

Bowel cancer screening guidelines for a family history of colorectal cancer

Reference: Cairns et al Gut 2010 59:666-689

Individuals are at low/moderate risk of colorectal cancer (lifetime risk 1 in 12) if they have either

- One first degree relative (parent, sibling or child) with colorectal cancer under the age of 50
- Two relatives (including both parents) with an average age of over 60 years

The recommended surveillance for this group is a single colonoscopy at the age of 55 years. If polyps are identified the adenoma surveillance guidelines are followed.

Individuals are at moderately-high increased risk of colorectal cancer (lifetime risk 1 in 6-10) if they have either

- Three relatives with colorectal cancer in a first degree kinship (including both parents and a sibling), none diagnosed below the age of 50 years
- Two first degree relatives diagnosed with colorectal cancer with an average age under 60 years (including both parents)

The recommended surveillance for this group is 5 yearly colonoscopy between 50-75 years. If polyps are identified the adenoma surveillance guidelines are followed.

Individuals are at high risk of colorectal cancer if they have

- Three or more first degree relatives with colorectal cancer, one cancer diagnosed under the age of 50 years (Amsterdam I criteria)
- Three or more first degree relatives with colorectal cancer or a Lynch Syndrome associated cancer, one cancer diagnosed under the age of 50 years (Amsterdam II criteria)

The recommended surveillance for this group is; 1-2 yearly colonoscopy from the age of 25 years unless testing has excluded Lynch syndrome as a diagnosis in which case the frequency of colonoscopy may be reduced..

In those with a family history weaker than this, surveillance, other than the current NHS Bowel Screening Programme cannot be justified.