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Summary

Guidelines recommendations

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Mechanisms & Personalised Medicine | Digestive Oncology | Colorectal

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European Commission guidelines strongly recommend colorectal cancer screening for average-risk individuals age 50–69 using organised population-based programmes, with faecal immunochemical testing every 2 years as the preferred strategy.

KEY POINTS

- The speaker presented a strong recommendation for screening age 50–69 with moderate certainty of evidence, stating FIT (faecal immunochemical test) every 2 years extending to age 74 is the preferred option.
- If FIT is not implemented, the working group conditionally recommends endoscopy-based screening with colonoscopy every 15 years or flexible sigmoidoscopy every 10 years, both with low certainty of evidence.
- The speaker stated there is a conditional recommendation against lowering the screening age below 50, based on evaluation of absolute benefit versus harms, cost, sustainability, feasibility, and equity considerations.
- The guidelines use the GRADE approach and evidence-to-decision framework, considering not only benefit-harm ratio but also cost, values, acceptability, feasibility, equity, cost-effectiveness, and planetary health.
- The speaker reported that 20 recommendations on primary prevention and screening have been published, with upcoming recommendations on FIT cut-off thresholds and management of premalignant lesions, and risk-stratified screening approaches planned for 2027.

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