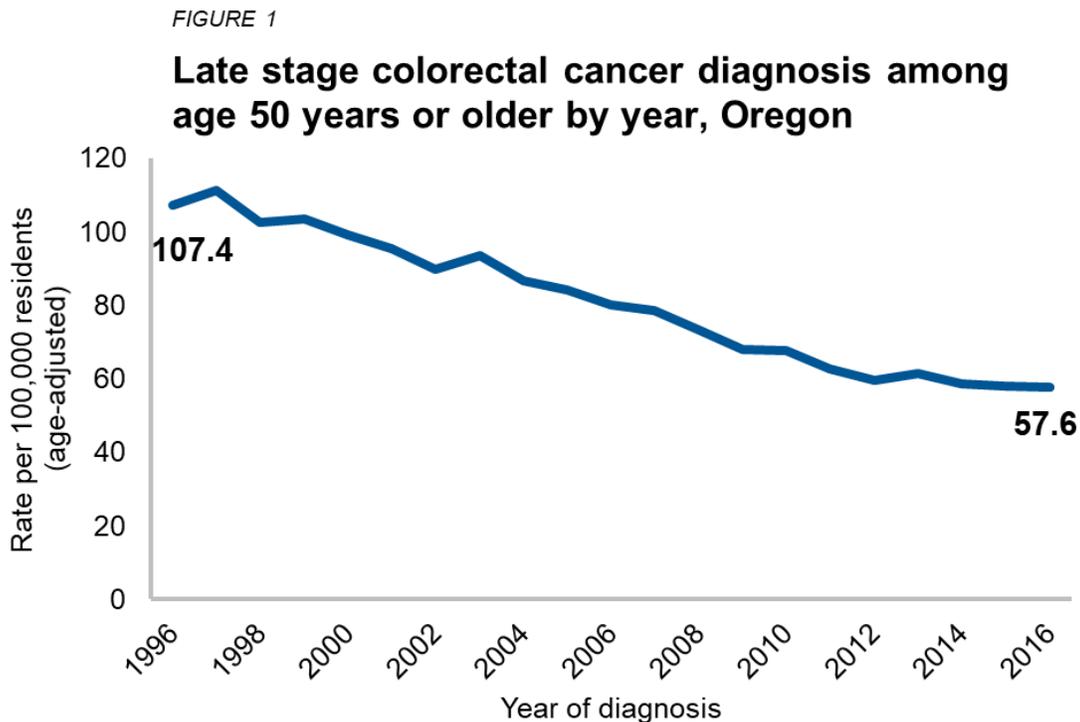


Access to Clinical Preventive Services

Colorectal cancer diagnosis and screening

Colorectal cancer is the second leading cause of cancer death among Oregonians. Colorectal cancer can be prevented through screening tests where precancerous polyps can be identified and removed. Screening can also detect cancers earlier when they are more easily treated.

In Oregon, there has been a steady decline in late stage colorectal cancer diagnoses over the past 20 years (Figure 1). This is likely due to the steady increase in colorectal cancer screening that occurred over this same time period.

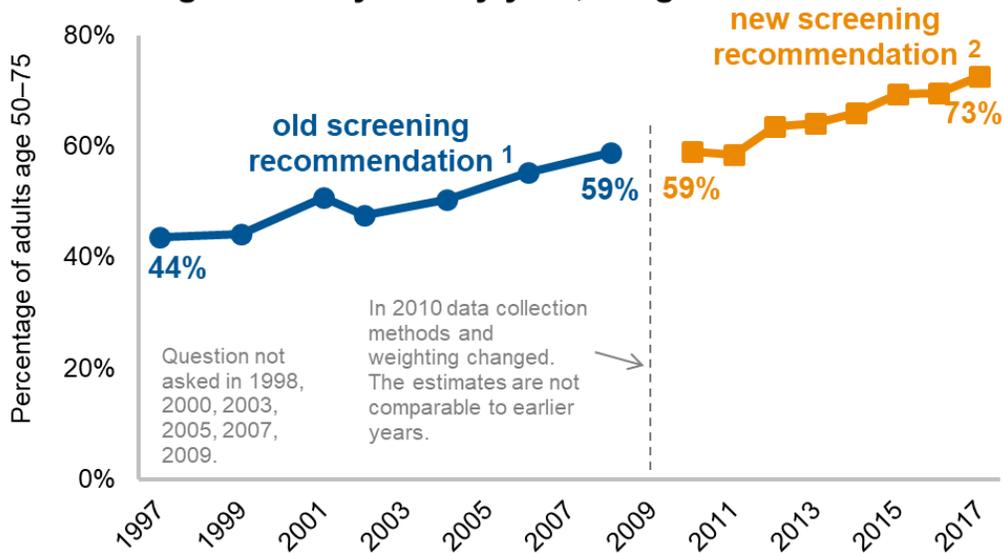


Source: Oregon State Cancer Registry (OSCaR)

In 2017 72.6% of adults aged 50–75 years had received the recommended colorectal cancer screening (Figure 2).

FIGURE 2

Colorectal cancer screening among ages 50–75 years by year, Oregon

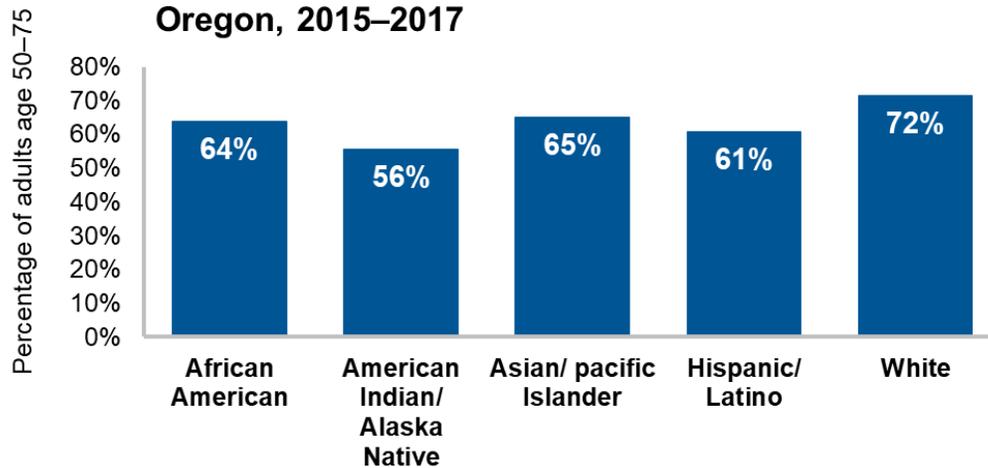


Source: Oregon Behavioral Risk Factor Surveillance System (BRFSS)

By race and ethnicity, non-Hispanic white had the highest proportion of appropriate colorectal screening at 72%. American Indian and Alaskan Native (AIAN) had the lowest at 56% (Figure 3).

FIGURE 3

Colorectal cancer screening among ages 50–75 years by race/ethnicity, Oregon, 2015–2017



Notes: All other groups exclude Hispanic ethnicity

Source: Oregon Behavioral Risk Factor Surveillance System (BRFSS) Race

¹ Old screening recommendations prior to 2009: For ages 50 to 75, Fecal Occult Blood Test (FOBT) in the past year or sigmoidoscopy or colonoscopy within the past 5 years.

² New screening recommendations since 2009: For ages 50 to 75, FOBT in the past year or a colonoscopy within 10 years or a sigmoidoscopy within the past the past 5 years with FOBT within the past 3 years.

For the downward trend in late stage diagnoses to continue, Oregon's screening rates must continue to improve.

Additional Resources: [The Cancer You Can Prevent](#), [Cancer in Oregon Reports](#), [Screening for Colorectal Cancer](#)

About the Data: The data source for cancer diagnoses is the Oregon State Cancer Registry (OSCaR). Late stage colorectal cancer diagnosis is defined as having spread to the lymph nodes, or with distant metastases. Rates are age-adjusted to the 2000 U.S. standard population. Population estimates used in calculating rates are from the National Center for Health Statistics (NCHS).

Data source for screening rates is the Oregon Behavioral Risk Factor Surveillance System (BRFSS). BRFSS is a telephone survey conducted annually among non-institutionalized adults age 18+. Since 2010, the BRFSS data have included cell phone respondents as well as those reached by landline, and data weighting methods have changed. Therefore, caution should be used in interpreting changes over time.

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