

### Transcript Details

This is a transcript of an educational program. Details about the program and additional media formats for the program are accessible by visiting: <https://reachmd.com/programs/clinicians-roundtable/initiating-colorectal-cancer-screening-earlier-a-look-at-the-evidence/36540/>

### ReachMD

www.reachmd.com  
info@reachmd.com  
(866) 423-7849

---

## Initiating Colorectal Cancer Screening Earlier: A Look at the Evidence

### Announcer:

This is *Clinician's Roundtable* on ReachMD. On this episode, we'll hear from Dr. Theodore Levin, who's a Professor of Health System Science at the Kaiser Permanente School of Medicine, the Associate Director at the Kaiser Permanente Northern California Division of Research, and the Clinical Lead for Colorectal Cancer Screening for the Permanente Medical Group. He'll be discussing the benefits of earlier colorectal cancer screening for adults aged 45 to 49.

Here's Dr. Levin now.

### Dr. Levin:

So one thing that we did—in addition to the simulation modeling that has supported the value of screening, in younger people—one thing that we did was actually just evaluate the use of the fecal immunochemical test in people 45 to 49 years of age compared to people who were 50 receiving their first screen for colon cancer, and what we demonstrated was that younger people will adhere with colon screening at nearly the same rate as older people, particularly if they undergo reminders and have an easily accessible screening test like the fecal immunochemical test. The other thing we showed is that the rate of finding cancer when someone has a positive FIT test and undergoes colonoscopy, that rate of finding cancer is the same whether someone's 45 or 50, really supporting the idea that we should be doing screening. That's valuable, and there is value to doing screening at those younger ages.

The other thing we demonstrated is that you can find adenomas, which are precancerous polyps, and at a very similar rate in people who are 45, 46, 47, as well as in the same rate as people who are in their 50s.

Another thing that happens is when you start inviting people to screen at a younger age, often it takes a year or two of the invitation for them to actually take action and do the screening. So by inviting people at 45, you're starting to get people in the habit of doing screening, so then in their 50s and 60s they'll be more likely to continue to adhere with screening.

And kind of the last piece of evidence that we've generated at our site at Kaiser Permanente was an examination of screening colonoscopy yield among adults 45 to 49 after lowering the colon screening age, and that study as well demonstrated that the yield at colonoscopy was very similar in people 45 to 49 compared to people who were 50 to 54 years of age. The yield is significantly lower for colon cancer in people in the younger age group and even in their 50s compared to the evidence that we saw by doing a fecal immunochemical test to select people for colon cancer.

### Announcer:

That was Dr. Theodore Levin talking about how younger adults can benefit from updated colorectal cancer screening guidelines. To access this and other episodes in our series, visit *Clinician's Roundtable* on ReachMD.com, where you can Be Part of the Knowledge. Thanks for listening!