



Subject:	Motion : Bowel and Breast Cancer Screening - Response from Permanent Secretary
Date:	21st February, 2020
Reporting Officer:	John Walsh, City Solicitor
Contact Officer:	Jim Hanna, Senior Democratic Services Officer

Restricted Reports	
Is this report restricted?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
If Yes, when will the report become unrestricted?	
After Committee Decision	<input type="checkbox"/>
After Council Decision	<input type="checkbox"/>
Sometime in the future	<input type="checkbox"/>
Never	<input type="checkbox"/>

Call-in	
Is the decision eligible for Call-in?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>

1.0	Purpose of Report/Summary of Main Issues
1.1	To consider a response from the Permanent Secretary, Department of Health, to a motion on Bowel and Breast Cancer Screening which was passed by the Council at its meeting on 2nd December.
2.0	Recommendation
2.1	The Committee is requested to <ul style="list-style-type: none">• consider the response and take such action thereon as may be determined.
3.0	Main Report
3.1	At the Council meeting on 2nd December, the following motion, which was proposed by Councillor Canavan and seconded by Councillor S. Baker, was passed: “This Council notes that early diagnosis of bowel cancer and breast cancer offers patients the best chance of successful treatment.

England, Scotland, Wales and Ireland all currently use the more accurate screening test, the Faecal Immunochemical Test (FIT) for bowel cancer and have a lowered age for screening.

NHS England is currently trialling breast cancer screening at the lower age of 47 and the upper age of 72.

This Council agrees to write to the Permanent Secretary, Department of Health, highlighting the difference in the screening service provision across Britain and Ireland and calling for the extension of the age range for bowel screening and to trial breast cancer screening at a lower age in the North of Ireland.”

3.2 A response has now been received from the Permanent Secretary, a copy of which is attached.

3.3 The Permanent Secretary explains that the Northern Ireland Bowel Cancer Screening Programme currently covers all men and women between the ages of 60 and 74. In relation to the further development of the Programme, the Northern Ireland Screening Committee has recommended a phased approach involving, firstly, the replacement of the Faecal Occult Blood test with the Faecal Immunochemical Test, which has a better performance in terms of participation rates, and, secondly, giving consideration to offering screening from the age of 50. The move to Faecal Immunochemical Testing is due to take place early this year and, once completed, the extension of the age range for bowel screening will be considered. In view of these developments, there is, therefore, no plans to undertake a review of bowel screening at this time.

3.4 The Permanent Secretary then provides details of the Northern Ireland Breast Screening Programme. He explains that, in line with the recommendations of the UK National Screening Committee, women between the ages of 50 and 70 are invited for screening every three years. Those over the age of 70 are able to self-refer every three years by contacting their local screening centre. Breast screening is not, however, offered to women under the age of 50, as their risk of developing breast cancer is deemed to be lower and their mammograms tend to be more difficult to interpret, thereby leading to false positive results, anxiety and unnecessary biopsies. He adds that, in April, 2013, the Northern Ireland Breast Screening Programme assumed responsibility for the surveillance screening of women with a higher risk of breast cancer and that women from the age of 20 upwards were now included in the Programme.

3.5	<p>He goes on to provide details of a National Health Service Breast Screening Programme 'Age X' trial which is running currently in England. The trial, which will conclude in 2026, offers some women an extra screen between the ages of 47 and 49 and another between the ages of 71 and 73, with a view to determining if extending the age range reduces deaths from breast cancer. More than five million women will be selected over the course of the trial to receive additional or usual screening, with such a large number being required to ensure that the research will produce reliable results for informing future screening policy.</p>
3.6	<p>He points out that a major research trial, such as Age X, will not be given approval unless there are enough participants to produce reliable results. Given the number of women in the relevant age groups, a separate research trial for Northern Ireland would not be considered, as it would be unable to produce sufficiently reliable information to inform future policy.</p>
3.7	<p>The Permanent Secretary concludes by stressing that the screening tests do not provide a guarantee that all cancers will be detected early or prevented and that it is important that people are aware of warning signs or symptoms and act promptly by contacting their GP with any concerns.</p>
3.8	<p><u>Financial and Resource Implications</u> None associated with this report.</p>
3.9	<p><u>Equality or Good Relations Implications/Rural Needs Assessment</u> None</p>
4.0	<p>Appendices - Documents Attached</p>
	<p>Appendix 1 - Response from Permanent Secretary, Department of Health</p>