

American Cancer Society Responds to USPSTF Final Recommendation on Colorectal Cancer Screening

Below is a statement from **Durado Brooks, MD, MPH**, Managing Director of Cancer Control Intervention, Prevention and Early Detection for the American Cancer Society in response to updated colorectal cancer screening recommendations released by the U.S. Preventive Services Taskforce today:

"The U.S. Preventive Services Taskforce (USPSTF) released its [Final Recommendation on Colorectal Cancer \(CRC\) Screening](#). The final recommendation statement has evolved from the 2008 USPSTF Recommendation and from the Draft CRC recommendation released in October 2015. The primary difference is the addition of computed tomography (CT) colonography and multitargeted stool DNA (FIT-DNA) to the list of recommended screening strategies. With regard to the expanded menu of screening strategies they point out that nearly one-third of US adults have never been screened and indicate that 'offering choice in colorectal cancer screening strategies may increase screening uptake.'

"Screening is recommended for all individuals from age 50 to age 75 (an "A" recommendation); it is recommended that the decision to screen individuals aged 76 to 85 years be individualized based on screening history and overall health status (a "C" recommendation).

"The 2016 USPSTF recommendations are very similar to those made by [the joint guideline](#) from the American Cancer Society, US Multi-Society Taskforce on Colorectal Cancer and American College of Radiology in 2008. These guidelines reinforce the notion that with several test options the best test is the one that you get.

"These new guidelines reinforce the value and importance of screening for colorectal cancer. Providing individuals with a broader menu of screening options may accelerate momentum toward our goal of a nationwide colorectal cancer screening rate of 80% by 2018."
