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August 14, 2023

Dear Dr. Atiq,

The colorectal cancer (CRC) community including survivors, loved ones, advocacy, and physician organizations are frustrated and disappointed with the preventive CRC screening guidance that the American College of Physicians (ACP) published on July 31, 2023. Issuing guidance regarding age and screening modalities that conflict with recommendations provided by the United States Preventive Services Task Force (USPSTF),<sup>1</sup> the National Colorectal Cancer Roundtable (NCCRT), the American Cancer Society (ACS),<sup>2</sup> the National Comprehensive Cancer Network (NCCN), the Multi-Society Task Force on Colorectal Cancer,<sup>3</sup> the American College of Gastroenterology (ACG),<sup>4</sup> and other National organizations creates confusion among healthcare providers and patients.

Since the USPSTF lowered the screening age in 2021, advocacy organizations and physician groups have worked tirelessly to communicate this change and raise awareness to reach average-risk patients aged 45 and older who have not been screened. The USPSTF guidelines were updated, using gold standard methods, in direct response to the increase in the incidence of early-age onset colorectal cancer (EAO-CRC). Currently, up to 10% of colorectal cancer diagnoses occur in those younger than age 50 and it is projected that in 2030 colorectal cancer will be the leading cause of cancer deaths in people ages 20-49.<sup>5</sup>

Contrary to what is stated in ACP's clinical guidance, there are ample data and evidence that clearly show beginning CRC screening for average risk patients at 45 saves lives.<sup>6,7,8,9,10</sup> As physicians, you are aware that for many communities equitable access to screening and quality care can be challenging. ACP's guidelines limit screening availability for patients 45 - 49yrs old, inhibit patient choice by reducing screening options, and will jeopardize patient participation in colorectal cancer preventive screening. Colorectal cancer prevention and early detection messaging must be consistent across all organizations to effectively reduce colorectal cancer mortality rates.

The undersigned organizations stand united in upholding recommendations for colorectal cancer screening starting at age 45. Additionally, we hope that ACP will seriously reconsider their current guidance and update it to be inclusive of all screening options and in line with the colorectal cancer community to help us save lives.

Sincerely,

Academy of Oncology Nurse & Patient Navigators  
AliveAndKickn  
American Association of Medical Assistants  
American College of Gastroenterology  
American College of Radiology  
American Gastroenterological Association  
American Society for Gastrointestinal Endoscopy

Association of Black Gastroenterologists and Hepatologists  
Bluem  
California Colorectal Cancer Coalition (C4)  
Cancer Support Community  
Cheeky Charity Inc.  
Colon Cancer Coalition  
Colon Cancer Foundation  
Colon Cancer Prevention Project  
COLONTOWN  
Color of Crohn's and Chronic Illness  
Colorado Cancer Coalition  
Colorectal Cancer Alliance  
Digestive Disease National Coalition (DDNC)  
Fight Colorectal Cancer  
Florida Gastroenterologic Society  
FORCE: Facing Our Risk of Cancer Empowered  
Georgia Center for Oncology Research and Education  
Georgia Gastroenterologic and Endoscopic Society  
GI Cancers Alliance  
Guardant Health  
Hitting Cancer Below the Belt  
Louisiana Cancer Prevention & Control Programs  
Lymphoma Research Foundation  
Missouri Association of Area Agencies on Aging  
Missouri Partnerships to Increase Colorectal Cancer Screening  
National LGBT Cancer Network  
Nebraska Cancer Coalition  
New Mexico Medical Society  
New York Society for Gastrointestinal Endoscopy (NYSGE)  
ONE CANCER PLACE  
Pennsylvania Medical Society  
Pennsylvania Society of Gastroenterology (PSG)  
Prevent Cancer Foundation  
Quality Health Associates of North Dakota  
Raymond Foundation  
Saint Agnes Medical Center  
Sanford Health  
South Carolina Gastroenterology Association  
South Carolina Gastroenterology Association Foundation  
The Blue Hat Foundation  
The Collaborative Group of the Americas on Inherited Gastrointestinal Cancers  
The Gloria Borges WunderGlo Foundation  
The Ruesch Center for the Cure of Gastrointestinal Cancers  
Washington Colon Cancer Stars  
Women In Endoscopy  
Wyoming Chapter of the American Academy of Family Physicians

C.C.

- Priya Radhakrishnan, MD, FACP, Chair, Board of Governors
- Eileen D. Barrett, MD, MPH, SFHM, MACP, Chair, Board of Regents
- Shari M. Erickson, MPH, Chief Advocacy Officer and SVP, Governmental Affairs and Public Policy

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- <sup>1</sup> US Preventive Services Task Force. Screening for Colorectal Cancer: US Preventive Services Task Force Recommendation Statement. *JAMA*. 2021;325(19):1965–1977. doi:10.1001/jama.2021.6238
- <sup>2</sup> Wolf AMD, Fontham ETH, Church TR, et al.; Colorectal cancer screening for average-risk adults: 2018 guideline update from the American Cancer Society. *CA Cancer J Clin*. 2018;68(4):250-281.
- <sup>3</sup> Patel, S. G., May, F. P., Anderson, J. C., Burke, C. A., Dominitz, J. A., Gross, S. A., Jacobson, B. C., Shaukat, A., & Robertson, D. J. (2022). Updates on Age to Start and Stop Colorectal Cancer Screening: Recommendations From the U.S. Multi-Society Task Force on Colorectal Cancer. *Gastroenterology*, 162(1), 285–299. <https://doi.org/10.1053/j.gastro.2021.10.007>
- <sup>4</sup> Shaukat, Aasma MD, MPH, FACG1,2; Kahi, Charles J. MD, MSc, FACG3,7; Burke, Carol A. MD, FACG4; Rabeneck, Linda MD, MPH, MACG5; Sauer, Bryan G. MD, MSc, FACG (GRADE Methodologist)6; Rex, Douglas K. MD, MACG3. ACG Clinical Guidelines: Colorectal Cancer Screening 2021. *The American Journal of Gastroenterology* 116(3):p 458-479, March 2021. | DOI: 10.14309/ajg.000000000001122
- <sup>5</sup> Rahib, L., Wehner, M. R., Matrisian, L. M., & Nead, K. T. (2021). Estimated Projection of US Cancer Incidence and Death to 2040. *JAMA network open*, 4(4), e214708.
- <sup>6</sup> Davidson KW, Barry MJ, Mangione CM, et al.; Screening for colorectal cancer: US Preventive Services Task Force recommendation statement [published correction appears in *JAMA*. 2021;326(8):773]. *JAMA*. 2021;325(19):1965-1977.
- <sup>7</sup> Knudsen AB, Rutter CM, Peterse EFP, et al. Colorectal Cancer Screening: An Updated Modeling Study for the US Preventive Services Task Force. *JAMA*. 2021;325(19):1998–2011. doi:10.1001/jama.2021.5746
- <sup>8</sup> Ma W, Wang M, Wang K, et al. Age at Initiation of Lower Gastrointestinal Endoscopy and Colorectal Cancer Risk Among US Women. *JAMA Oncol*. 2022;8(7):986–993. doi:10.1001/jamaoncol.2022.0883
- <sup>9</sup> Patel SG, May FP, Anderson JC, Burke CA, Dominitz JA, Gross SA, Jacobson BC, Shaukat A, Robertson DJ. Updates on Age to Start and Stop Colorectal Cancer Screening: Recommendations From the U.S. Multi-Society Task Force on Colorectal Cancer. *Gastroenterology*. 2022 Jan;162(1):285-299. doi: 10.1053/j.gastro.2021.10.007. Epub 2021 Nov 15. Erratum in: *Gastroenterology*. 2022 Jul;163(1):339. PMID: 34794816.
- <sup>10</sup> Shaukat, Aasma MD, MPH, FACG1,2; Kahi, Charles J. MD, MSc, FACG3,7; Burke, Carol A. MD, FACG4; Rabeneck, Linda MD, MPH, MACG5; Sauer, Bryan G. MD, MSc, FACG (GRADE Methodologist)6; Rex, Douglas K. MD, MACG3. ACG Clinical Guidelines: Colorectal Cancer Screening 2021. *The American Journal of Gastroenterology* 116(3):p 458-479, March 2021. | DOI: 10.14309/ajg.000000000001122