



**NEW YORK CITY DEPARTMENT OF HEALTH
AND MENTAL HYGIENE**
Dave Chokshi, MD
Commissioner

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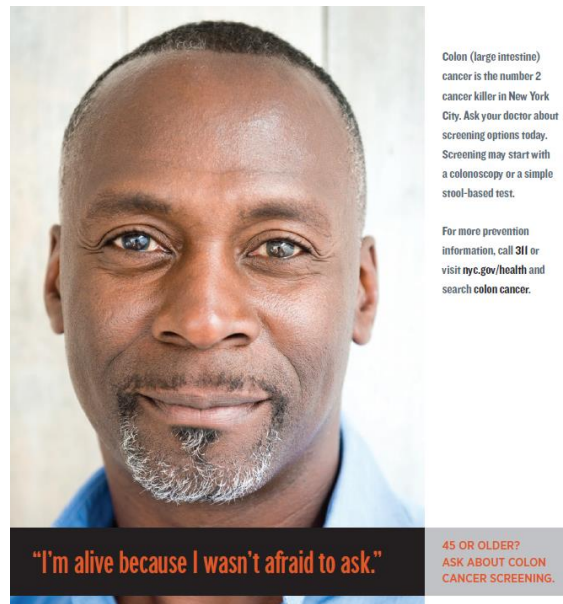
Health Department Urges Colon Cancer Screening Following Revised Recommendations

New Yorkers are being diagnosed with colon cancer at younger ages. The Health Department now recommends health care providers consider starting screening at age 45

Colon cancer incidence is increasing among New Yorkers younger than 50

September 4, 2020 – The Health Department is encouraging New Yorkers to get screened for colon cancer and alerting health care providers to the risk of colon cancer at younger ages. The New York City recommendations address both screening age and screening tests.

“Recent days have reminded us of the urgency of screening, detection and treatment for colon cancer,” said **Health Commissioner Dr. Dave Chokshi**. “The latest data showing New Yorkers are getting colon cancer at younger ages are concerning and led us to call attention to the option of screening at a younger age. I urge New Yorkers to speak with their providers about screening options.”



Colon cancer has been increasing in New Yorkers under age 50, and it remains the second leading cause of cancer death. The incidence rises with age, from 31 per 100,000 in adults ages 45 to 49, and 159 per 100,000 by ages 70 to 74, according to the most recent NY State Cancer Registry data. Due to the increase in colon cancer at younger ages, health care providers are asked to consider having patients at average risk of colon cancer start screening at age 45, earlier if you are at increased risk of colon cancer. Screening should start no later than age 50.

To encourage New Yorkers to get screened, the Health Department is also expanding the recommendation for screening tests to include both colonoscopy and stool-based testing for people at average risk. More [colon cancer](#) information for New Yorkers is available through a new brochure, fact sheets about test options, and a graphic novella about colonoscopy. They are all available by visiting nyc.gov and searching “colon cancer.”

About a third of colon cancer deaths in New York City are in people younger than 65. Data also show that Black New Yorkers are at increased risk of premature death from colon cancer. Screening at younger ages is particularly relevant for Black New Yorkers, whose risk for colon cancer around age 50 is higher than for any other racial or ethnic group. In 2013-2017, Black New Yorkers ages 45 to 64 had 20.2 deaths from colon cancer per 100,000 people, while whites had 14.1, Latino/a 11.7, and Asians 10.7.

“We are seeing higher risk of colon cancer among Black New Yorkers by ages 50-54. We must minimize any structural barriers, including bias, to treatment. Early detection is the best treatment,” said **Deputy Commissioner Dr. Torian Easterling**. “These life-saving guidelines are especially needed in Black and Brown communities to ensure we address existing inequities, reduce the stigma of testing and empower New Yorkers to save lives.”

“The tragic and untimely death of Chadwick Boseman was a major blow to so many young men and women of color who finally saw themselves represented positively onscreen. We’ve lost too many young warriors like this great talent to a disease that is curable, treatable, and preventable. While there was only one Black Panther, we all have an opportunity to be superheroes by encouraging friends and loved ones to get screened early for colon cancer and eat a diet rich in foods that prioritize prevention. With cases among those under age 50 on the rise, it is more crucial than ever that we spread this message far and wide,” said **Brooklyn Borough President Eric Adams**.

“Colon cancer is the second deadliest form of cancer in New York City but one of the most treatable forms of cancer when detected early. With the colon cancer rate rising among New Yorkers under 50, the Health Department’s new education and outreach efforts to New Yorkers and health care providers is both necessary and timely,” said **Assembly Member Richard N. Gottfried, Chair of the Assembly Health Committee**.

People with a family history, such as colon cancer or colon polyps in a family member, and people with certain genetic syndromes, ulcerative colitis, or Crohn’s disease may need screening even earlier, and specifically with colonoscopy. All New Yorkers should share their medical and family histories with their health care providers and discuss their colon cancer risk. A new [colon cancer screening form](#) can help them do that.

Although COVID-19 continues to spread across the city, it is safe to get medical care, as long as New Yorkers take steps to protect themselves and others. Now is a good time to get the care that may have been delayed while New York City was on pause, including cancer screenings.

The new Health Department recommendation was developed in collaboration with the [Citywide Colorectal Cancer Control Coalition \(C5\)](#), a group of public health professionals, clinicians, non-profit partners and researchers who advise on colon cancer prevention to lower the burden of disease and increase screening rates in NYC. The new recommendation regarding screening age aligns with the 2018 colon cancer screening guideline of the American Cancer Society, and most major U.S. guidelines endorse a choice of screening tests for people who are at average risk. C5 will meet for a Virtual Summit October 22, 2020.

This spring, the Health Department launched a citywide media campaign that ran in English, Spanish and Chinese titled “I’m Alive Because I Wasn’t Afraid to Ask,” which encouraged New Yorkers age 45 and up to talk to their providers about colon cancer screening.

The agency also published a [Vital Signs report](#) highlighting trends and characteristics of timely colon cancer screening in New York City through 2018. The report documented how in 2017, Black and White New Yorkers had the highest age-adjusted rate of death from colon cancer at 13.8 and 12.6 deaths per 100,000 residents, respectively. In 2018, among New York adults ages 50 and older, the timely screening rate was 72% overall, including colonoscopy within the past 10 years and/or stool-based testing within the past year.

Anyone with possible colon cancer symptoms should seek medical evaluation, even if you are younger than the recommended screening age. Symptoms can include a change in bowel movements, such as new constipation or diarrhea, that doesn’t go away, blood in your stool or rectal bleeding, abdominal pain, and unintended weight loss.

Colon cancer often develops slowly. Finding precancerous polyps at age 45-49 could reduce new cases over the next 10 or more years of life. Finding early cancers in the same age range could reduce the number of late stage diagnoses over the next several years of life, which could also reduce premature deaths from colon cancer.

A [colonoscopy](#) is a visual test, using a small camera to look inside the colon and rectum for signs of cancer. This procedure can both detect cancer and remove polyps – small growths that may develop into cancer if left alone. [Stool-based tests](#) look for signs of cancer in the stool and can also detect some polyps. Abnormal results must be followed by a colonoscopy. A colonoscopy is recommended every 10 years for people at average risk. Stool-based tests need to be done every one to three years, depending on the specific test.

Most insurance plans, including Medicaid and Medicare, cover colon cancer screenings for people age 50 and older, often with no co-pay. For New Yorkers between ages 45 and 49, coverage for screening varies. Some insurers will cover everyone, including people at average risk. Some insurers cover screening below age 50 when there is increased risk, such as a close family member with colon cancer.

Local resources:

- The Health Department’s Community Cares Project (CCP) connects uninsured New Yorkers to free colonoscopy screenings when referred by participating community health centers. Since August 2013, more than 4,000 uninsured New Yorkers have completed colonoscopy screenings through CCP free of charge. Uninsured New York City residents who would like to learn more about this option should contact a [CCP primary care provider](#) site.
- Uninsured New Yorkers age 50 and over may be eligible for free or low-cost screening. The New York State Cancer Services Program provides colon cancer screening to uninsured New Yorkers ages 50 to 75 years. For more information, New Yorkers can visit <https://www.health.ny.gov/diseases/cancer/services/> or call 1-866-442-CANCER to connect directly to the program and find out if they are eligible.

- The Health Department offers a comic book style novella, [Preparing for a Colonoscopy: Sandra's Story](#), about colon cancer screening focused on colonoscopy preparation and procedures. It is available in various languages to doctors' offices, hospitals and to individuals [online](#) or by calling 311.
- A background on the new recommendations for providers is available from the Health Department: [2020 Update NYC Recommendations to Reduce Morbidity and Mortality from Colorectal Cancer](#).

Recommendations for all New Yorkers

Talk to your health care provider about your risk for colorectal cancer. Ask your provider about starting colon cancer screening at age 45. You may need to start earlier if you are at increased risk, for example due to colon cancer in your family, or if you have ulcerative colitis or Crohn's disease.

- Discuss screening risks and benefits with your provider.
- Ask about screening options, which may include a colonoscopy or a stool-based test such as fecal immunochemical test (FIT), high-sensitivity guaiac-based fecal occult blood test (HSgFOBT), and multi-target stool DNA test (FIT-DNA).
- Check with your insurer about your health insurance coverage.
- Schedule and complete the chosen screening test.
 - If you have a stool-based test, remember to return the test kit and follow up with a colonoscopy promptly if the stool-based test result is abnormal.
- Seek care for symptoms that could be colon cancer, even if you are younger than 45. Concerning symptoms include:
 - A change in bowel movements, such as new constipation or diarrhea, that doesn't go away
 - Blood in your stool or rectal bleeding
 - Abdominal pain
 - Unintended weight loss

To reduce your risk of colon cancer:

- Maintain a healthy weight.
- Exercise regularly.
- Eat fewer processed meats, such as bacon, sausage, jerky, hot dogs and deli meats.
- If you smoke, [make a plan to quit](#).
- Reduce how much and how often you drink alcohol.

For more information on where to go for colon cancer screening, or if you are uninsured and would like assistance to get screened, **call 311** or search "colon cancer" on nyc.gov/health.

“This recommendation helps address the emerging threat of early onset colorectal cancer while also facilitating ways to improving screening rates of our traditional group of people 50 and over, whose screening rates have recently plateaued,” said **Mount Sinai Beth Israel Chair of Department of Medicine Dr. Matthew Weissman**.

“For colorectal cancer screening, age 45 is the new 50,” said **Memorial Sloan Kettering Cancer Center Emeritus Chief of Gastroenterology and Chair of Cancer Prevention Dr. Sidney Winawer**.

“These new guidelines encourage people to start the conversation earlier,” said **Columbia University Medical Center Director of Clinical Research at the Celiac Disease Center Dr. Benjamin Lebwohl**. “There’s no doubt that screening should happen at age 50—there’s strong evidence to support that this saves lives. But starting the conversation at age 45 may identify a compelling reason to get checked before, such as a family history, or the presence of symptoms.”

“The updated NYC colorectal cancer screening recommendations are an important advance by calling attention to the troubling increase in colorectal cancers among individuals younger than age 50,” said **Icahn School of Medicine at Mount Sinai Professor of Medicine & Oncological Sciences Dr. Steven Itzkowitz**. “And highlighting the fact that patients and physicians can choose among several highly effective screening tests.”

“These recommendations, which highlight the increasing risk of colon cancer in a younger age group and expand options for screening to include stool-based testing,” said **Montefiore Medical Center Director of Internal Medicine Residency Education Dr. Darlene Lefrancois**. “Go a long way toward ensuring all New Yorkers can get a timely colorectal cancer screening option that works best for them.”

“Based on recent changes in epidemiology (younger age of onset) and consistent with guidelines from the American Cancer Society, these new recommendations by the NYC Department of Health deserve careful consideration by primary care practitioners,” said **University at Texas MD Anderson Cancer Center Professor Emeritus Dr. Bernard Levin**. “These enhanced screening efforts should lead to a further decline in colorectal cancer incidence and mortality.”

“It's really important to emphasize that there are options when it comes to colorectal cancer screening. Not all New Yorkers will want colonoscopy as the first step, and we recommend the stool-based tests as equal options,” said **New York University (NYU) Langone Health Assistant Professor of Department of Medicine Dr. Peter Liang**. “We hope this will increase participation in screening, because the best test is the one that gets done. But any abnormal stool test still needs to be followed by a colonoscopy to complete the screening.”

“The American-Italian Cancer Foundation (AICF) was happy to hear that the NYC DOHMH will be recommending colon cancer screenings starting at age 45,” said **American-Italian Cancer Foundation Director of Cancer Screening, Outreach & Education Ruth L. Vega**. “AICF firmly believes in the importance of early cancer detection and knows that prevention is the key to survival. We applaud the NYC DOHMH for lowering the screening age for colon cancer in light of new data and for encouraging more New Yorkers to get tested.”

“There will be about 18,000 cases of colorectal cancer diagnosed in people under 50 nationwide this year – that’s the equivalent of 49 new cases per day,” said **Richard Wender, MD, Chair of the National Colorectal Cancer Roundtable**. “While we await answers about this alarming trend, it’s critical that we take steps to ensure more timely diagnosis among younger patients. That means lowering the recommended screening age and expanding screening test options. We applaud the NYC Department of Health for these new recommendations, which align with the American Cancer Society’s guideline, and we encourage all New Yorkers to talk to their doctor about their colorectal cancer risk. Remember: the best test is the one that gets done!”

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