

F!GHTTM
COLORECTAL CANCER

OUR WEBINAR WILL BEGIN SHORTLY



Screening for Colorectal Cancer: You've got options



TODAY'S WEBINAR



01 QUESTIONS

Ask a question in the panel on the right side of your screen

02 WEBINAR ARCHIVE

Watch a recording of this webinar on the Fight CRC website. Visit FightCRC.org

03 TWEET ALONG!

Follow along on Twitter. Use the hashtag [#CRCWebinar](https://twitter.com/hashtag/CRCWebinar)

Resources

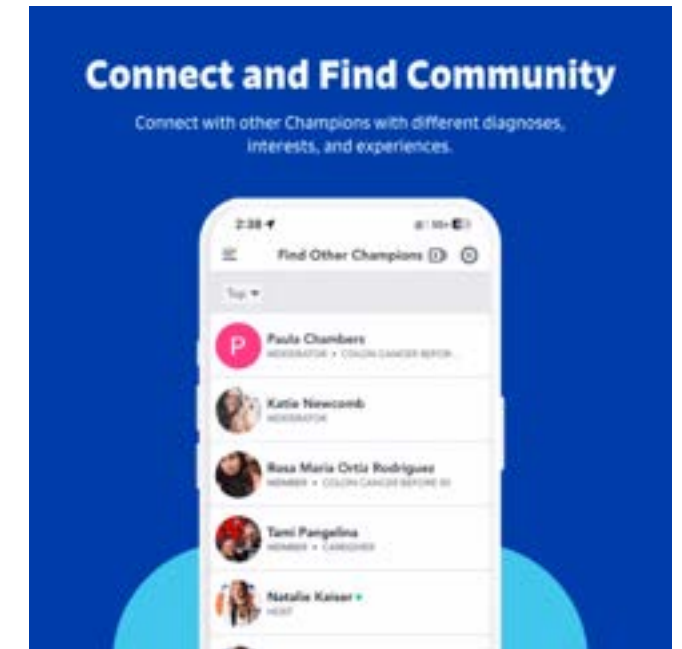
Fight CRC offers a wide variety of resources for those touched by colorectal cancer. Visit FightCRC.org to view, download, and order the latest resources.



Dedicated virtual
meetup spaces



Free Resources



Community of Champions App

FIGHTTM

COLORECTAL CANCER

The information and services provided by Fight Colorectal Cancer are for general informational purposes only. The information and services are not intended to be substitutes for professional medical advice, diagnoses or treatment.

If you are ill, or suspect that you are ill, see a doctor immediately. In an emergency, call 911 or go to the nearest emergency room.

Fight Colorectal Cancer never recommends or endorses any specific physicians, products or treatments for any condition.

TODAY'S PRESENTER



Fola May, MD, PhD, MPhil
Research-Scientist
Fight CRC Board Member and
ABGH Co-Founder

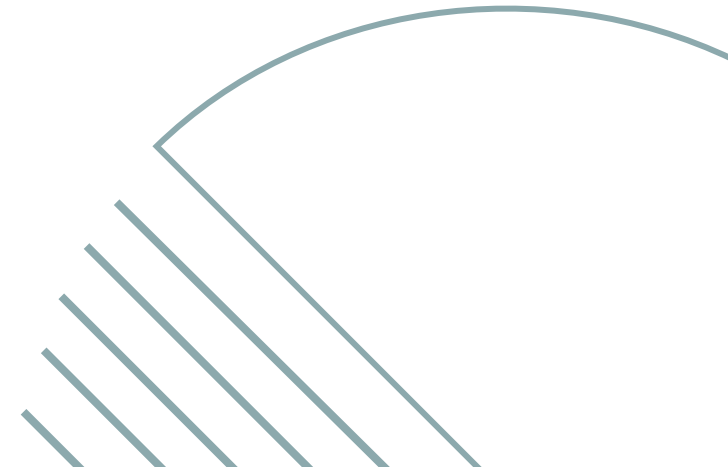
Screening Options



WHY IS SCREENING FOR CRC SO IMPORTANT?

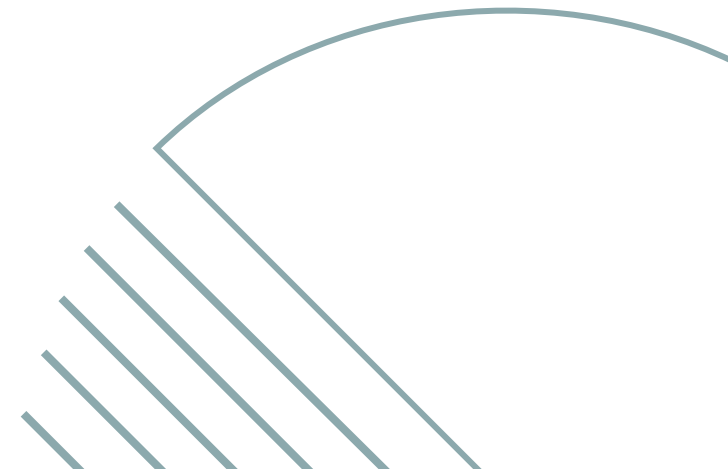
EAO CRC STATISTICS:

- Of all cancers, CRC will take the most lives of people under 50 by 2030.
- The incidence of early - age onset CRC - diagnoses under the age of 50 – is expected to increase by more than 140% by 2030. That means more than 27,000 people under age 50 will be diagnosed in 2030.
- Among adults under 50, CRC is now the top cause of cancer death in men and second top cause in women. This is a change from its fourth - place rank in 1998, only 26 years ago.
- The number of patients in the US diagnosed under 55 years of age doubled from 11% in 1995 to 20% in 2019



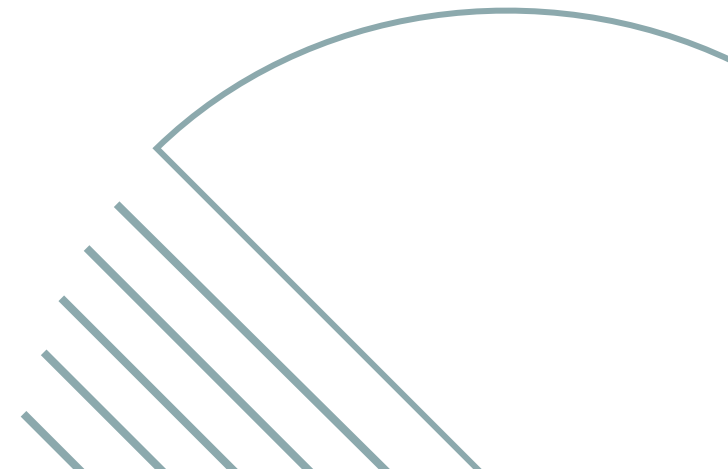
GENERAL CRC STATISTICS:

- In 2024, the American Cancer Society estimates there will be 152,810 new cases of CRC in the U.S., and a total of 53,101 people will die from these cancers.
- In 2020, there were an estimated 1,388,422 people living with CRC in the U.S.
- In the U.S., CRC is the third most common cancer cause of death for women and men,
- When we combine men and women, CRC is the second most common cause of cancer death.



GENERAL CRC STATISTICS:

- Those with a family history of CRC are at a higher risk and need to be screened earlier than 45.
- Between 25% - 30% of CRC patients have a family history of the disease.
- All people with a first degree relative (mother, father, brother, sister) with a CRC diagnosis should be screening at age 40, or 10 years before the youngest diagnosis of CRC in the family.



WHY AREN'T YOU GETTING SCREENED?

- One in three adults aged 45-75 are not getting screened as recommended
- There are more than 20 million Americans eligible for CRC screening who have not been screened.
- In 2021, 19.7% or fewer than 4 million of the eligible 19 million adults age 45-49 years, were up-to-date for CRC screening.
- The number of patients in the U.S. diagnoses with advanced - stage colorectal cancer increased from 52% in the mid-2000s to 60% in 2019. Early-stage cancer is easier to treat.

Screening Options



WHO NEEDS TO BE SCREENED, AND WHEN?

WHAT ARE MY SCREENING OPTIONS FOR CRC?

COLONOSCOPY

- Often considered the “gold standard” for colorectal cancer screening, as it can identify polyps and remove them during the same procedure.
- Requires thorough bowel prep.
- Performed in a hospital or outpatient surgical center by a physician, usually a gastroenterologist.
- Uses a colonoscope, a thin, flexible tube containing a camera and tools that allows a physician to look at the inside of the colon,
- Repeated every 10 years, if normal.

FIT

- This test is collected at home and sent to a lab, which looks for small amounts of blood in your stool.
- One stool sample is needed .
- Specimen is collected at home .
- No bowel prep required .
- Affordable and simple to use .
- Repeated every year, if normal .
- ***Positive results require a follow-up colonoscopy.***

FIT-DNA/MT-SDNA

- This is an at - home test that looks for abnormal sections of DNA within your stool, as well as small traces of blood.
- One stool sample is needed, and collected at home
- No bowel prep is required
- Repeat every three years, if normal
- ***If positive, a follow-up colonoscopy is required.***

Screening Experiences

MARC MOORE

Colonoscopy

SHAWNA BROWN

FIT

DAVID SHEIR

FIT- DNA/MT - sDNA (Cologuard)





QUESTION AND ANSWER

Type in your questions on the panel on the right side of your screen



Fight Colorectal Cancer Mission

We FIGHT to cure colorectal cancer and serve as relentless champions of hope for all affected by this disease through informed patient support, impactful policy change, and breakthrough research endeavors.

A photograph of two female scientists in a laboratory setting. They are both wearing white lab coats with the 'Promega' logo on the chest and blue nitrile gloves. The scientist on the right is using a pipette to transfer liquid into a small vial. The scientist on the left is smiling and looking towards the other. The background is a blurred laboratory environment. The entire image has a semi-transparent blue and purple gradient overlay.

THANK YOU