

## To-Date Results as of 04/08/21

Invited Participants Total

**14,388**

Kits Returned (Definitive Results)

**6,438**

Completion Rate %  
Waikato region

**53%**

MoH Target 60%

Completion Rate %  
Māori

**38%**

MoH Target 60%

Completion Rate %  
Pacific

**32%**

MoH Target 60%

Completion Rate % Priority  
Population (Dep 9 & 10)

**53%**

MoH Target 60%

Positives  
Total

**313**

Colonoscopies  
completed

**107**

Cancers

**12**

Advanced  
Adenomas

**52**

Polyps

**26**

Other

**17**

## Meet the Bowel Screening Team



**Lu-ana Ngatai**  
National Bowel Screening  
Programme Manager



**Liz Phillips**  
NBSP Clinical Lead



**Nicola Griffiths**  
NBSP Clinical Nurse Specialist



**Hannah Te Paea**  
NBSP Nurse



**Robyn Davidson**  
NBSP Nurse



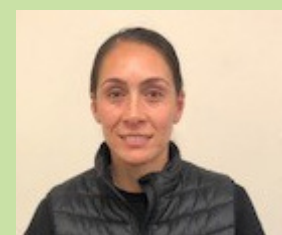
**Karena Birt**  
Community Care Coordinator



**Turuhira Wirihana**  
Community Care  
Coordinator



**Kaylene Oswald**  
Data and Service  
Improvement Manager



**Temira Mataroa**  
Project Manager





## This month's HOT TOPIC

Q Which referral does our practise use in BPAC if we receive a positive result?

A **National Bowel Screening FIT Positive**

### HOT TIP

In BPAC search bar type FIT to display correct referral. It is not only important to refer participants through to the hospital but just as important to do the same referral if the participant wants to be seen PRIVATELY, we are then able to update our information and close the loop knowing the participant has been followed up.

**Waikato DHB Generic Referral**

Referral Details Patient Details Specialty Clinical Details Investigations Referrer Details

**Referral To**

Refer To: National Bowel Screening Programme (NBSF) Positive FIT

Urgency: Urgent

Attention:

Company: National Bowel Screening Programme (NBSF)

Address: Waikato DHB, 196 Pembroke Street, Hamilton

Phone Number: 07 839 8899 ext: 95185

Fax Number:

**Positive FIT**

The National Bowel Screening service is for patients who are aged 60 to 74 years and eligible for publicly funded health care.

Waikato DHB Bowel Screening service:  
Ph. 07 839 8899 Ext. 95185

**Patient Must**

Have received a Positive FIT from the National Bowel Screening programme.

**Exclusion Criteria**

## Waikato Bowel Screening Champion

### Kaumtua in Kīngitanga movement adds voice to Waikato's National Bowel Screening Programme

A respected senior kaumatua to the Kīngitanga movement, is lending his mana and deeply personal story to help launch the National Bowel Screening programme across Waikato.

Survivor David Huti Waitere is urging people to whakarongo, kōrero and ako - listen to his story, open up talk about changes in your bowels and learn from his experience 22 years ago.

Mr Waitere was diagnosed with bowel cancer in 1999, aged 55, while he was still working fulltime in the agriculture industry.

He was fit and had no obvious risk factors; he didn't smoke or drink and wasn't overweight.

His youngest daughter and now caregiver Claudine Waitere recalls her dad losing a dramatic amount of weight and being constantly tired.

"Dad was a really strong, healthy farmer - he'd be carrying fence posts and cutting down trees and scrub," she says.

"But he was losing weight and that was hard to see. He should have been about 70 to 80 kilograms, but he was about 62. He got pretty skinny and he's always been a good eater."

She says her dad would try and hide some of his symptoms from his wife Bonnie, including the bleeding from his rectum.

It was Bonnie who kept pushing him to go to the doctor.

Mr Waitere says he kept working despite the symptoms "until I had to go to the doctor and the doctor said I needed to stop".

While he was working, Mr Waitere would also travel to hui most weekends as a servant to late Māori Queen Te Arikinui and the current King Tuheitia.

"Those were the things he did with his life despite his illness," Ms Waitere says.

And it was an illness which was very much kept a secret from the family's five young children.

"We didn't realise that he was going through his struggle and he didn't share much with us either. So families need to talk about this so that we can understand what's going on," Ms Waitere says.

Mr Waitere was cured of his cancer following surgery.

"During the pre-surgery consultation it was noted that one of the actions was to ask whether Dad would agree to have a stoma bag inserted. Being a person who didn't question authority or the mana of the doctor, he gave consent without fully understanding what was being asked. This was a very emotional low point for my sister-in-law who was with Dad at the time.

"Decisions like this should be discussed with the whānau, not just the patient alone. Fortunately the decision to have a stoma bag did not go ahead," Ms Waitere says.

"So Dad's saying 'whakarongo korero, ako' serves well in a whanau context as well.

Gastroenterologist and Bowel Cancer Screening Programme clinical lead Dr Liz Phillips says she's grateful for Mr Waitere's courage in sharing his story and is thankful he was one of those who survived.

Each year around 3000 Kiwis will be diagnosed with bowel cancer, while more than 1200 will die from it. Bowel cancer, also known as colon, rectal or colorectal cancer, is the second-most common cause of cancer death in New Zealand.

Dr Phillips says the National Bowel Screening Programme saves lives by detecting possible signs of cancer early, meaning it can be cured in a less aggressive way that what Mr Waitere went through.

She says the benefits of the screening programme are well documented.

Of 1000 faecal immunochemical test (FIT) kits sent out in the mail, 50 will return a positive result. Those who test positive will be offered a free colonoscopy and for every 100 completed, 70 will have a pre-cancer or a warty growth known as a polyp which can be easily removed.

Of those 100 colonoscopies, seven will have a cancer and if picked up early can be treated successfully.

"Often they can have less extreme treatment than what Mr Waitere had to go through and often it means we can deal with it without the need for some of the things that people are afraid of, like stoma bags," Dr Phillips says.

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“So the whole point of this programme is to raise awareness, to get people talking and to encourage each other to do the kit because while the chance of having cancer is slim the odds of picking up a pre-cancer and treating it is very high and we can prevent further deaths.”

Dr Phillips says there are still ways for those outside the age range of 60 to 74 to be eligible for a colonoscopy. Anyone with a first-degree family member under 55, for example a sibling or parent, who developed a bowel cancer is entitled to a bowel examination through the public health system even without having any symptoms.

We have a video of Huti's journey available. If you are interested in having it play at your practice please get in contact with

**Temira Mataroa** -

027 252 2585 | [temira.mataroa@waikatodhb.health.nz](mailto:temira.mataroa@waikatodhb.health.nz)



## We're here to help

Don't hesitate to contact us if you have any questions

**Karena Birt** - 027 237 2539 | [karena.birt@waikatodhb.health.nz](mailto:karena.birt@waikatodhb.health.nz)

or

**Turuhira Wirihana** - 027 286 4228 | [turuhira.wirihana@waikatodhb.health.nz](mailto:turuhira.wirihana@waikatodhb.health.nz)

