New, Non-Invasive Test Could Help with Early Detection of Colorectal Cancer

A simple, painless test that can be performed in a doctor’s office to screen for early-stage colorectal cancer is in development at IMI with what researchers say is high prospects for success.

TORONTO, Canada (PRWEB) February 22, 2005 -- Colorectal cancer is currently one of the deadliest forms of cancer but also one of the most treatable if caught early. There are diagnostic tests on the market today but they typically require extensive patient preparation and invasive procedures and often deliver inconclusive results.

IMI International Medical Innovations (IMI), a predictive medicine company, may have the answer. A simple, painless test that can be performed in a doctor’s office to screen for early-stage colorectal cancer is in development at IMI with what researchers say is high prospects for success.

Clearly, an affordable, easy-to-use initial screen for early-stage colorectal cancer is urgently needed, says Dr. Michael Evelegh, head of regulatory and clinical affairs at IMI.

Recent data presented at the American Association for Cancer Research (AACR) showed that IMI’s novel test, ColorectAlert®, detected more than half of all early-stage cancers and had five times fewer false positives than fecal occult blood tests (FOBTs), currently the leading method of screening. IMI is currently planning a major, multi-site prospective trial that is expected to generate definitive data to support ColorectAlert®'s effectiveness as a screening tool.

ColorectAlert® works by identifying a cancer-associated sugar in a sample of mucus collected by the physician during a routine digital rectal exam. No blood or stool sample is needed. And since the test sample is obtained directly by the physician rather than by the patient, ColorectAlert® should contribute to improved patient compliance.

Studies have shown that FOBTs are largely ineffective at detecting this disease, with estimates of sensitivity for early-stage cancer ranging anywhere from 5% to 50%. While FOBT has certainly saved lives, compliance is a major issue as most patients do not want to collect a stool, says Evelegh. DNA-based tests likewise require the patient to collect the sample and are likely to be too expensive for use as a front-line screening test. Another alternative, colonoscopy, successfully detects cancer but is complex, highly expensive and invasive. ColorectAlert® could become the gatekeeper test that stratifies the population into low-risk and higher-risk groups, enabling physicians to make better use of colonoscopy and other tools.

Colorectal cancer is the third deadliest cancer in North America it claimed 65,000 lives in 2004. It is 90 percent curable when detected in the early stages, but only 38 percent of colorectal cancers are.

Experts recommend regular testing for anyone over 50. Only half of those who should get regularly screened for colorectal cancer do. ColorectAlert® could change that reality and help take this form of cancer off the list of deadly diseases.

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