

## Colorectal Cancer Screening – 45 is the new 50

Prompted by a recent alarming rise in cases of colorectal cancer in people younger than 50, the national GI societies such as ACG, and the American Cancer Society now recommend that persons at average risk for colorectal cancer start regular screenings at age 45. In May 2021, the US Preventive Services Task Force issued new recommendations for colorectal cancer stating that people at average risk should start screening at age 45, which will allow health insurance companies to cover the cost of the test at a younger age. The task force selected age 45 based on research showing that initiating screening at that age averted more early deaths than starting at age 50, with a relatively small increase in the number of colonoscopy complications.

The recommended age was lowered from 50 to age 45 because colorectal cancer cases are on the rise among young and middle-aged people. In the United States, colorectal cancer is the third leading cause of cancer-related deaths in men and in women, and the second most common cause of cancer deaths when men and women are combined. It's expected to cause about 52,980 deaths during 2021. Although the overall death rate has continued to drop, deaths from colorectal cancer among people younger than 55 have increased 1% per year from 2008 to 2017.

Persons are considered average risk if they **do not** have a personal history of colorectal cancer or certain types of polyps, a family history of colon cancer, a personal history of IBD, a confirmed or suspected hereditary colorectal syndrome, such as familial adenomatous polyposis (FAP) or Lynch syndrome (hereditary non-polyposis colon cancer or HNPCC).

People with any risks for colorectal cancer, incidentally, are only to be screened by colonoscopy. Non-invasive techniques such as Cologuard®, hemoccult testing, and virtual colonoscopy should be reserved for patients at average risk only. A colonoscopy is the screening method of choice for patients with increased risks, which include previous adenomas and family history of colon cancer or adenomas.

People who are in good health and with a life expectancy of more than 10 years should continue regular colorectal cancer screening through the age of 75. There is no change to the USPSTF 2016 recommendation to only selectively screen individuals aged 76 to 85, as research shows only small increases in life-years gained. For persons ages 76- 85, the decision to be screened should be based on a person's preferences, life expectancy, overall health and prior screening history. People over age 85 should no longer get screened for colorectal cancer.

