

Please read through the following information carefully

It is important that you have a clear understanding of the qFIT (bowel cancer test), including the benefits and limitations, before deciding to proceed.

What is bowel cancer?

Bowel (colorectal) cancer often receives less public attention than some other types of cancer, yet it remains a major health concern in the UK. Each year, there are around 44,100 new bowel cancer cases, making up about 11% of all new cancer diagnoses, and it is the fourth most common cancer in the country (Cancer Research UK). Early diagnosis is critical: survival rates are much higher when the disease is caught before it spreads. The qFIT (quantitative Faecal Immunochemical Test), used by NHS screening programmes, is an effective non invasive test that can detect hidden blood in stool samples, helping to flag early signs of bowel cancer before symptoms develop (NHS England).

Positive test result

If your FIT (Faecal Immunochemical Test) result is positive, it means that traces of blood were detected in your stool sample. However, this does not necessarily mean you have bowel cancer. Blood in the stool can be caused by a number of conditions, such as haemorrhoids or bowel polyps. It is important to speak to your GP, who may refer you to a specialist for further assessment. This could include additional investigations, such as a colonoscopy (a camera examination of the bowel), to determine the cause of the bleeding.

Like all medical tests, the FIT test can sometimes produce false positive results, where blood is detected even though no serious condition is present. While this may lead to unnecessary anxiety or further procedures, each with their own risks, it is an important step in identifying conditions early. A positive result can also indicate the presence of bowel polyps, which are usually harmless but can increase the risk of developing bowel cancer in the future. In such cases, regular monitoring through a surveillance programme involving periodic colonoscopies may be recommended to reduce that risk.

If you have a family history of bowel cancer, especially if a parent or sibling was diagnosed under the age of 50 or multiple family members affected and you receive a positive (amber or red) FIT result, your risk may be higher than average. It is therefore especially important to speak to a GP as you may be eligible for referral to a genetic or high risk assessment service, and a different testing or monitoring pathway may be recommended.

Negative test result

If your FIT (Faecal Immunochemical Test) result is negative, this does not necessarily rule out bowel cancer or mean that you will never develop it in the future. Some individuals with bowel cancer may not have blood detected in their stool using the FIT test. For this reason, a negative result should always be interpreted with caution, especially if you are experiencing symptoms that could be linked to bowel cancer.

These may include unexplained weight loss, persistent stomach pain, discomfort or swelling, changes in bowel habits such as looser or more watery stools, extreme tiredness without a clear cause, or visible blood either mixed with your stool, on the toilet paper, or in the toilet pan after a bowel movement. If you notice any of these symptoms, it is important to speak to your GP without delay.

Additionally, if you have a strong family history of bowel cancer, especially if a parent or sibling was diagnosed under the age of 50 or multiple family members affected, you should seek advice from your GP even if your FIT result is negative. In such cases, you may be eligible for referral to a genetic or high risk assessment service, and a different testing or monitoring pathway may be recommended.