

Consensus Cancer Screening Recommendations

The U.S. government and many professional societies and organizations have evidence-based recommendations about the use of the screening tests for the five cancers for which screening is most commonly conducted. Here, we highlight consensus, as of July 31, 2020, among these recommendations from the U.S. government's U.S. Preventive Services Task Force (USPSTF), the American Cancer Society (ACS), the National Comprehensive Cancer Network (NCCN), the American College of Physicians (ACP), the American College of Obstetrics and Gynecology (ACOG), the American Urologists Association (AUA), and the United States Multi-Society Task Force (MSTF) on colorectal cancer. Not all the professional societies and organizations have recommendations for every cancer screening test. In addition, very few of the professional societies and organizations have considered whether recommendations should vary by race and/or ethnicity, and this is an area of intensive research investigation.

Breast Cancer Screening



There is consensus among the ACOG, ACP, ACS, and USPSTF that women ages 50 to 74 who are at **average risk** of developing breast cancer should have regular screening mammograms. However, there is variability about whether this screening should be done every year or every other year.

Some professional societies and organizations recommend women at average risk for developing breast cancer begin regular screening mammograms at either age 40 or age 45. It is important to note, however, that all the groups support women ages 40 to 49 having the opportunity to have regular screening mammograms if they decide it is right for them. Relevant to this decision is the fact that African American women are more likely to be diagnosed with breast cancer at a younger age than white women and are more likely to be diagnosed with biologically aggressive forms of the disease at all ages.

Cervical Cancer Screening



There is consensus among the ACOG, ACP, and USPSTF that:

- **average-risk** women younger than 21 should not be screened;
- **average-risk** women ages 21 to 29 should have a Pap test every 3 years;
- **average-risk** women ages 30 to 65 should have either a Pap test every 3 years, a Pap test and HPV testing every 5 years, or HPV testing alone every 5 years; and
- women older than 65 should not be screened if they are at **average risk** of the disease because they have previously had regular screenings with normal results and are not otherwise at high risk of developing cervical cancer.

Colorectal Cancer Screening*



There is consensus among the ACS, ACP, NCCN, and USPSTF that adults ages 50 to 75 who are at **average risk** of developing colorectal cancer should be screened. How often a person should be screened depends on the screening test used.

Some professional societies and organizations, including ACS, recommend starting regular screening at age 45 and some recommend certain screening approaches over others. The overall message, however, is that using any of the approved tests is better than not being screened and that average-risk adults should consult with their health care providers to decide when to start screening and to choose the test that is right for them.

Of note, the Department of Health of Puerto Rico recommends that colorectal cancer screening for average risk individuals commence at age 40 years.

Several groups of individuals, including African Americans, are at **increased risk** for colorectal cancer. Colorectal cancer screening recommendations vary for these different groups but all involve earlier and/or more frequent use of the screening tests used to screen average-risk individuals.

For example:

- The ACS, NCCN, and MSTP on colorectal cancer recommend that individuals at **increased risk** because they have a first-degree relative who has been diagnosed with colorectal cancer should start screening with colonoscopy at age 40 or 10 years before the youngest case was diagnosed, whichever is earlier; and,
- the MSTP on colorectal cancer recommends that because African Americans are at **increased risk** for colorectal cancer they should begin screening at age 45.

Lung Cancer Screening



There is consensus among the ACS, NCCN, and USPSTF that annual screening with low-dose computed tomography should be limited to adults ages 55 to 80 who are at **high risk** for lung cancer because they have smoked at least one pack of cigarettes per day for 30 years, or the equivalent (two packs per day for 15 years, etc.), and who currently smoke or have quit within the past 15 years.

Prostate Cancer Screening



There is consensus among the ACS, ACP, AUA, and USPSTF that men ages 55 to 69 who are at **average risk** of developing prostate cancer talk to a physician about the benefits and potential harms of PSA testing before deciding if screening is right for them.

*USPSTF colorectal cancer screening guidelines are currently under review and will be updated in the near future. Some of the issues being reviewed are whether screening should begin at an earlier age for all average-risk individuals and whether recommendations should vary by race and/or ethnicity.