



## Summary of NICE Guidelines

Title	Colorectal cancer prevention: colonoscopic surveillance in adults with ulcerative colitis, Crohn's disease or adenomas
NICE Reference	CG118
Date of Review:	October 2017
Date of Publication	23rd March 2011 (Reviewed February 2014)
Summary of Guidance (Max 250 words)	<p>Adults with inflammatory bowel disease (IBD, including ulcerative colitis and Crohn's disease) or adenomas have higher risk of developing colorectal cancer (CC) than the general population; therefore, surveillance is recommended. Colonoscopic surveillance in people with IBD or adenomas can detect problems early and prevent progression to CC.</p> <p>For patients with IBD, colonoscopic surveillance is offered to people with IBD whose symptoms started 10 years ago and who have ulcerative colitis or Crohn's colitis involving more than one segment of colon. Risk of developing CC can be determined by baseline colonoscopy with chromoscopy and targeted biopsy of abnormal areas, and surveillance can be stratified by risk:</p> <ul style="list-style-type: none"><li>• low: colonoscopy at 5 years,</li><li>• intermediate: colonoscopy at 3 years,</li><li>• high: offer colonoscopy at 1 year.</li></ul> <p>For patients with adenomas, colonoscopic surveillance is considered if adenomas have been removed and risk of developing CC is low, and offered if adenomas have been removed and risk of developing CC is intermediate or high. Surveillance can be stratified by risk:</p> <ul style="list-style-type: none"><li>• low: consider colonoscopy at 5 years,</li><li>• intermediate: offer colonoscopy at 3 years,</li><li>• high: offer colonoscopy at 1 year.</li></ul> <p>Other tests, e.g. computed tomographic colonography (CTC) or double contrast barium enema, should be offered if indicated. Benefits, limitations, and risks of surveillance, as well as preparations needed for the procedure offered, need to be discussed with patients, carers, and family.</p>
Impact on Lab (See below)	<input checked="" type="checkbox"/> None
Lab professionals to be made aware	N/A
Please detail the impact of this guideline (Max 150 words)	This guideline has no impact on laboratory services.

### **Impact on Lab**

- **None:** This NICE guideline has no impact on the provision of laboratory services
- **Moderate:** This NICE guideline has information that is of relevance to our pathology service and may require review of our current service provision.
- **Important:** This NICE guideline is of direct relevance to our pathology service and will have a direct impact on one or more of the services that we currently offer.

**Written by: Dr Gabriele Stakaityte**

**Reviewed by: Dr Rebecca Kift**