



Rijksinstituut voor Volksgezondheid
en Milieu
Ministerie van Volksgezondheid,
Welzijn en Sport

Your invitation for colorectal cancer screening



In this leaflet, you will find information about colorectal cancer screening. It will help you decide if you want to take part.

Why are you invited?

The screening programme aims to detect colorectal cancer very early – even before the first symptoms. Early detection increases the chances of successful treatment. In many cases, it also means treatment is less impactful. The screening test can also help us find polyps in the colon. Removing polyps can prevent colorectal cancer.

Colorectal cancer is a common disease, and a serious one. In the early stages, it often goes unnoticed. Polyps and colorectal cancer are more common among people over 55. You will be invited to take part in colorectal cancer screening every 2 years.

Taking part in population screening

Taking part means using a self-test at home. We use the test to examine if there is blood in your stool (poop). Even if you cannot see it, blood in your stool could be linked to colorectal cancer or precancerous tissue changes.

Simple explanation about the health screening?

Go to www.steffie.nl



Find more information at:
www.bevolkingsonderzoekdarmkanker.nl



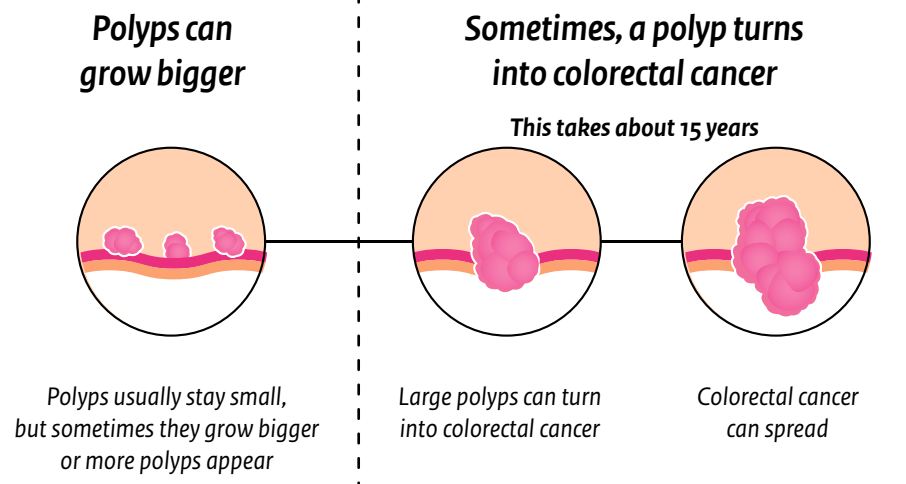
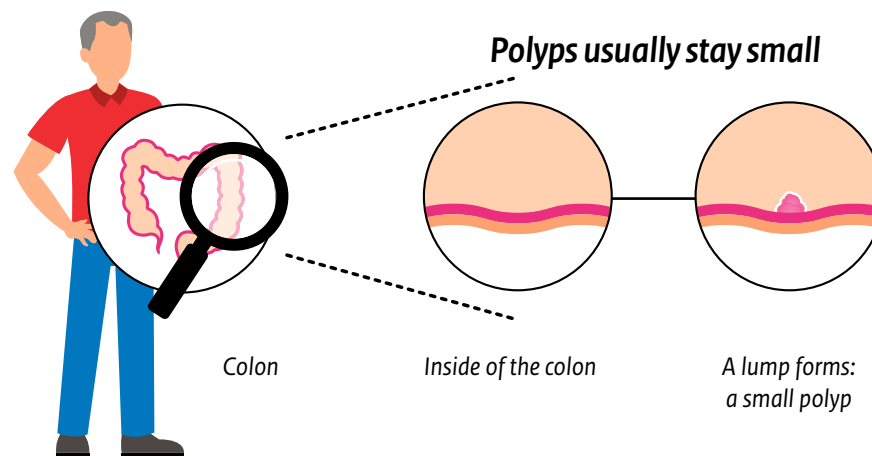
Or scan the QR code with the camera on your mobile phone. The link will take you to the site.



Would you like to talk to someone for more information or help? Call the Customer Service. The phone number is on your invitation letter.

What causes colorectal cancer?

Colorectal cancer starts as a small lump on the inside of the colon. This is called a polyp. Most of the time, people do not feel polyps. Most polyps are harmless, but some turn into colorectal cancer. That is why it is especially important to take part in colorectal cancer screening.



Screening: from test to result

Polyps and colorectal cancer can lead to small bleeds.
We use a test to see if there is blood in your stool.

1 The self-test

Read the instructions in the test kit before using the self-test.

You can watch a video about the test at
www.bevolkingsonderzoekdarmkanker.nl

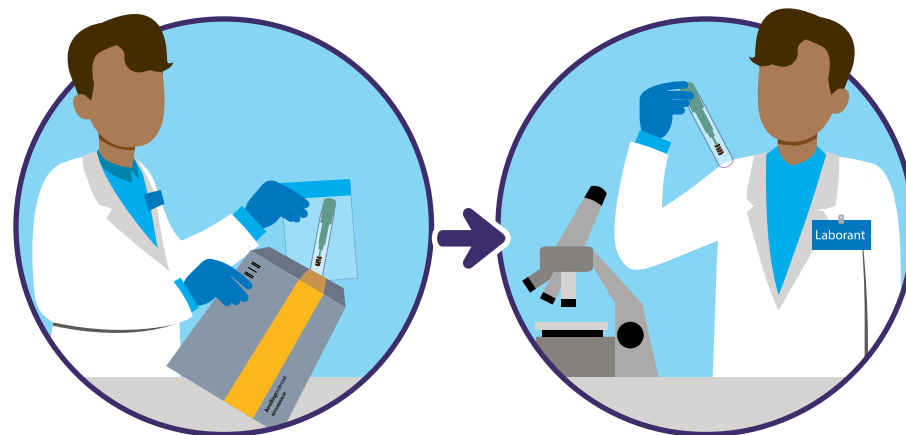


Did you use the test?

Then put the self-test in the grey envelope,
seal it and put it in the letterbox.

2 Examination in the laboratory

If there is blood in your stool, you often cannot see it.
That is why the stool sample is examined in a laboratory.



3 The result

You will get a letter within 2 weeks.
The letter will tell you if follow-up
diagnostic testing is needed, or not.



What does the screening test cost?

The screening tests are free. If you need follow-up diagnostic testing in hospital, this is covered by your health insurance.

The costs may be deducted from your insurance excess. If you have any questions about this, contact your health insurance company.

When is this not the right test for me?

The cancer screening programme may not always be the best choice for you. Sometimes a different test is better in your case. Talk to your GP about the best choice for you if 1 or more of these apply:

- you have bowel problems;
- you already had an internal exam of your intestines in the past 5 years;
- you are very ill and cannot get better;
- you are being treated for chronic inflammation of the intestines;
- you have a hereditary predisposition for colorectal cancer;
- colorectal cancer runs in your family.

When should I go to the GP first?

Do you have 1 or more of these symptoms? Contact your GP before taking part in cancer screening.

- Blood or mucus in your stool (poop);
- A change in your stool that does not go away;
- Feeling like you need to poop, even if nothing comes out;
- Less interest in food (lower appetite);
- Stomach pain or cramps;
- Weight loss for no reason;
- Always feeling tired.

What are the possible results?

You could have 1 of these 2 results:

1 No follow-up testing is needed

You will be invited again in 2 years, unless you are older than 75 at that time.



95 out of 100 participants do not need follow-up diagnostic testing.

2 You do need follow-up diagnostic testing

You will be referred for an intake interview at a hospital. The doctor will talk to you about whether you need a colonoscopy. This means that your colon will be examined internally.



5 out of 100 participants need follow-up diagnostic testing.

You can find more information about follow-up testing at www.bevolkingsonderzoekdarmkanker.nl



Advantages and disadvantages

Just like any other medical test, cancer screening has advantages and disadvantages. You decide if you want to take part.

Advantages

- **Colorectal cancer can be detected earlier and treated sooner**

Early detection increases the chances of successful treatment. In many cases, it also means treatment is less impactful. By detecting and removing polyps, colorectal cancer can even be prevented.

- **Lower risk of death from colorectal cancer**

People who regularly take part in cancer screening are less likely to die from colorectal cancer than people who do not take part.

Disadvantages

- **You may feel worried**

Waiting for the test result can be stressful. If you get a referral for follow-up diagnostic testing, that might also make you feel worried. But referral does not necessarily mean that you have colorectal cancer.

- **Cancer screening does not give you complete certainty**

There is always a chance that colorectal cancer will be missed in the screening tests. Or you could develop colorectal cancer between 2 rounds of screening. That is why you should always go to the GP if you have symptoms.

- **Sometimes a colonoscopy leads to complications**

All follow-up diagnostic testing is done very carefully, But complications can develop. There is a very slight risk of death if that happens.

Your data

Privacy

To carry out the population screening, we need to process your data. We follow privacy laws when we do this.

Your test results can help to improve population screening. Looking at the results from all the participants together is very informative.

That is why we also exchange data with research and care facilities.

For more information about privacy, go to

www.bevolkingsonderzoeknederland.nl/en/privacy

Sharing test results with your GP

Your GP will not get your result automatically. Do you want your GP to know your result? Then provide your GP's contact details before you send in the self-test. You can enter this information online at:

mijn.bevolkingsonderzoeknederland.nl

In that case, your GP will also be notified if your test result is unfavourable and you do not respond to the hospital referral letter.

What will happen to my stool test?

After the laboratory has examined your test, the test will be destroyed.

We sometimes keep stool tests for a few days to monitor and improve the quality of the population screening programme. After a few days, these tests are destroyed as well. In the context of scientific research, we always ask explicit prior consent before using bodily materials.

You can choose how your data is used

If you do not want your data to be used for quality analysis or scientific research, you can object via the screening organisation. It is important to do this before you take part in cancer screening.

You can view, change and add more personal data online.

Go to www.bevolkingsonderzoeknederland.nl/en and log in with your DigiD.

Helping you to decide

We hope that you are able to decide after reading this leaflet.

If you need more information, or have a hard time deciding, you can ask for help.

Read and explore more:

www.steffie.nl for a simple explanation
www.bevolkingsonderzoekdarmkanker.nl
www.thuisarts.nl/darmkanker-opsporen

Others who can help you:

- Ask your family doctor for advice.
- Talk to your family and friends about it.

Taking part or opting out

Would you like to take part?

Then use the self-test in your stool sample kit.
Read the instructions carefully first.

Would you rather not take part?

Opt out online at: <https://www.bevolkingsonderzoeknederland.nl/en>
You will need your DigiD to log in. You can also call or send an email to The Dutch Screening Organization. You can find the phone number and email address at the top of the letter with this leaflet. If you opt out, you will no longer receive the invitation letter for colorectal cancer screening and the stool test.

First-hand experiences

In the Netherlands, 7 in 10 people take part in the population screening programme for colorectal cancer. It is understandable that you might have questions or be hesitant about taking part. Read what other people have to say about their experiences:

“I am very fortunate to be here to tell my story today. And that is really thanks to population screening. Some people may feel uneasy about taking part, because you know that the screening test might find something. But if you are too late, it is much worse.”

“As you get older, you also become more aware that your health is not guaranteed. I am doing my best to live a healthy life. That means making conscious choices to stay as healthy as possible, so taking part in colorectal cancer screening is also a logical choice.”



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A screening test is a free medical examination for early detection of a disease. The government has three population screening programmes for cancer. These programmes provide screening tests for cervical cancer, breast cancer and colorectal cancer. These diseases can be detected early, even before symptoms start.

Although this leaflet has been drafted with all due care, no legal rights may be derived from the contents of this leaflet.

Multiple languages / andere talen



This information is available in English at

Bu bilgiyi Türkçe olarak şu internet sitesinde okuyabilirsiniz

يمكنكم قراءة هذه المعلومات باللغة العربية على الموقع

Te informacje są również dostępne w języku polskim na stronie

Ви можете прочитати цю інформацію українською на веб-сайті



www.bevolkingsonderzoekdarmkanker.nl/vertalingen

The leaflet was made with help from general practitioners (NHG), gastroenterologists (NVMDL), the Colorectal Cancer Foundation, the Dutch Stomach, Liver and Bowel Foundation, the Dutch Cancer Society (KWF) and The Dutch Screening Organization.

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nederland**



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