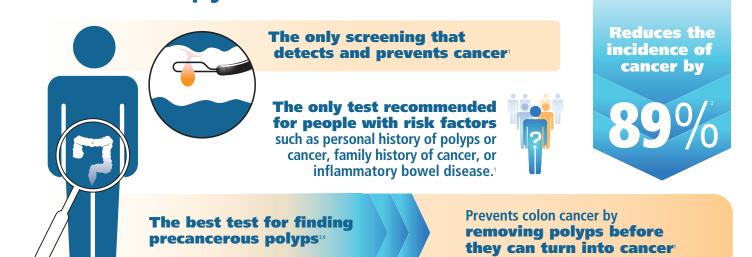


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THE VALUE OF COLONOSCOPY

Colonoscopy: The Gold Standard



When Should I Start Screening?

The American Cancer Society and the U.S. Preventative Services Task Force recommend average-risk people start screening at age



*Depending on family history, screening may be recommended at age 40 or younger

How Often is Colonoscopy Recommended?

Colonoscopy is **the only test recommended at 10-year intervals** if no polyps are found

Your gastroenterologist will recommend the interval of repeat colonoscopy based on findings during colonoscopy and surveillance guidelines



REFERENCES: 1. American Society for Gastrointestinal Endoscopy. Colorectal Cancer Screening. https://www.aeju.org/docs/default-source/default-document-library/colorectalscreening__poster_2020_digital.pdf. 2. Imperiale T, Ransohoff D, Itzkowitz S, et al. Multitarget Stool DNA Testing for Colorectal-Cancer Screening. New England Journal of Medicine, 2014;370:1287-1297. https://www.aeju.org/doi/full/10.1058/neju.pdf. 3. Rev D, Boland C, Dorninitz J et al. Colorectal Cancer Screening. Rev England Journal of Gastroenterology 2017;112:1016-1030. http://doi.org/10.1038/aj.go17.714. 4. Shaukat A, Shyne M, Mandel J, Snover D, Church T. Colonoscopy with polypectomy reduces long-term incidence of colorectal cancer in both men and women: extended results from the Winnesota Colon Cancer Control Study. Gastroenterology. November 16, 2020. https://doi.org/10.1053/j.gastro.2020.11.014. 5. American Cancer Society, American Cancer Society Guideline for Colorectal Cancer Screening. https://www.agencorg/date/tdetction-diagnosis-staging/acs-recommendations. html. 6. U.S. Preventative Services Task Force. Recommendation: Colorectal Cancer Screening. All links accessed February 3, 2023.

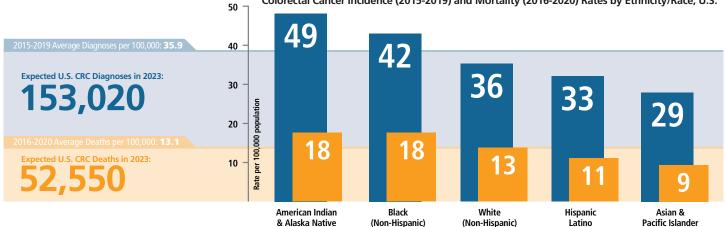


COLORECTAL CANCER: MIAT RISK?

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Colorectal Cancer (CRC) Disparities in the U.S.

Colorectal Cancer Incidence (2015-2019) and Mortality (2016-2020) Rates by Ethnicity/Race, U.S.



Did You Know?



Disparities are driven by socioeconomic status and differences in access to early detection and treatment²



American Indians and Alaska Natives are the only groups for which CRC death rates are not declining²



Blacks and Hispanics are less likely to get prompt follow up after abnormal screening results and more likely to be diagnosed with late stage cancer^{2,3}



CRC rates in Japanese men are 23% higher than in Non-Hispanic White men²

When diagnosed at an early stage, survival rates are similar across all racial and ethnic groups³

What Should I Do?



Ask your primary care or GI physician about available **CRC screening options**⁴



Schedule a colonoscopy or stool-based screening test at age 45⁵

CES: 1. American Cancer Society. Cancer Statistics Center. Cancer Type: Colorectum. https://cancerstatisticscenter.cancer.org/p_ga=2.153983608.1193857683.1673968483#1/cancer-site/Colorectum 2. American Cancer Society.Colorectal Cancer Facts & Figures 2020-2022. www.cancer.org/content/dam/cancer-org/research/cancer-facts-and-statistics/colorectal-cancer-facts-and-figures/colorectal-cancer-facts-and-figures/colorectal-cancer-facts-and-figures/colorectal-cancer-facts-and-figures/colorectal-cancer-facts-and-figures/colorectal-cancer-facts-and-figures/colorectal-cancer-facts-and-figures/colorectal-cancer-facts-and-figures/colorectal-cancer-facts-and-figures/colorectal-cancer-facts-and-figures/colorectal-cancer-facts-and-figures/colorectal-cancer facts-and-figures/colorectal-cancer-facts-and-figures/colorectal-cancer facts-and-figures/colorectal-cancer facts-and-figures/colorectal-cance