

Freedom of Information request on the use of mismatch repair (MMR) testing for Lynch syndrome

In 2014 guidelines from the Royal College of Pathologists were issued requiring all people under the age of 50 to be reflex tested for mismatch repair deficiency. 'MMR status has prognostic significance, possible predictive significance and can help detect Lynch syndrome families.'

Under the Freedom of Information Act 2000, Bowel Cancer UK is requesting the following information relating to how your trust is meeting the above guideline.

1. Do all patients, who are diagnosed with bowel cancer under the age of 50 years in your trust, have a molecular screening test for Lynch Syndrome, such as immunohistochemistry or microsatellite instability testing, carried out on tumour tissue?

- Yes (testing is carried out in ALL patients irrespective of age at diagnosis)
 No

2. If yes, at what stage does this testing take place? Does it take place:

- Pre treatment i.e. at diagnosis (on a biopsy of the tumour)
 Post treatment i.e. test is carried out on the tumour resection specimen

3. Is this test carried out as a reflex test i.e. automatically or upon referral?

- Reflex
 Referral via MDT
 Referral via Genetics Centre
 Referral via GP
 Other (please explain)

4. Which of the following molecular tests does your trust use to identify people who could have Lynch syndrome:

- Microsatellite Instability (MSI)
 Immunohistochemistry (IHC)
 BRAF and MLH1
 Other

5. Are the results of this reflex test communicated to the patient?

- Yes (all abnormal results are communicated, along with the need for a genetics referral)
 No

6. If no such reflex test is in place, do you have information on whether there are any plans to introduce molecular testing for Lynch syndrome? N/A