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Colonoscopy is indicated in unscreened elderly patients

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(HealthDay)—Colorectal cancer (CRC) screening should be considered as a cost-effective strategy in unscreened patients older than 75 years, according to research published in the June 3 issue of the *Annals of Internal Medicine*.

Frank van Hees, of the Erasmus University Medical Center in Rotterdam, Netherlands, and colleagues conducted a cost-effectiveness analysis of observational and experimental studies. The authors sought to determine whether CRC screening is indicated in unscreened elderly individuals and identify which test is indicated according to age.

The researchers found that, among unscreened elderly individuals who had no comorbid conditions, CRC screening was cost-effective up to age 86 years. Different age limits were appropriate according to type of

screening, including colonoscopy (up to age 83 years), sigmoidoscopy (age 84 years), and fecal immunochemical test (ages 85 and 86 years). CRC screening was cost-effective for unscreened individuals with severe comorbid conditions up to age 80 years (colonoscopy: up to age 77 years; sigmoidoscopy: up to age 78 years; and fecal immunochemical test: ages 79 and 80 years).

"This study has important implications," write the authors of an accompanying editorial. "Colonoscopy should be considered in every American aged 75 years (and in many who are older) who has not had colorectal cancer screening, and those who do not have a fatal illness will likely benefit from screening."

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