What is FIT?

The Quantitative Faecal Immunochemical Test is a test to detect hidden or 'occult' blood in stool samples.

Unlike older FOB tests, FIT uses antibodies that specifically recognise human haemoglobin and so there is no need for patients to undergo dietary restriction prior to using the test.

As it is antibody based, FIT is a more sensitive and specific test than the guaiac test, which most GPs would know as the old FOB test and reduces the chances of false positives.

Which patients are eligible for FIT?

The NICE Guideline for Suspected Cancer (NG12) 2015 recommends that faecal occult blood tests should be offered to adults without rectal bleeding who were classed as "low risk, but not no risk" of having colorectal cancer. These are patients who:

- are aged 50 or over with unexplained abdominal pain or weight loss or
- are aged under 60 with changes in their bowel habit or iron-deficiency

anaemia or

• are aged 60 or over and have anaemia without iron deficiency.

NICE published further guidance in July 2017 (DG30) which confirms that FIT is the faecal occult blood test of choice for this group of patients.

DG30 guidance encourages use of the test for any patient with abdominal symptoms who doesn't fit the NG12 2WW criteria.

How does the FIT test differ from the FOBt?

- For FIT only a single sample is required compared to two samples from three bowel motions.
- FIT specifically measures human haemoglobin (Hb) rather than any other blood in the diet.
- FIT has a high negative predictive value (0.05%) therefore a negative result makes colorectal cancer unlikely.
- FIT will reduce the need for repeat tests.

If the FIT test result is > or = 10 ug Hb/g faeces: The GP should consider a Lower GI 2 week wait referral for suspected cancer. The referral form has been updated to include a FIT test result.

If the test result is < 10 ug Hb/g faeces: Although a negative FIT test should give a very high degree of confidence of the absence of a cancer, it is important to note that a negative test result cannot absolutely rule out colorectal cancer as occasionally tumours do not bleed, or bleed intermittently.

FIT negative patients have an extremely low risk of both colorectal cancer, or of high risk adenoma. The patient therefore does not need referral for suspected colorectal cancer, but as always the GP should consider seeking specialist advice if worrying symptoms persist and safety net the patient.