

COLORECTAL CANCER SCREENING GUIDELINES

Colorectal Cancer (CRC) Is Among
the **Most Common and Deadly Cancers**¹



CRC is the **third-most common diagnosed cancer** and the **second-leading cause** of cancer death among US adults¹



Approximately 21% of adults 45 to 49 years old and **67% of adults 50 to 75 years old** reported being **up to date with CRC screening** in 2018²



CRC incidence and mortality rates are **increasing among adults under 55 years of age**³



An estimated 52,980 people will die from CRC in 2021, **more than from breast or prostate cancer**¹



Early detection through regular screening may **decrease CRC incidence and mortality**



GUIDELINE-RECOMMENDED CRC SCREENING OPTIONS

Multiple guidelines, including the US Preventive Services Task Force (USPSTF) and the American Cancer Society (ACS), support screening at 45 years of age and include several screening options for patients at average risk of CRC. Offering a choice of screening options, including stool-based tests, in addition to colonoscopy has been shown to increase patient adherence with screening.⁴ Discuss all available screening choices with your eligible patients.

Shared decision-making (SDM) is “a collaborative process that allows patients and health care providers to make a decision together that accounts for the best scientific evidence available as well as the values and preferences of the patient.”⁵ Educate patients about their options, and engage in SDM so that patients are more likely to follow through with screening. The most important thing is to get patients screened, no matter which test they choose.⁶

SCREENING METHOD	RECOMMENDED FREQUENCY			
	ACS GUIDELINE ^{3*}	USPSTF RECOMMENDATIONS ^{7†}	NATIONAL COMPREHENSIVE CANCER NETWORK® (NCCN®) [‡]	US MULTI-SOCIETY TASK FORCE OF COLORECTAL CANCER ⁹
STOOL-BASED TESTS				
Fecal immunochemical test (FIT)	Every year	Every year	Every year	Every year
High-sensitivity, guaiac-based fecal occult blood test (gFOBT)	Every year	Every year	Every year	
Multitarget stool DNA test (mt-sDNA)[§]	Every 3 years	Every 1 to 3 years	Every 3 years	Every 3 years
VISUAL (STRUCTURAL) TESTS				
Colonoscopy	Every 10 years	Every 10 years	Every 10 years	Every 10 years
Computed tomography colonography (virtual colonoscopy)	Every 5 years	Every 5 years	Every 5 years	Every 5 years
Flexible sigmoidoscopy	Every 5 years	Every 5 years, or every 10 years if done with annual FIT	Every 5 years	Every 5 to 10 years

* ACS recommends the use of gFOBT/FIT brands that have higher sensitivity rates.

† Because no direct evidence compares different screening tests and because local resources or patient factors may influence the feasibility of different screening strategies, the USPSTF is unable to determine which tests are unequivocally “better” or “worse.”

‡ All recommendations are category 2A unless otherwise indicated. The NCCN makes no representations or warranties of any kind regarding their content, use or application and disclaims any responsibility for their application or use in any way.

§ Guidelines may refer to mt-sDNA by different names, including FIT-Fecal DNA, sDNA-FIT, and sDNA.

References

1. Siegel RL, Miller KD, Fuchs H, Jemal A. Cancer statistics, 2021. *CA Cancer J Clin.* 2021;71(1):7-33. doi:10.3322/caac.21654
2. American Cancer Society. Colorectal cancer facts & figures 2020-2022. Published 2020. Accessed April 13, 2021. <https://www.cancer.org/content/dam/cancer-org/research/cancer-facts-and-statistics/colorectal-cancer-facts-and-figures/colorectal-cancer-facts-and-figures-2020-2022.pdf>
3. Wolf AMD, Fontham ETH, Church TR, et al. Colorectal cancer screening for average-risk adults: 2018 guideline update from the American Cancer Society. *CA Cancer J Clin.* 2018;68(4):250-281. doi:10.3322/caac.21457
4. Inadomi JM, Vijan S, Janz NK, et al. Adherence to colorectal cancer screening: a randomized clinical trial of competing strategies. *Arch Intern Med.* 2012;172(7):575-582. doi: 10.1001/archinternmed.2012.332
5. Volk RJ, Leal VB, Jacobs LE, et al. From guideline to practice: new shared decision-making tools for colorectal cancer screening from the American Cancer Society. *CA Cancer J Clin.* 2018;68(4):246-249. doi:10.3322/caac.21459
6. American Cancer Society guideline for colorectal cancer screening. American Cancer Society. Updated November 17, 2020. Accessed April 27, 2021. <https://www.cancer.org/cancer/colon-rectal-cancer/detection-diagnosis-staging/acs-recommendations.html>
7. Davidson KW, Barry MJ, Mangione CM, et al. Screening for colorectal cancer: US Preventive Services Task Force recommendation statement. *JAMA.* 2021;325(19):1965-1977. doi:10.1001/jama.2021.6238
8. National Comprehensive Cancer Network. Colorectal cancer screening. Version 2.2021. Published April 13, 2021. Accessed April 28, 2021. https://www.nccn.org/professionals/physician_gls/pdf/colorectal_screening.pdf
9. Rex DK, Boland CR, Dominitz JA, et al. Colorectal cancer screening: recommendations for physicians and patients from the U.S. Multi-Society Task Force on Colorectal Cancer. *Am J Gastroenterol.* 2017;112(7):1016-1030; doi:10.1038/ajg.2017.174