

Ref: FOI/GS/ID 4456

**Please reply to:**  
FOI Administrator  
Trust Management  
Maidstone Hospital  
Hermitage Lane  
Maidstone  
Kent  
ME16 9QQ

Email: mtw-tr.foiadmin@nhs.net

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### **Freedom of Information Act 2000**

I am writing in response to your request for information made under the Freedom of Information Act 2000 in relation to Lynch Syndrome testing.

- 1. Do you test newly diagnosed bowel cancer patients in your trust (either contracted or referred) for molecular features of Lynch syndrome using either immunohistochemistry or microsatellite instability testing?*
- 2. If yes, at what stage does this testing take place?*
- 3. Is this test carried out as a reflex test i.e. automatically or upon referral?*
- 4. In their published adoption support resource NICE suggest identifying a named 'clinical champion' within each colorectal multidisciplinary team to effectively implement testing people for molecular features for Lynch syndrome. Is this established in your trust?*
- 5. Do you audit diagnostic outcomes within your trust to ensure that every patient is tested for molecular features for Lynch syndrome?*
- 6. Have you had to submit a business case for funding in order to effectively implement this new guidance?*
- 7. If no such testing is in place, do you have information on whether there are any plans to introduce molecular testing for Lynch syndrome as per NICE guidance?*
- 8. What are the main barriers you have faced if no molecular testing or only selected testing is performed? Please specify.*

1. Yes – everyone under the age of 50 (and according to morphology Bethesda criteria)

2. Post treatment i.e. test is carried out on the tumour resection specimen only.

3. Reflex  
Referral via MDT (for those outside of criteria)

4. No

5. No

6. Business case is being prepared

7. It is being assessed but is a significant cost pressure with no additional central funding

8. Financial  
Staff resources