

Early-Onset Colorectal Cancer and Lead-Time Messaging

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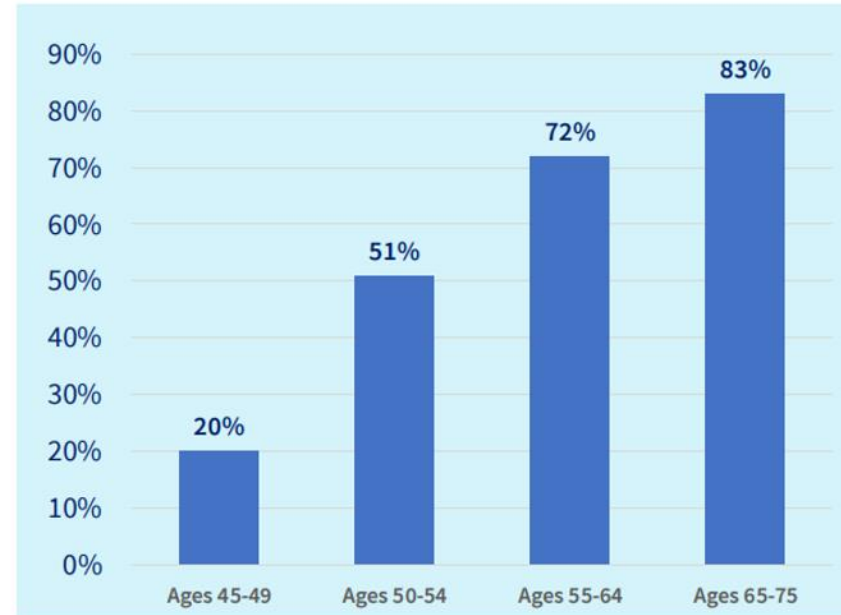
South Dakota Colorectal
Cancer Control Program

Presentation Objectives

- ▶ Review existing information on colorectal cancer occurring at a young age.
- ▶ Explore lead-time messaging in promoting timely screenings.
- ▶ Identify sources for obtaining lead-time messaging materials.

Why is on-time screening important?

- ▶ On-time screening rates for average risk individuals in the 45-54 age group are low.
- ▶ Only 59% of adults 45+ are up to date with screenings.
- ▶ Adherence to current guidelines could potentially prevent 16% of early age onset CRC and result in an earlier diagnosis in 51% (*Stanich et al., 2021*).



NHIS Colorectal Cancer Screening (%) in Adults 45 Years and Older, 2021, US
National Health Interview Survey, 2021



American Cancer Society Cancer Facts and Figures 2024

- ▶ CRC incidence and mortality rates have increased in the <55 age group.
- ▶ 1 in 5 people diagnosed are younger than 55 years old.
- ▶ 3 in 5 people are now being diagnosed with advanced-stage colorectal cancer.
- ▶ Diagnoses of people under 55 years of age doubled from 11% (1 in 10) in 1995 to 20% (1 in 5) in 2019.



[Cancer Facts & Figures 2024](#)

[Colorectal Cancer Facts & Figures 2023-2025](#)



How do we increase on-time colorectal cancer screening?

- ▶ Promote “lead-time” messaging
 - ▶ Commentary published in *Cancer*, 2019
- ▶ Improve risk assessment practices
 - ▶ *ACS Risk Assessment and Screening Toolkit (2018)*
- ▶ Identify best practices for messaging and educating about colorectal cancer screening before the recommended screening age.

Lead-time messaging is the delivery of accurate, relevant, and actionable information regarding CRC risk and risk-based screening options **prior** to the starting age recommended by the ACS for average and high-risk individuals. To maximize effectiveness, messages should be delivered **multiple times**.

National Colorectal Cancer Roundtable Lead-Time Messaging Project

- ▶ Identify messages that heighten awareness about CRC and the importance of on-time screening.
- ▶ Motivate and empower individuals at both average and familial risk to discuss screening with their providers prior to the recommended age of initiation.
- ▶ Determine effective messaging that best resonates with different target audiences.
- ▶ 3 phases: 15-minute online survey; 60-minute virtual interviews; 7-minute online survey and identified messages that would be most likely to motivate their decision to get screened on-time.

RECOMMENDED SCREENING AGE

Only 14%

Identify age 45 as the recommended screening age for average risk individuals



76%

Agree everyone should get screened when they reach the recommended age

Once presented with ACS' recommended age:



47%

think people should start based on whatever their HCP recommends



44%

think people should follow ACS' guidelines and start at age 45

4 in 10 45-49 year olds plan to wait for their HCP to bring up screening

INCREASING AWARENESS



78%

Important to
increase awareness
of CRC and CRC
screening



78%

People should be
educated about CRC
screening **long before**
the recommended age

Message

Colorectal cancer is often a silent disease. Usually, there are no symptoms. That's why getting screened is so important. It can help prevent colorectal cancer — or catch it early when it is easiest to treat. Most people should begin screening at age 45.



Why It Works

This message is compelling because it highlights the possible silent nature of CRC and the opportunity to prevent it.

We asked, "What comes to mind when hearing this message?"

- "That I could have zero signs and/or symptoms and still have it. I want to get checked and not wait until it's too late." (30–34-year-old)
- "That it's silent, meaning you might not have any symptoms." (40–44-year-old)
- "The fact that I cannot tell on my own without the help of screening whether I have colon cancer or not." (20–24-year-old)
- "It highlights the importance of screening and preventative care, which is the most helpful to people in general." (25–29-year-old)

Message

Eat well? ✓ Work out regularly? ✓ Don't smoke? ✓ What else?

You're taking all the right steps to live a healthy lifestyle. But are you missing one step that might be easier than you think? Talk to your doctor to find out if it's time for you to get screened for colorectal cancer and what screening options are right for you.



Why It Works

This message is compelling because when people think of health habits, screening is not top-of-mind. This message communicates that it should be, along with the usual measures that people can follow to remain healthy.

We asked, "What comes to mind when hearing this message?"

- "The message I selected speaks to someone like me who already takes care of their health but could be unaware of a silent cancer." (40–44-year-old)
- "Having a healthy lifestyle may not prevent the disease." (30–34-year-old)
- "This message makes it seem like if eating well and exercising are easy to do, so is getting screened for colon cancer." (25–29-year-old)
- "That living a healthy lifestyle is only one step of many to living a long life." (20–24-year-old)

Message

Did you know colorectal cancer is expected to be the leading cause of cancer-related death among 20–49-year-olds by 2030? It's never too early to talk to your doctor about when it's appropriate to start screening.



Why It Works

This message is compelling because people can identify with it since they fall within the age range/young adult demographic referenced in the message.

We asked, "What comes to mind when hearing this message?"

- "It illustrates that you're never too young." (35–39-year-old)
- "I am between the ages of 20–49, so this directly applies to me." (30–34-year-old)
- "Because that's my age range, and the numbers kind of surprised me." (40–44-year-old)

Message

Colorectal cancer is on the rise among young adults and among those who are too young to begin screening, two thirds experience symptoms for many months before they're finally diagnosed. Be sure to alert your doctor if you're experiencing blood in your stool, persistent abdominal pain, changes in bowel habits, or unexplained weight loss. If these symptoms persist, the possibility of colorectal cancer must be considered.



Why It Works

This message is compelling because participants can identify with it since they fall within the age range/young adult demographic referenced in the message.

We asked, "What comes to mind when hearing this message?"

- "It informs you that young adults like me can get it. It's best we get tested soon." (20-24-year-old)
- "It stands out because silent killers are the scariest to me, and I am a young adult, so it speaks directly to my demographic." (30-34-year-old)
- "Cancer is on the rise with younger generations and can be cured if detected early." (35-39-year-old)
- "It mentioned how even young people are susceptible to getting the disease, so it resonated with me since I am still in my 20s." (20-24-year-old)

Call to Action!

- ▶ Review Guidebook: 2023 Lead Time Messaging Guidebook - American Cancer Society National Colorectal Cancer Roundtable (nccrt.org)
- ▶ Implement Lead Time Messages for individuals within your setting
- ▶ Utilize SDCRCCP Social Media posts
- ▶ Know the red flag indicators for early-onset colorectal cancer

Guidebook Contents



Key Definitions & Screening Recommendations



National Data on CRC Screening & Rates



Recommended Lead Time Messages



Helpful Tactics to Use for Effective Messaging



Focus on Family History

SDCRCCP Social Media Posts

You're taking all the right steps to live a healthy lifestyle. You eat well, work out regularly, and refrain from smoking. But what about preventative cancer screenings?

Talk to your doctor to see if it's time to get screened for colorectal cancer and what screening option is right for you.

**EARLY DETECTION
SAVES LIVES.**

GET **TESTED**
FOR COLON CANCER
STARTING AT **AGE 45**
EVEN IF YOU FEEL HEALTHY.

GRAPHIC:

Colorectal cancer is often a silent disease. Usually, there are no symptoms.

That's why getting screened is so important. It can help prevent colorectal cancer – or catch it early when it is easiest to treat. Screening should begin at age 45.

**IF YOU ARE 45 YEARS
OR OLDER,
GET SCREENED.**



Risk of colorectal cancer increases as you age.

Focus on Family History

Insights Into Family History for Those Under 45:

- Fewer than half of individuals with a family history of CRC receive personalized counseling.
- Have a lack or limited understand of their family history.
- Haven't talked to provider about family history.
- Family history is not sufficiently tracked.
- Do not know their screening age could be different than 45.

The guidebook includes:

- Top tested messages for those with a family history
- Top tested messages about talking with family about CRC
- ACS NCCRT resources & tools: ***Risk Assessment & Screening Toolkit***



1 in 10 have a family history of CRC



Some mention people may have a family history and not know it. Some also note there are culture taboos and families not talking about health issues (specifically uncomfortable ones like CRC).

Among those with a family history

- Less than half (45%) have discussed their family history with a HCP
- Only 20% have discussed CRC screening with a HCP
- ~ 3 in 10 plan to wait for their HCP to bring up screening



- **55%** admit to being scared of the actual procedure to test for CRC
- **28%** say they're too young and have not given any thought to screening
- **22%** feel talking about CRC or CRC screening is embarrassing
- **63%** note the recommended screening age is 40 or earlier



Spotlight on the importance of a clinician's recommendation

We know a clinician's recommendation to get screened is incredibly important, as they are a trusted source for relaying health information.

People will be more motivated to get screened when it is recommended by their doctor or another medical professional.

- Many people under 45 have health insurance coverage and see a clinician for routine exams.
- Tend to trust clinician and believe something is being recommended, it is for good reason.
- Less likely to have conversations with health care providers about CRC screening, symptoms, and family history.
- Clinicians can help reduce CRC mortality by using family history to help assess risk.
- Promote primary prevention and early detection as well as considering CRC when evaluating patients with signs and symptoms, regardless of age.





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