

National Clinical Alert: Young Onset Colorectal Cancer™



Early-age onset colorectal cancer (EAO-CRC) is **rising at an alarming rate**

Patients younger than 55 are 58% more likely to be diagnosed with advanced stage (III or IV) disease

58%

WHY?

- ✓ Low symptom awareness
- ✓ Less access to medical care
- ✓ Symptoms dismissed by provider
- ✓ Misdiagnosis

REFER PATIENTS WITH THESE SIGNS & SYMPTOMS FOR A DIAGNOSTIC EVALUATION!

- ✓ Rectal bleeding
- ✓ Change in bowel movement
- ✓ Diarrhea
- ✓ Abdominal pain
- ✓ Increased platelets
- ✓ Low mean red cell volume
- ✓ Low hemoglobin
- ✓ Abnormal liver function
- ✓ Raised inflammatory markers
- ✓ Unexplained fatigue or weight loss

FAMILY HEALTH HISTORY (FHH) IS IMPORTANT TO IDENTIFY:

1

Individuals at an increased risk of developing CRC

2

Those eligible for screening at an earlier age (<45 years)

3

Those eligible for more frequent screening

YOUNG ADULTS AT HIGH-RISK HAVE:

First-degree relative(s) with CRC

First-degree relatives with advanced colorectal polyps

Hereditary syndromes, such as, **Lynch syndrome**, **Familial Adenomatous Polyposis (FAP)**, **MUTYH-associated polyposis (MAP)**, and **Germline variants associated with CRC**



IMPORTANT ACTION STEPS

- 1 Education campaigns for the public
- 2 Educate providers about the rise in EAO-CRC and the importance of FHH
- 3 Physical exam and referral to a gastroenterologist/surgeon or endoscopist for anyone—regardless of age—who presents with any symptoms of CRC

Talk to your patients about:

- ✓ **BASIC DIGESTIVE HEALTH**
- ✓ **WHAT AND WHERE THE COLON IS**
- ✓ **NOT TO DISREGARD THE SYMPTOMS OF CRC**

REMEMBER!

The U.S. Preventive Services Task Force has updated its guidelines for CRC screening. **Average-risk adults can start screening at age 45 years.**

CONTRIBUTORS TO THIS CLINICAL ALERT: Andrew Albert, MD; Chelsea Boet, MD (deceased); Cindy Borassi; Anne Carlson; Whitney Jones, MD; Erin Peterson; and Thomas Weber, MD, FACS (deceased)

