value demonstrated in Northumberland pilot
- Reduced system costs??