

Multicentre randomised trial of 'once only' flexible sigmoidoscopy screening for prevention of bowel cancer morbidity and mortality

Submission date 06/04/2000	Recruitment status No longer recruiting	<input type="checkbox"/> Prospectively registered <input checked="" type="checkbox"/> Protocol
Registration date 06/04/2000	Overall study status Ongoing	<input type="checkbox"/> Statistical analysis plan <input checked="" type="checkbox"/> Results
Last Edited 25/06/2025	Condition category Cancer	<input type="checkbox"/> Individual participant data

Plain English summary of protocol

Background and study aims

Bowel cancer is the fourth most commonly diagnosed cancer in the UK. Bowel cancers develop slowly from common bowel growths or polyps, so removing them can help prevent cancer. Screening with flexible sigmoidoscopy (also called 'bowel scope' or Flexi-scope) involves insertion of a thin flexible tube with a light and camera on the end into the bowel to examine the inner surface. Small bowel polyps can be removed during screening. The aim of the UK Flexible Sigmoidoscopy Screening Trial (UKFSST) was to determine whether having just one flexible sigmoidoscopy screen at around 60 years of age could prevent bowel cancer from developing and reduce the number of deaths from bowel cancer. The trial also aimed to determine how long any benefit lasts, and what is the best age to do the screening examination.

Who can participate?

Men and women who were aged 55–64 years and registered at a participating GP practice between November 1994 and March 1999.

What does the study involve?

The UKFSST was a randomised controlled trial. People who participated in the trial were randomly assigned to receive either flexible sigmoidoscopy screening or no screening (which was the usual care offered at the time of the trial).

What are the possible benefits and risks of participating?

Potential benefits of participating in the UKFSST included the possibility of being assigned to screening and having polyps detected and removed. Possible risks included adverse physical and psychological effects associated with the screening procedure and screening results. Individuals who participated in the trial but who were not assigned to screening received usual care and so were not worse off for having participated.

Where is the study run from?

The UKFSST recruited people from 506 GP practices that served 14 UK hospitals: 11 in England, two in Wales, and one in Scotland. Flexible sigmoidoscopy screening was done in endoscopy clinics at the hospitals.

When is the study starting and how long is it expected to run for?

Recruitment for the study and flexible sigmoidoscopy screening started in November 1994 and was completed in March 1999. The researchers have been following the participants since then, and will continue to follow them through 2024. The data will then be analysed and results written up, and the study will be completed by the 31st March 2027.

Who is funding the study?

National Institute for Health Research (NIHR) Health Technology Assessment (HTA) Programme (UK)

Who is the main contact?

Dr Amanda J Cross

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Study website

<http://www.csprg.org.uk/ukfsst/>

Contact information

Type(s)

Scientific

Contact name

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Additional identifiers

EudraCT/CTIS number

IRAS number

ClinicalTrials.gov number

Secondary identifying numbers

G9615910

Study information

Scientific Title

Multicentre randomised trial of 'once only' flexible sigmoidoscopy screening for prevention of bowel cancer morbidity and mortality

Acronym

UKFSST

Study objectives

Primary aims:

1. To quantify the reduction in incidence and mortality
2. To determine the duration of efficacy of a single flexible sigmoidoscopy
3. To determine the optimum age for the examination
4. To evaluate health service research implications to permit an informed decision at the end of the trial about the suitability for implementation within a national screening programme

The criteria to be evaluated include:

1. Uptake, acceptability and impact
2. Quality control of the procedure
3. Cost-effectiveness

Ethics approval required

Old ethics approval format

Ethics approval(s)

South East MREC, ref: MREC/03/1/002

Study design

Randomised controlled trial

Primary study design

Interventional

Secondary study design

Randomised controlled trial

Study setting(s)

GP practice

Study type(s)

Screening

Participant information sheet

Not available in web format, please use the contact details to request a patient information sheet

Health condition(s) or problem(s) studied

Colorectal cancer

Interventions

'Once only' flexible sigmoidoscopy screening/control

Intervention Type

Other

Phase

Not Applicable

Primary outcome measure

Incidence, mortality from colorectal cancer

Secondary outcome measures

Psychological morbidity, costs to the NHS

Overall study start date

01/07/1995

Completion date

31/03/2027

Eligibility**Key inclusion criteria**

All 55-64 year old men and women from selected general practices

Participant type(s)

Patient

Age group

Adult

Sex

Both

Target number of participants

Recruitment closed after randomising over 170,000 people

Total final enrolment

167882

Key exclusion criteria

1. If incapable of providing informed consent
2. Patients with a personal or family history of bowel cancer (greater than two family members)
3. A recent sigmoidoscopy or colonoscopy
4. Severe illness or life expectancy of less than 5 years

Date of first enrolment

01/07/1995

Date of final enrolment

28/02/2014

Locations

Countries of recruitment

England

United Kingdom

Study participating centre

Imperial College London

London

United Kingdom

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Sponsor information

Organisation

Medical Research Council (MRC) (UK)

Sponsor details

20 Park Crescent

London

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+44 (0)20 7636 5422

clinical.trial@headoffice.mrc.ac.uk

Sponsor type

Research council

Website

<http://www.mrc.ac.uk>

Funder(s)

Funder type

Research council

Funder Name

Medical Research Council (MRC) (UK)

Alternative Name(s)

Medical Research Council (United Kingdom), UK Medical Research Council, MRC

Funding Body Type

Government organisation

Funding Body Subtype

National government

Location

United Kingdom

Results and Publications

Publication and dissemination plan

Publications of secondary endpoint analyses and further follow-up of the cohort are planned in high-impact peer reviewed journals between 2019 and 2028.

Intention to publish date

31/03/2028

Individual participant data (IPD) sharing plan

The datasets generated during and/or analysed during the current study are not expected to be made available due to the terms and conditions of the data sharing agreements the researchers hold with third party data providers and their section 251 approval. However, anonymised, aggregated data may be made available upon application to the CSPRG: <https://www.csprg.org.uk/patient-data/> and <https://www.csprg.org.uk/contact-us/>.

IPD sharing plan summary

Not expected to be made available

Study outputs

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
Results article	baseline results	13/04/2002		Yes	No
Results article	results	01/03/2003		Yes	No
Results article	results	08/05/2010		Yes	No
Results article	results	01/04/2017		Yes	No
Results article	results	01/10/2018		Yes	No
Results article	results	01/03/2019		Yes	No

Basic results		15/03/2019	26/03/2019	No	No
Other publications	Between-center variation in adenoma detection rates	01/05/2004	05/05/2022	Yes	No
Other publications	Patient-reported outcomes following flexible sigmoidoscopy screening	01/12/2012	05/05/2022	Yes	No
Other publications	Uptake of Flexible Sigmoidoscopy at 14 months	20/09/2015	05/05/2022	Yes	No
Other publications	efficacy and acceptability of two methods of self administered bowel preparation for flexible sigmoidoscopy screening	03/06/2000	05/05/2022	Yes	No
Other publications	pilot examining rates of attendance, yield of neoplasia, and adverse effects	01/04/1998	05/05/2022	Yes	No
Other publications	uptake of population-based, flexible sigmoidoscopy screening	21/07/2010	05/05/2022	Yes	No
Protocol article	trial design	01/09/2001	05/05/2022	Yes	No
Results article	Associations between Adenoma Detection Rates and Long-Term Colorectal Cancer Incidence and Mortality	12/09/2020	05/05/2022	Yes	No
Other publications	15-Year Benefits of Sigmoidoscopy Screening on Colorectal Cancer Incidence and Mortality : A Pooled Analysis of Randomized Trials	01/11/2022	14/11/2023	Yes	No
Results article	21-year follow-up	19/07/2024	23/07/2024	Yes	No
Other publications	secondary, observational analysis	23/06/2025	25/06/2025	Yes	No