



## Correspondence

## RE: Straight-to-test faecal tagging CT colonography for exclusion of colon cancer in symptomatic patients under the English 2-week-wait cancer investigation pathway: a service review. A reply



*Sir* — We thank Laverty *et al.* for their correspondence and congratulations in response to our work.<sup>1</sup> Please accept our apologies for the discrepancy in polyp categorisation. The revised polyp data in line with National Bowel Cancer Screening programme, the European Society of Gastrointestinal and Abdominal Radiology (ESGAR) consensus guidelines<sup>2</sup> and other published studies is as follows<sup>3,4</sup>: the total polyp detection rate was 13.5% (241 polyps) in 170 patients; 153 (63.5%) polyps were  $\geq 10$  mm in size compared to 88 (36.5%) measuring between 6–9 mm. In this symptomatic cohort,  $\geq 60$  years of age polyps  $\leq 5$  mm were only reported if there were three or more, there were no cases where three or more polyps at  $\leq 5$  mm were reported.

We now have 36 months of follow-up data for the patients enrolled in January 2016, decreasing to 24 months for the patients scanned in December 2016; currently, we have had no recorded interval colonic cancers in this patient cohort.

### Conflict of interest

The authors declare no conflict of interest.

### References

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J.A. Stephenson, J. Pancholi, C.V. Ivan, J.H. Mullineux, H. Patel,  
R. Verma, M. Elabassy\*  
University Hospitals of Leicester, Leicester General Hospital,  
Leicester, UK  
E-mail address: [mosheir.elabassy@uhl-tr.nhs.uk](mailto:mosheir.elabassy@uhl-tr.nhs.uk) (M. Elabassy)