**CCO** Cancer Care Ontario

## **ONTARIO CANCER** SCREENING PERFORMANCE REPORT 2016



fold-line

launched in 2008. Program launched in 2000 and ColonCancerCheck established in 1990, the Ontario Cervical Screening programs. The Ontario Breast Screening Program was Cancer Care Ontario has three organized screening

Eligibility Criteria for Ontario's Cancer Screening Programs

Constrained Brogistant         Constrained Brogistant         Constrained Brogistant           Constrained Brogistant         And socue breast symptoms         And socue breast symptoms           Constrained Brogistant         And socue breast symptoms         And socue breast symptoms           Constrained Brogistant         And socue breast symptoms         And socue breast symptoms           Constrained Brogistant         And socue breast implants         And socue breast symptoms           Momen age X4 and older may continue to be screened in the program with Momen age X4 and older may continue to be screened in the program with their healthcare provider.           Momen age X4 and older may continue to be screened in the program with Momen age X4 and older may continue to be screened in the program with their provider intercourse, as well as digital or onal accion about breast and breast symptoms           Momen age X4 and older may continue to be screened in the program with their ORSP)         Ander and		
Contrartio Breast Screening Program (0BSP)Women who are ages 50–74 and have: women age women who are ages 50–74 and have: women age women age 74 and older may continue to be screened in the program with metal metal women age 74 and older may continue to be screened in the program with metal metal metal(OBSP) momen momen momen 	first-degree relatives who have been diagnosed with colorectal cancer, but	
Colonitatio BreastWomen who are ages 50-74 and have:Screening Program (OBSP)• No acute breast symptoms • Nomen age 74 and older may continue to be screened in the program with • Nomen age 74 and older may continue to be screened in the program with • Nomen age 74 and older may continue to be screened in the program with • Screening in crounsged to make a personal decision about breast • Elst into one of the BRCA1 on BRCA2 gene mutation • Have no acute breast symptoms • Have no acute breast don park categories: • Have no acute breast don presonal and tamily history, or • Previously assessed by a genetic clinic as having >25% lifetime risk of • Previously assessed by a genetic clinic as having >25% lifetime risk of • Previously assessed by a genetic clinic as having >25% lifetime risk of • Previously assessed by a genetic clinic as having >25% lifetime risk of • Previously assessed by a genetic clinic as having >25% lifetime risk of • Previously assessed by a genetic clinic as having >25% lifetime risk of • Previously assessed by a genetic clinic as having >25% lifetime risk of • Previously assessed by a genetic clinic as having >25% lifetime risk of • Previously assessed by a genetic clinic as having >25% lifetime risk of • Previously assessed by a genetic clinic as having >25% lifetime risk of • Previously assessed by a genetic clinic as having >25% lifetime risk of • Previously assessed by a genetic clinic	surveillance or inflammatory bowel disease (i.e., Crohn's disease or	
Ontario Breast Screening Program (06SP)Women who are ages 50–74 and have: a Momen who are ages 50–74 and have: a Momen who are ages 50–74 and have: a Mo current breast implantsScreening Program (06SP)- Mo current breast symptoms a Momen who are ages 70–74 and have: a Momen age 74 and older may continue to be screened in the program with their healthcare provider, but they will not be automatically a referral from their primary care provider, but they will not be automatically a referral from their primary care provider, but they will not be automatically brogram With they e a physician's referral brogram (High Program (High Program (High Program (High Previously assessed by a genetic clinic as having ≥25% lifetime tisk of threat decision about breast symptoms the deciver adiation therapy to the chest before age 30 and at least 8 threat decision about breast 30 on previous 30Breast Screening Program (High Previously assessed by a genetic clinic as having ≥25% lifetime tisk of threat decision about breast 30 of threat decision about breast 8 program (High Previously assessed by a genetic clinic as having ≥25% lifetime tisk of threat decision about breast 30 of threat decision about breast 8 threat decision about breast 8<	• No first-degree relative who has been diagnosed with colorectal cancer,	
Ontario Breast Screening Program (OBSP)Women who are ages 50–74 and have: Momen age 74 and older may continue to be screened in the program with Momen age 74 and older may continue to be screened in the program with Momen age 74 and older may continue to be screened in the program with Momen age 74 and older may continue to be screened in the program with Momen age 74 and older may continue to be screened in the program with Momen age 74 and older may continue to be screened in the program with Momen age 74 and older may continue to be screened in the program with Momen age 74 and older may continue to be screened in the program with Momen age 74 and older may continue to be screened in the program with Momen age 74 and older may continue to be screened in the program with Momen age 74 and older may continue to be screened in the program with Momen age 74 and older may continue to be screened in the program with Momen age 74 and older may continue to be screened in the program with Momen who are ages 30–69 and: High Risk OBSP)High Risk Ontario Breast Screening Program (High Program (High) Hisk OBSP)Momen who are ages 30–69 and: Have no acute breast symptoms Have no acute breast symptoms Have no acute breast symptoms Have no acute breast symptoms High Risk OBSP)High Risk OBSP) Brisk OBSP)Momen who are ages 30–69 and: Have no acute breast symptoms High Risk OBSP)High Risk OBSP) Brisk OBSP)Have no acute breast symptoms Have no acute breast symptoms High Risk OBSP)High Risk OBSP) Brisk OBSP)Have no acute breast symptoms Have no acute breast symptoms Have no acute breast symptoms Have no acute breast on thave ever before age 30 a	more normal Pap tests) normal cytology screening history in the previous	
Ontario Breast Screening Program (OBSP)Women who are ages 50–74 and have: a lo acute breast symptoms a lo acute breast symptoms a lo acute breast symptoms a voor the acute breast symptoms b women age 74 and older may continue to be screened in the program with a referral from their primary care provider, but they will not be automatically a referral from their primary care provider, but they will not be automatically b women age 74 and older may continue to be screened in the program with their primary care provider, but they will not be automatically a referral from their primary care provider, but they will not be automatically a referral from their primary care provider, but they will not be automatically b rogram (High Program (High) e Fall into one of the following risk categories: a referral f on acute breast symptoms e First-degree relative of a mutation carrier, has had genetic counselling f ifract-degree relative of a mutation carrier, has had genetic counselling f high Bisk OBSP)Risk OBSP) B Risk OBSP)- Fall into one of the following risk categories: a referral f on acute breast symptoms e First-degree relative of a mutation carrier, has had genetic counselling p rogram (High) e First-degree relative of a mutation carrier, has had genetic counselling f high Bisk OBSP)Program (BSP) B Risk OBSP)- Fall into one of the following risk categories: a referral f on acute breast symptoms e First-degree relative of a mutation carrier, has had genetic counselling p reast cancer based on personal and family history, or b reast cancer based on personal and family history, or b reast cancer based on personal and family history, or b reast cancer based on personal and family history, or b reast cancer based on personal and family b risk of b or b reast cancer based on personal and family b	includes intercourse, as well as digital or oral sexual activity involving the genital area with a partner of either sex. Women who are not sexually active	Screening Program
Ontario Breast Screening Program (OBSP)Women who are ages 50–74 and have: Moersonal history of breast symptoms 	<ul> <li>First-degree relative of a mutation carrier, has had genetic counselling</li> <li>and has declined genetic testing</li> <li>Previously assessed by a genetic clinic as having ≥25% lifetime risk of breast cancer based on personal and family history, or</li> <li>Received radiation therapy to the chest before age 30 and at least 8</li> </ul>	
Ontario BreastWomen who are ages 50–74 and have:Screening Program Screening Program (OBSP)• No acute breast symptoms • No current breast implants• No personal history of breast cancer • No current breast implants• No erusent breast cancer • No current breast implants• Women age 74 and older may continue to be screened in the program with a referral from their primary care provider, but they will not be automatically recalled. They are encouraged to make a personal decision about breast	• Have a physiciar's referral • Have no acute breast symptoms • المعام المعامين • Have no acute breast	Breast Screening Program (High
Ontario Breast Screening Program (OBSP) • No personal history of breast cancer • No personal history of breast cancer • No current breast implants	a referral from their primary care provider, but they will not be automatically recalled. They are encouraged to make a personal decision about breast	
Ontario Breast Screening Program (OBSP) • No personal history of breast cancer	Anon ۲۲ کا ان الم	
Ontario Breast Women who are ages 50–74 and have: Screening Program • No acute breast symptoms (OBSP)		
Ontario Breast Women who are ages 50–74 and have:		
civotiva utilidinila merpora princera?	Eligibility criteria	Screening program

".difeant health." of the most important things a person screening test at the right time is one saved my life. Getting the right without early detection. Screening aldissoqmi naad aved bluow anin chance of surviving five years let alone were found in my left breast. My tumours with two separate origins owt ,mergommem anilased e ratte regarding screening. Nine years ago " It is important to be proactive

Debora P.B., Patient and Family Advisor



## Working together to create the best health

620 University Avenue Toronto, ON M5G 2L7 416.971.9800 publicaffairs@cancercare.on.ca cancercare.on.ca

fold-line





fold-lin

## A SNAPSHOT OF SCREENING

# Trends, insights and future directions in cancer screening

As Ontario's advisor on cancer prevention and care, Cancer Care Ontario designs, plans, implements and evaluates three province-wide screening programs. The following is a summary of the key findings and future directions for each of our programs.

### **Ontario Breast Screening Program (OBSP)**

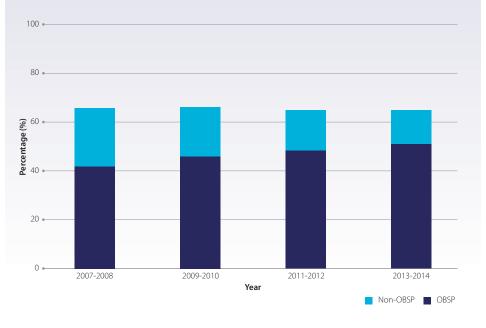
#### **KEY FINDING**

The proportion of women screened in the OBSP has increased year-overyear since 2011.

#### **FUTURE DIRECTIONS**

Cancer Care Ontario has identified bringing non-OBSP sites into the OBSP as a priority; ensuring that all eligible women receive the benefits of an organized breast cancer screening program.

Ontario Breast Screening Program (OBSP) and non-OBSP breast cancer screening (mammogram) participation: age-adjusted percentage of Ontario women, ages 50–74, who completed at least 1 mammogram within a 30-month period, 2007–2014



### ColonCancerCheck (CCC)

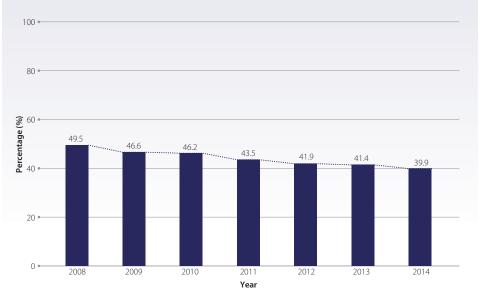
#### **KEY FINDING**

fold-line

The proportion of Ontarians who were overdue for colorectal cancer screening has declined (improved) annually since 2008.

#### **FUTURE DIRECTIONS**

CCC is transitioning from guaiac fecal occult blood test (gFOBT) to the fecal immunochemical test (FIT) as the recommended primary screening test for people at average risk of developing colorectal cancer. FIT is expected to increase colorectal cancer screening participation because it is an easier test to use than gFOBT and has greater sensitivity for detecting colorectal cancer and advanced adenomas.



Age-adjusted percentage of Ontarians, ages 50–74, who were overdue for colorectal cancer screening in a calendar year, 2008–2014

### **Ontario Cervical Screening Program (OCSP)**

#### **KEY FINDING**

Participation in cervical cancer screening has declined since 2011, which may be related to changes in screening guidelines which extended the recommended screening interval from annually to once every three years.

### FUTURE DIRECTIONS

Cancer Care Ontario is working with the Ministry of Health and Long-Term Care to explore the feasibility of HPV testing as the primary screening test for cervical cancer in Ontario. HPV testing provides greater protection against cervical cancer than the Pap test because it is able to detect persistent, high-grade abnormalities earlier.

Age-adjusted percentage of Ontario women, ages 21–69, who had at least 1 Pap test within a 42-month period, by Local Health Integration Network (LHIN), 2003–2014

100 •		
90 •		
80 •		
70 •		

