Provincial Iron Deficiency Anemia (IDA) Pathway for Colorectal Cancer Diagnosis

1. Signs of IDA
(**Both** must be present to meet criteria for high risk iron deficiency anemia)
- Anemia:
Hb < 130 g/L in men
Hb <120 g/L in women

AND
- Iron Deficiency:
Serum ferritin below lower limit of normal

2a. Rule out celiac disease
- TTG blood test (anti-transglutaminase antibody): negative (past 5 years or current)

AND/OR
- Prior normal duodenal endoscopic biopsy (taken during gastroscopy

b. Address Gynecology causes
- Heavy menstruation

(See 'Rule out Other Causes' link above for detailed guidance)

3. is there high risk rectal bleeding?
(ALL must be present to meet criteria for high risk rectal bleeding)
- Blood visibly present in/on stool **OR** in the toilet **AND** not just on the tissue paper
- New onset or worsening **AND** persistent rectal bleeding (not just a single episode; present most days of the week for more than 2 weeks)
- Bleeding is unexplained (i.e., **absence of complete colonoscopy within last 2 years)**

No / Yes

Follow high risk rectal bleeding pathway

Investigation that should be carried out:

4. Medication Review
Especially anti-platelet agents and/or anti-coagulants

5. Baseline investigations (within 8 weeks of referral)
CBC (Required), Serum Ferritin (Required), TTG (Required), Serum Iron, TIBC, Transferrin saturation, Creatinine, Alkaline Phosphatase, Bilirubin, ALT, CRP (if indicated)
Note: For patients with signs of IDA, FIT should not be done

6. Physical exam
Consider rectal exam, especially if there is also a change in bowel habit or lower abdominal pain

7. Consider alarm symptoms concerning for colorectal or other GI cancer
- Significant diarrhea, as can occur in IBD
- Unintentional weight loss (≥ 5-10% of body weight over 6 months)
- Significant and progressive change in bowel habit
- Significant abdominal pain

Alarm feature should be unexplained (i.e., not investigated by lower endoscopy within the last 2 years)

No / Yes

8. Urgent criteria for IDA pathway for colorectal cancer diagnosis
- IDA with Hb <110g/L (Men) / <100g/L (Women)

OR
- IDA with alarm symptom concerning for colorectal or other GI cancer

8. Refer for urgent endoscopy (gastroscopy and/or colonoscopy); should be evaluated in <2 weeks
For more information see:
- 'Diagnosis Criteria' link above
- Referral guideline tab

9. Semi-urgent criteria for IDA pathway for colorectal cancer diagnosis
- IDA with:
Hb between 110-130 g/L (Men)
Hb between 100-120 g/L (Women)

9. Refer for semi-urgent endoscopy (gastroscopy and/or colonoscopy); should be evaluated in <8 weeks
For more information see:
- 'Diagnosis Criteria' link above
- Referral guideline tab