

中文題目：大便檢測方法的比較

英文題目：Comparison of guaiac-based and quantitative immunochemical fecal occult blood testing in Taiwan

作者：歐吉性¹ 許文鴻^{1,2} 陳藝祐^{1,3} 黃郡儀¹ 黃孟娟⁴ 胡晃鳴¹ 謝建台⁵
郭昭宏^{1,6,7*}

服務單位：高雄醫學大學附設醫院 胃腸內科¹ 營養部⁴ 癌症中心⁷

高雄市立小港醫院 內科²

高雄市立大同醫院 內科³

中山大學 化學系⁵

高雄醫學大學 醫學系⁶

Background: The purpose of this study was to determine whether immunochemical fecal occult blood test (FOBT) (qFIT) has better performance characteristics than the standard guaiac-based FOBT (GT) for identifying advanced colorectal neoplasia (ACRN) in average-risk populations in Taiwan.

Methods: Totally four hundred and forty three average-risk patients were selected from outpatient department of Kaohsiung Medical University Hospital, all of them were undergoing screening colonoscopy and provided stool samples for fecal blood test. Stool specimens were applied to a hemoccult II test card and OC-SENSA MICRO sampling probes at the same time. We measured the diagnostic value of the qFIT for detecting an ACRN by using four criteria: sensitivity, specificity, positive predictive value, negative predictive value and accuracy.

Results: The sensitivity and positive predictive value of the qFIT was higher than that of the GT for cancer or advance adenoma. The sensitivity, specificity, positive predictive value, negative predictive value and accuracy of the GT for detecting ACRNs were 7.4%, 84.1%, 2.9% , 93.3% and 79.5% respectively. Using the 100 ng/ml cut point, the sensitivity and specificity of the qFIT for detecting advanced adenomas and cancer were 29.6%, 95.0%, 27.6%, 95.4% and 91.0%, respectively. The accuracy of qFIT was higher than GT significantly(P<0.05)

Conclusions: The qFIT provides a higher sensitivity, positive predictive value and accuracy for detecting advanced adenoma and cancer than the GT, and has an acceptable specificity that significantly reduces the need for colonoscopic evaluation in the screened population.