

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/implementing-the-new-crc-screening-guidelines-into-clinical-care/17901/>

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Implementing the New CRC Screening Guidelines into Clinical Care

Announcer:

You're listening to *Clinician's Roundtable* on ReachMD. On this episode, sponsored by Exact Sciences, we'll hear from Dr. Paul Doghramji, who's a Senior Family Physician with Collegeville Family Practice and the Medical Director of Health Services for Ursinus College in Pennsylvania. He'll be discussing how we can talk to patients about colorectal cancer screening options. Here's Dr. Doghramji now.

Dr. Doghramji:

In the last several years, the American Cancer Society, followed by the USPSTF, lowered the age of first colon cancer testing to be 45 years of age. Now as the rates of colon cancer are rising among young adults, that's why this was done. The updated guidelines then are calling for screening to start at age 45 instead of 50. And they're expected to lead to earlier detection and improved outcomes.

There are several barriers or several problems that are occurring as far as healthcare clinicians buying into screening their patients or advising their patients to be screened at this earlier age between 45 and 50. Some of them are just not knowledgeable about it. And I think that they need to update their information foundation on colorectal cancer screening that it should be at 45 as opposed to 50. So an important thing is healthcare provider knowledge.

But also, some patients and a lot of young adults don't think that cancer can happen to them. And so maybe they're not going to come to their clinicians or even want to talk about it, or maybe they'll even ignore it. So there are some barriers that involve knowledge.

Fortunately, a lot of our patients do come to see us in their mid-40s and over. Under 45 years of age or so, most patients don't come in for conditions because usually, they don't have a condition. But around 40, 45, or 50 or so, we see some problems developing like diabetes, hypertension, and hypercholesterolemia, and patients start to get concerned about their health; they have young families, and they want to stay healthy. So that can be an opportunity for them to come in, let's say, for an adult well visit. That should be the opportunity for the healthcare provider to talk about early detection and prevention.

We now know that when you do testing and you catch colorectal cancer early or even the precursors, which are polyps, there is a dramatic drop in the rates of colorectal cancer development and death from colorectal cancer. So we know that it's there. We know that we can do a tremendous good for our patients if we do the screening tests for them at age 45 and over.

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