

News Release

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CANCER SCREENING PROGRAMS SHOULD CAST WIDER NET, AUDITOR GENERAL SAYS

(TORONTO) While Cancer Care Ontario (CCO) has established three good cancer screening programs, it needs to increase their overall participation rates, Auditor General Jim McCarter says in his 2012 Annual Report.

"Rates of mortality from breast, colorectal and cervical cancer have fallen in Ontario over the last 20 years, but participation in CCO's screening programs for these diseases is falling short of targets set by the agency," McCarter said today following the release of the Report. "In Ontario, more than half the targeted population remains unscreened for colorectal cancer," he added.

The Ministry of Health and Long-Term Care and CCO have recognized the need to increase screening participation rates, especially for people considered to be at an increased risk for cancer. As of the 2009/10 fiscal year, participation in breast cancer and cervical cancer screening achieved Ministry targets but fell short of CCO's own targets. Colorectal cancer screening fell short of both the Ministry's and CCO's targets.

Following are some of the Auditor General's other significant findings:

- Women considered at average risk for breast cancer waited up to 10½ months for mammography screening, records at CCO regional offices showed. In its program that targets women at increased risk, CCO found that wait times for genetic assessment to confirm whether they qualified for both a breast MRI and mammography averaged 84 days.
- Almost 30% of the people in the colorectal screening program did not have the recommended follow-up colonoscopies within the benchmark time established by CCO. A review of hospital records found instances where wait times were as long as 72 weeks for people with family histories and 17 weeks for those with positive Fecal Occult Blood Test results.
- CCO noted that though older women are at greater risk of dying of cervical cancer, they were screened at a much lower rate than younger women, possibly because the screening often takes place at the same time as other procedures done more regularly for younger women, like annual health exams, contraception counselling and screening for sexually transmitted infections.

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