Reaching “80% by 2018” Would Prevent More Than 20,000 Colorectal Cancer Deaths per Year

Study Shows Potential Impact of Initiative

ATLANTA – March 12, 2015–Increasing colorectal cancer (CRC) screening rates to 80% by 2018 would prevent an additional 21,000 colorectal cancer deaths per year by 2030, according to a new study. The study is the first to estimate the public health benefits of increasing screening rates to “80% by 2018,” a recent initiative from the National Colorectal Cancer Roundtable (NCCR), a national coalition of public, private, and voluntary organizations, to aim for screening rates of 80% in the United States by 2018. The study is co-authored by American Cancer Society epidemiologist Ahmedin Jemal and appears in *CANCER*, a peer-reviewed journal of the American Cancer Society.

Colorectal cancer (commonly called colon cancer) is the third leading cause of cancer death in both men and women in the United States, and the second leading cause for both sexes combined. An estimated 132,700 new cases and 49,700 deaths are expected in 2015 in the U.S. Data from the past decade show that both incidence and mortality from colon cancer are decreasing at rate of about 3% per year, largely due to the increased use of screening. Still, fewer than six in ten U.S. adults (58%) aged 50 to 75 years had received guideline-recommended testing in 2013.

Studies indicate lack of screening is responsible for a substantial percentage of colorectal cancer deaths. That fact led to the launch of “80% by 2018,” led by the National Colorectal Cancer Roundtable (NCCR), a national coalition of public, private, and voluntary organizations, to aim for screening rates of 80% in the United States by 2018. The current study was designed to measure the potential benefits of increasing uptake by an additional 22% in terms of the number of colorectal cancer cases and deaths

Researchers led by Reinier G. S. Meester, MS at Erasmus MC University Medical Center in Rotterdam, the Netherland used a computer model to show the effects of increasing screening rates from approximately 58% in 2013 to 80% in 2018 compared to a scenario in which the screening rate remained approximately constant.

They found increasing screening rates to 80% by 2018 would reduce projected colorectal cancer incidence rates by 17% and mortality rates by 19% during short-term follow-up (2013 through 2020) and by 22% and 33%, respectively, during extended follow-up (2013 through 2030). Those reductions would amount to a total of 277,000 averted new cancers and 203,000 averted colorectal cancer deaths from 2013 through 2030.

The authors conclude increasing the uptake of colorectal cancer screening in the United States to 80% by 2018 could have a considerable and escalating public health impact.

“The barriers to increasing colorectal cancer screening in the United States are significant and numerous,” said Richard C. Wender, M.D., chief cancer control officer and chair of the National Colorectal Cancer Roundtable. “But this study shows that investing in efforts to clear these hurdles will result in a major cancer prevention success.”

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