



## U.S. Preventive Services Task Force Recommends Screening Adults 50-75 for Colorectal Cancer

*Screening for colorectal cancer reduces the risk of dying from the disease*

WASHINGTON, D.C. – June 15, 2016 – The U.S. Preventive Services Task Force (Task Force) today published a final recommendation statement and evidence summary on screening for colorectal cancer. The Task Force found that evidence continues to show that the overall benefit to screening is substantial for many adults. This final recommendation statement reaffirms the Task Force's 2008 recommendation to screen all adults ages 50 to 75. This is an **A recommendation**. In addition, the Task Force recommends selectively screening some adults ages 76 to 85 based on a patient's prior screening history and overall health status. This is a **C recommendation**.

“The Task Force strongly recommends screening adults ages 50 to 75 for colorectal cancer, as it reduces the risk of dying from the disease,” says Task Force immediate past chair Albert Siu, M.D., M.S.P.H. “Evidence convincingly shows screening for colorectal cancer works, but not enough people are taking advantage of this highly effective service.”

### Grades in this recommendation:

**A:** Recommended.

**C:** The recommendation depends on the patient's situation.

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Colorectal cancer is the second leading cause of death from cancer in the United States. The vast majority of cases of colorectal cancer occur in individuals older than 50 years of age. Although there is strong evidence that screening works, one-third of people ages 50 to 75 have never been screened.

“There are multiple screening options for colorectal cancer that reduce the risk of dying from the disease. We encourage people to choose the best option for them, in consultation with their clinician,” says former Task Force member Douglas K. Owens, M.D., M.S.

The Task Force reviewed several screening strategies, which have unique strengths and limitations and varying levels of evidence supporting their effectiveness. The potential benefits and harms of screening tests also vary, and their different features may make them more or less attractive to individuals.

For some adults ages 76 to 85, the benefits of screening are smaller, and the potential for harm greater. However, some people in this age group may benefit, especially if they have never been screened before and are healthy enough to undergo treatment if cancer is found. The Task Force recommends that the decision to screen people in this age group be an individual one, made in consultation with a clinician.

These recommendations apply to asymptomatic adults 50 years of age and older with an average risk for colorectal cancer. They do not apply to adults with no family history of known genetic disorders linked to a high risk of colorectal cancer (such as Lynch syndrome or familial adenomatous polyposis) or to those who have a personal history of inflammatory bowel disease, previous noncancer growths that may lead to colorectal cancer, or previous colorectal cancer.

The Task Force is an independent, volunteer panel of national experts in prevention and evidence-based medicine that works to improve the health of all Americans by making evidence-based recommendations about clinical preventive services such as screenings, counseling services, and preventive medications.

Dr. Siu is the Ellen and Howard C. Katz Mount Sinai Health System chair and professor of the Brookdale Department of Geriatrics and Palliative Medicine at the Icahn School of Medicine at Mount Sinai. He is also director of the Geriatric Research, Education, and Clinical Center at the James J. Peters Veterans Affairs Medical Center, and has served as deputy commissioner of the New York State Department of Health.

Dr. Owens is a general internist at the Veterans Affairs Palo Alto Health Care System. He is the Henry J. Kaiser, Jr., professor at Stanford University, where he is also a professor of medicine, health research and policy (by courtesy), and management science and engineering (by courtesy), as well as senior fellow at the Freeman Spogli Institute for International Studies.

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