



AGA Clinical Guideline: Colorectal Cancer Screening 2021

By Chaitanya Allamneni

Introduction

- **70%** of sporadic colorectal cancers (CRCs) develop from adenomas, **25-30%** from sessile serrated lesions (SSLs)
- CRC screening – goal to remove adenomas and SSLs, detect early stage CRC
- **One step screening test** – colonoscopy
- **Two step screening tests** – require colonoscopy if positive
- **Best screening test** – *ultimately the one that gets done!*

Quality Metrics in Screening Colonoscopy

- Colonoscopists should measure:
 - **Cecal intubation rate** - goal of at least 95%
 - **Adenoma detection rate (ADR)**
 - Minimum threshold of **30% in men, 20% in women**
 - Should strive for ADRs in the range of 45–50% for a mixed-gender population
 - **Withdrawal time** - spend at least **6 minutes** during withdrawal
 - 2 forward views in cecum/ascending colon equivalent to retroflexion in cecum

When to screen?

- **Start screening at age 45 rather than 50**
 - Official American Cancer Society and USPSTF Recommendation
 - CRC incidence has doubled in 20-49 age group
 - Increased cost effectiveness
- **When to stop?**
 - Limited benefit if not expected to live for at least 7–10 years
 - Increase in competing causes of death
 - Increased odds of procedural / periprocedural risks (altering anticoagulants, bleeding, perforation, cardiac events)
 - **Age 76–85 years**, the decision to screen for CRC **should be individualized**
 - **Age 86 years and above** - screening is **not recommended**

Aspirin chemoprevention

- Low dose ASA recommended in individuals 50–69 years old with a cardiovascular disease risk of >10%, who are not an increased risk for bleeding, and willing to take aspirin for at least 10 years
- Reduction in CRC risk with **prolonged ASA use only**

Family History

- CRC or 1 advanced adenoma in first degree relative (FDR) >60, then if normal index screening colon can **resume average risk screening** recs (q10 yr screening colon)
- CRC in 1 FDR < 60, 2 FDR > 60, advanced polyp in 1 FDR < 60 or 2 FDRs at any age – cont. high intensity screening colonoscopy **every 5 yrs**

Shankar A., Kaler L.A., Butler C.A., Rabenowitz L., Teiser R.H., Rex B.A. AGA Clinical Guideline: Colorectal Cancer Screening 2021. Am J Gastroenterol. 2021;126:458–476.

Performance Characteristics for Colorectal Cancer Screening Tests



	Performance characteristics	Pros	Cons
<u>Stool/blood-based tests</u>			
FIT	- 79% sensitivity, 94% specificity for CRC	- Non-invasive - Can be done at home - Programmatic screening possible	- Repeat annually - Low sensitivity for advanced adenomas ; does not detect serrated lesions
Multitarget stool DNA test	- 92% sensitivity, 87% specificity for CRC - Long term reduction in CRC incidence unknown	- Non-invasive - Can be done at home - Better sensitivity for advanced adenomas and large SSLs than FIT	- Proposed 3 year screening interval - Expensive - Concern for overtesting after (+) test and (-) colonoscopy
Septin 9	48% sensitivity, 91% specificity for CRC	- Can be added to routine blood draw	- Low sensitivity for CRC - Repeat interval unknown
<u>Direct visualization</u>			
Colonoscopy	- 100 detection rate for CRC - Long term reduction in CRC incidence of 31-71%, mortality 65-88%	- Diagnostic and therapeutic! - Can detect cancers and precursor polyps - Infrequent screening (q10yrs) possible	- Operator dependent - Requires bowel prep and sedation - Risk of complications – 4-8/10,000
Flexible sigmoidoscopy	- 90-100% sensitivity for distal CRC - Long term reduction in CRC incidence 21%, mortality 26%	- Less invasive, lower risk of complications than colonoscopy	- Positive result (i.e. adenoma, cancer) requires complete colonoscopy - Repeat q5-10 yrs - Requires enema prep
CT colonography	- 90-100 sensitivity for CRC - Poor sensitivity for flat lesions or SSLs	- Less invasive, no sedation - Low risk of complication	- Still requires bowel prep - Limited availability of trained radiologists
Colon capsule	- 81% sensitivity, 93% specificity for polyps >6mm	- Minimally invasive - Newer tests can be done at home	- Requires bowel prep - Repeat interval after negative study unknown

American Gastroenterological Association Colon Cancer Screening Guidelines

Joseph D. Feuerstein, Adam S. Cheifetz



American Gastroenterological Association Colon Cancer Screening Guidelines:

Cancer Screening in Inflammatory Bowel Disease Joseph D. Feuerstein, Adam S. Cheifetz, 2019-06-24 This book provides a concise yet comprehensive overview of cancer risks in patients with inflammatory bowel disease IBD as well as the screening modalities used to reduce these risks Each chapter presents a major malignancy that patients with IBD are at risk from stemming from the disease itself or from the medications used to treat the disease Malignancies covered include colorectal cancer skin cancer lymphoma and other cancers Cancer risk and screening with current and emerging drug therapies are also discussed Written by experts in the field Cancer Screening in Inflammatory Bowel Disease A Guide to Risk Management and Techniques is a valuable resource for gastroenterologists colorectal surgeons and primary care physicians who treat and manage patients with inflammatory bowel disease

Early Detection and Prevention of Colorectal Cancer Karen E. Kim, 2009 Biomarkers and colorectal cancer **H.R. 15, the "Medicare Preventive Benefit Improvement Act of 1997"** United States. Congress. House. Committee on Ways and Means. Subcommittee on Health, 1998

Gastroenterology Bruce E. Sands, 2015-01-20 Mount Sinai Expert Guides Gastroenterology will provide physicians with an extremely clinical and accessible handbook covering the major GI diseases and symptoms their diagnosis and clinical management Perfect as a point of care resource on the hospital wards and also as a refresher for board exam preparation the focus throughout is on providing rapid reference essential information on each disease to allow for quick easy browsing and assimilation of the must know information All chapters follow a consistent template including the following features An opening bottom line key points section Classification pathogenesis and prevention of disease Evidence based diagnosis including relevant algorithms laboratory and imaging tests and potential pitfalls when diagnosing a patient Disease management including commonly used medications with dosages when to perform surgery management algorithms and how to prevent complications How to manage special populations ie in pregnancy children and the elderly The very latest evidence based results major society guidelines ASG ACG UEGW and key external sources to consult In addition the book comes with a companion website housing extra features such as case studies with related questions for self assessment key patient advice and ICD codes Each guide also has its own mobile app available for purchase allowing you rapid access to the key features wherever you may be If you specialise in gastroenterology and require a concise practical guide to the clinical management of GI disease bought to you by one of world s leading hospitals then this is the perfect book for you This title is also available as a mobile App from MedHand Mobile Libraries Buy it now from iTunes Google Play or the MedHand Store

Colorectal Cancer in Clinical Practice Bernard Levin, Paul Rozen, Stephen J. Spann, Graeme P. Young, 2001-12-20 Colorectal cancer is one of the major malignancies affecting westernized societies both in terms of incidence and as a cause of mortality it is however a preventable and a detectable disease Although most countries do not actively promote preventive policies for their general population this trend is gradually changing In line with this current development Colorectal Cancer

in Clinical Practice examines prevention and early detection of this disease as well as discussion of management issues It will provide the clinician with an accessible and up to date guide on the primary and secondary prevention of colorectal cancer and will be of particular interest to primary care physicians and specialists in gastroenterology oncology and surgery The ASCRS Textbook of Colon and Rectal Surgery Scott R. Steele, Tracy L. Hull, Thomas E. Read, Theodore J. Saclarides, Anthony J. Senagore, Charles B. Whitlow, 2016-03-24 This third edition text provides a completely revised and updated new version of this unique modern practical text that covers the strategic evaluation specific approaches and detailed management techniques utilized by expert colorectal surgeons caring for patients with complex problems whether they result from underlying colorectal disease or from complications arising from previous surgical therapy The format follows that of both a how to manual as well as an algorithm based guide to allow the reader to understand the thought process behind the proposed treatment strategy By making use of evidence based recommendations each chapter includes not only background information and diagnostic therapeutic guidelines but also provides a narrative by the author on his her operative technical details and perioperative tips and tricks that they utilize in the management of these complex surgical challenges Distinctive to this book is the reliance on experts in the field including past presidents of the ASCRS as well as multiple other national and internationally recognized surgeons to lend their personal insight into situations where data may be more sparse but individual and collective experience is paramount to making sound decisions and thereby optimizing patient outcomes The text includes chapters on the assessment of risk and methods utilized to minimize perioperative complications In addition it incorporates sections covering the medical and surgical therapies for abdominal pelvic and anorectal disease Moreover the technical challenges of managing complications resulting from the original or subsequent operations is addressed The underlying focus throughout the text is on providing pragmatic and understandable solutions that can be readily implemented by surgeons of varying experience to successfully treat complex colorectal problems However it also goes beyond the technical aspects of colorectal surgery and includes special sections highlighting the essence of a surgeon covering aspects involving the medical legal ethical and economic challenges confronting surgeons Throughout the text each author provides an ongoing narrative of his her individual surgical techniques along with illustrations and diagrams to personally take the reader through the crucial steps of the procedure and key points of patient care inherent to that topic Additionally where appropriate links to online videos give the reader an up front look into technical aspects of colorectal surgery

Curbside Consultation in GI Cancer for the Gastroenterologist Douglas Adler, 2024-06-01 Are you looking for concise practical answers to questions that are often left unanswered by traditional cancer references that are not designed for gastroenterologists Are you seeking brief evidence based advice for complicated cases or patients with complications that need management Curbside Consultation in GI Cancer for the Gastroenterologist 49 Clinical Questions provides quick and direct answers to the thorny questions commonly posed during a curbside consultation between

colleagues Dr Douglas G Adler has designed this unique reference which offers expert advice preferences and opinions on tough clinical questions commonly associated with GI cancer The unique Q A format provides quick access to current information related to GI cancer with the simplicity of a conversation between two colleagues Numerous images diagrams and references are included to enhance the text and to illustrate the treatment of GI cancer patients Curbside Consultation in GI Cancer for the Gastroenterologist 49 Clinical Questions provides information basic enough for residents while also incorporating expert advice that even high volume clinicians will appreciate Gastroenterologists fellows and residents in training surgical attendings and surgical residents will benefit from the user friendly and casual format and the expert advice contained within Some of the questions that are answered An 81 year old man is found to have unresectable esophageal cancer and malignant dysphagia Should he have a stent A nasogastric feeding tube A PEG tube How is tumor related bleeding from gastric cancers best approached Do patients with pancreatic cancer and jaundice need to have an ERCP preoperatively What is the role of ERCP and EUS in patients with suspected cholangiocarcinoma Why are rectal cancers so different from colon cancers with regards to medical and surgical management Curbside Consultation in GI Cancer for the Gastroenterologist 49 Clinical Questions illustrates how patients at different points in their treatment may go back and forth between specialists to receive coordination of care and incorporates input from gastroenterologists surgeons radiologists and oncologists While providing up to date information this book will help gastroenterologists to manage complex cancer related issues and guide physicians through the maze of cancer related treatments available Ideal for practicing gastroenterologists gastroenterology fellows surgeons oncologists residents and medical students Curbside Consultation in GI Cancer for the Gastroenterologist 49 Clinical Questions is sure to benefit anyone caring for patients with gastrointestinal cancers Pocket Guide to Colorectal Cancer Deborah T. Berg, 2003 This easy to use reference provides nurses with practical material that is useful in the day to day care of patients with colorectal cancer Divided into five sections the text covers the basics of colorectal cancer disease assessment therapeutic approaches and nursing care treatment of recurrent and metastatic colorectal cancer and care of the individual with colorectal cancer Quality of life advanced symptom management and survivorship are also explored and offer insight into the colorectal cancer experience **Early Diagnosis and Treatment of Cancer Series: Colorectal Cancer E-Book** Susan Gearhart, Nita Ahuja, 2010-07-15 Each volume in the Early Detection and Treatment of Cancer Series is packed with practical authoritative information designed to cover the full range of diagnostic procedures including pathologic radiologic bronchoscopic and surgical aspects You ll be able to determine the safest shortest least invasive way to reach an accurate diagnosis stage the disease and choose the best initial treatment for early stages Based on current evidence in the literature authors provide clinical hands on tools to help you make informed decisions on precisely what tests and imaging studies are needed to diagnose and stage each type of cancer Practical authoritative and highly illustrated this volume in the brand new Early Detection and Treatment of Cancer series covers

current protocols and the latest advances in diagnostic imaging and molecular and serologic markers for colon cancer Apply expert advice on the best next step plan for different presentations and tips for less invasive protocols Get clinical hands on tools to help you make informed decisions on precisely what tests and imaging studies are needed for accurate diagnosis and staging Clear figures tables and boxes illustrate step by step care of the full range of problems encountered The small size and convenient format make this an ideal purchase for diagnostic reference Outlines the steps after diagnosis to guide you through formulating a treatment or patient care plan Emphasizes important points such as risk adjusted screening for staging and the use of promising new gene therapies with key points boxes at the beginning of each chapter and pedagogic features throughout Summarizes the process of accurately diagnosing and staging cancer in a logical almost algorithmic approach for easy reference Complements the procedures outlined in the text with full color photographs and line drawings to reinforce your understanding of the material

Clinical Guide to Gastroenterology Yang Chen,Maxton

Pitcher,2019-05-28 Clinical Guide to Gastroenterology is an accessible quick reference resource that provides practical evidence based information on investigations interventions and management of clinical gastroenterological scenarios It is packed full with bullet points diagrams tables and algorithms of the important presentations and conditions within Clinical Gastroenterology Divided into sections the book offers in depth coverage of presenting complaints in Gastroenterology common conditions broken down by organ system important investigations and procedures and pharmacology Detail is given to the sequence of clinical examination investigations and management required to diagnose and treat a wide range of gastroenterological disorders Provides information on symptoms disorders and issues found in the clinical environment Guides readers in decision making appropriate investigation and conducting interventions Includes important guidelines and clinical trials within each chapter Supplemented by a companion website featuring a wealth of additional material including more than 70 audio clips over 50 clinical case studies and almost 350 self assessment questions as well as key clinical trials and guidelines Clinical Guide to Gastroenterology is a must have text for junior doctors and medical students as well as doctors nurses and trainees working within Emergency Departments Medical or Surgical Assessment Units

Adult-Gerontology Practice Guidelines Jill C. Cash,Cheryl A. Glass,2015-06-26 Print CourseSmart

Gastrointestinal Oncology James L. Abbruzzese,2004 In 74 chapters Gastrointestinal Oncology brings together a diverse group of specialists to provide the most authoritative up to date and encyclopedic volume currently available on the subject The first part of this text introduces a series of concepts and topics taht are important to gastrointestinal malignancies in general These topics include epidemiologic principles prevention screening familial GI cancers developmental and molecular biology pathobiology general therapeutic principles emerging therapies and palliative care The second part of the book covers each of the specific cancers affecting the human gastrointestinal tract These chapters are introduced by state of the art discussions outlining our current understanding of the pathobiology and molecular biology relevant to each cancer Subsequent sections describe the

multidisciplinary management of specific clinical situations By organizing the treatment related chapters around clinical scenarios the reader will readily find the information necessary to effectively manage the complex clinical situations encountered by patients with gastrointestinal malignancies *Evaluation of Inflammatory Bowel Disease, An Issue of Gastroenterology Clinics* Samir Shah,Edward Feller,Adam Harris,2012-06-28 The Guest Editors have focused on methods of diagnosing and evaluating IBD to help guide optimal treatment to maximize clinical outcomes and minimize risks Authors have provided state of the art updates with practical information guidelines algorithms and cutting edge data for incorporation into practice The first set of articles deals with endoscopy its role in diagnosis and monitoring IBD the growing importance of chromoendoscopy in IBD surveillance exams assessment of post operative recurrence and finally the emerging role of capsule endoscopy The second section focuses on specific scenarios that IBD physicians encounter frequently health maintenance in IBD focusing on proper vaccinations the growing problem of Clostridium difficile in IBD assessment of pouch problems optimal evaluation of perianal disease the state of the art in using thiopurines including use of allopurinol to optimize metabolites and optimizing the use of infliximab by measuring levels and antibodies to infliximab factors to consider in choosing monotherapy versus combination therapy and communication of risk benefit to patients and finally disability assessment in IBD The third and final section highlights noninvasive methods to evaluate IBD clinical predictors of aggressive or disabling disease the evolving role of specific antibodies in diagnosing subtyping and most recently prognosticating in IBD stool markers calprotectin and lactoferrin for evaluating and monitoring IBD the growing role of imaging modalities with emphasis on MR enterography and CT enterography and finally the genetics of IBD and the potential role of genetic testing in the diagnosis prognosis and tailoring of therapy **Evidence Based Practices in**

Gastrointestinal & Hepatobiliary Surgery Govind Nandakumar,2017-03-22 Textbook of Hepatobiliary Gastrointestinal Surgery is an extensive illustrated evidence based review of complex liver and gastrointestinal surgery edited by gastrointestinal expert Govind Nandakumar based at Weill Cornell Medical College New York Divided into 63 chapters the book begins with a chapter on minimally invasive and robotic oesophagectomy followed by overviews of oesophageal conditions requiring surgery Subsequent chapters cover the surgical management of a broad range of disorders including Crohn s disease colitis and several cancers affecting the hepatobiliary and gastrointestinal systems Surgical techniques discussed include gastric bypass banding and sleeve gastrectomy liver and pancreas transplantation and a separate chapter on bariatric surgery in developing countries Textbook of Hepatobiliary Gastrointestinal Surgery concludes with discussion on radiology techniques pathology and nutrition for gastrointestinal patients and recovery after surgery 638 full colour illustrations enhance this comprehensive resource for surgeons in training and in practice Key Points Comprehensive guide to liver and gastrointestinal surgery for surgeons in training and in practice Contributions from internationally recognised experts edited by Govind Nandakumar from Weill Cornell Medical College New York Provides information on a broad range

of surgical techniques and management of many disorders 638 illustrations full colour Medicare Preventive Benefits and Quality Standards United States. Congress. House. Committee on Commerce. Subcommittee on Health and the Environment,1997 *Geriatric Gastroenterology* C. S. Pitchumoni,T. Dharmarajan,2012-07-26 As aging trends in the United States and Europe in particular are strongly suggestive of increasingly older society it would be prudent for health care providers to better prepare for such changes By including physiology disease nutrition pharmacology pathology radiology and other relevant associated topics Geriatric Gastroenterology fills the void in the literature for a volume devoted specifically to gastrointestinal illness in the elderly This unique volume includes provision of training for current and future generations of physicians to deal with the health problems of older adults It will also serve as a comprehensive guide to practicing physicians for ease of reference Relevant to the geriatric age group the volume covers epidemiology physiology of aging gastrointestinal physiology pharmacology radiology pathology motility disorders luminal disorders hepato biliary disease systemic manifestations neoplastic disorders gastrointestinal bleeding cancer and medication related interactions and adverse events all extremely common in older adults these are often hard to evaluate and judge especially considering the complex aging physiology All have become important components of modern medicine Special emphasis is be given to nutrition and related disorders Capsule endoscopy and its utility in the geriatric population is also covered Presented in simple easy to read style the volume includes numerous tables figures and key points enabling ease of understanding Chapters on imaging and pathology are profusely illustrated All chapters are written by specialists and include up to date scientific information Geriatric Gastroenterology is of great utility to residents in internal medicine fellows in gastroenterology and geriatric medicine as well as gastroenterologists geriatricians and practicing physicians including primary care physicians caring for older adults **Inherited Gastrointestinal Cancers: Identification, Management and the Role of Genetic Evaluation and Testing, An Issue of Gastrointestinal Endoscopy Clinics, E-Book** Fay Kastrinos,2021-11-26 This issue of Gastrointestinal Endoscopy Clinics provides a multidisciplinary approach to the evaluation and care of individuals with inherited gastrointestinal cancer conditions With the many recent advances made in genomic medicine and the potential impact on medical management the articles in this issue disseminate new knowledge on the identification and management of individuals and families with a genetic susceptibility to the development of gastrointestinal cancers including the genetic basis and cancer risks associated with inherited cancer syndromes and integrated familial cancer risk assessment genetic testing approaches and incorporating genetic risk counseling into routine medical care The goal is to improve detection of GI cancer syndromes understand related cancer risks and optimize strategies for the prevention and early detection of cancers to minimize morbidity and mortality Integrating genetic assessment into gastrointestinal cancer care is highly relevant across the cancer care spectrum and gastroenterologists will come away with the most current evidence to enhance and improve their clinical practice Provides in depth clinical reviews on Inherited GI

Cancers Identification Management and the Role of Genetic Evaluation and Testing providing actionable insights for clinical practice Presents the latest information on this timely focused topic under the leadership of experienced editors in the field Authors synthesize and distill the latest research and practice guidelines to create these timely topic based reviews Contains 11 relevant practice oriented topics including Defining High Risk Individuals for Pancreatic Cancer and the Role of Genetic Testing Endoscopic Management and Surgical Consideration for FAP Related Polyposis Genetic Syndromes Associated with Gastric Cancer Screening and Surgical Considerations in Hereditary Diffuse Gastric Cancer and more **Inflammatory Bowel Disease** Russell D. Cohen, 2017-06-28 The latest edition of this text provides a comprehensive overview of the natural flow of knowledge regarding inflammatory bowel disease with an emphasis on state of the art approaches that should be the basis for diagnosis and treatment of most patients In addition to updated chapters this volume includes new chapters on such topics as the impending biosimilar revolution quality of care and new challenges to previously held beliefs about IBD diagnosis treatment and pathogenesis The book is also one of the first to have a chapter written specifically by and for physician extenders in the training of colleagues and the treatment of patients which is of increasing importance moving forward in the medical profession Written by experts in the field Inflammatory Bowel Disease Diagnosis and Therapeutics Third Edition is a valuable resource for physicians nurses researchers and other health care providers interested in the latest cutting edge knowledge for treating patients with inflammatory bowel disease **Abridged Index Medicus**, 1997

Contemporary Issues in Colorectal Cancer Deborah T. Berg, 2001 Providing up to date management information for nurses educating the public on and caring for patients with colorectal cancer these 15 contributions by US nursing specialists cover epidemiology and risk prevention and detection including controversies over screening and the role of diet patho

American Gastroenterological Association Colon Cancer Screening Guidelines Book Review: Unveiling the Magic of Language

In an electronic digital era where connections and knowledge reign supreme, the enchanting power of language has become more apparent than ever. Its power to stir emotions, provoke thought, and instigate transformation is really remarkable. This extraordinary book, aptly titled "**American Gastroenterological Association Colon Cancer Screening Guidelines**," published by a highly acclaimed author, immerses readers in a captivating exploration of the significance of language and its profound effect on our existence. Throughout this critique, we will delve into the book's central themes, evaluate its unique writing style, and assess its overall influence on its readership.

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