Computed tomographic colonography (virtual colonoscopy)

Health Technology Advisory Committee

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Authors' objectives
This report aims to assess the effectiveness of computed tomographic colonography (virtual colonoscopy) in the diagnosis of colorectal cancer.

Authors' conclusions
Computed tomographic colonography (CTC) is a safe procedure.

Further research is needed before CTC can be recommended as a screening tool. The sensitivity and specificity of CTC needs to improve to be comparable to that of colonoscopy.

At its current stage of development, CTC is useful in patients: - who are unable to complete colonoscopy or double contrast barium enema; - who are at an increased risk of perforation; - for viewing extracolonic tissues and organs; and - for preoperative colorectal cancer staging.

CTC is not cost effective compared to colonoscopy. Current research indicates sensitivity and specificity rates of CTC need to improve. Additionally, there is a significant operator learning curve that impacts the cost-effectiveness in terms of time and experience needed to interpret the images.

Positive CTC test results will require additional procedure(s). Patients will need additional time away from work and will require another colon preparation.

Compliance for colorectal cancer screening is poor. Medical professionals need to better educate patients about screening options since early detection improves morbidity and mortality rates.

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