About 80% by 2018

What is 80% by 2018? "80% by 2018" is a National Colorectal Cancer Roundtable initiative in which hundreds of organizations have committed to substantially reducing colorectal cancer as a major public health problem for those 50 and older. These organizations are working toward the shared goal of 80% of adults aged 50 and older being regularly screened for colorectal cancer by 2018.

The 80% by 2018 initiative is led by the American Cancer Society (ACS), the Centers for Disease Control and Prevention (CDC) and the National Colorectal Cancer Roundtable (an organization co-founded by ACS and CDC).

80% by 2018 Vision Statement:
Our organizations stand united in the belief that we can substantially reduce colorectal cancer as a major public health problem. We have screening technologies that work, the national capacity to apply these technologies, and effective local models for delivering the continuum of care in a more organized fashion. Equal access to care is everyone's responsibility. We share a commitment to eliminating disparities in access to care. As such, our organizations will work to empower communities, patients, providers, community health centers, health systems, health plans and other partners to embrace these models and develop the partnerships needed to deliver coordinated, quality colorectal cancer screening and follow up care that engages the patient and empowers them to complete needed care from screening through treatment and long-term follow-up.

Why are organizations committing to 80% by 2018?

80% by 2018 Talking Points

Colorectal cancer is a major public health problem.

- Colorectal cancer is the second leading cause of cancer death in the U.S. when men and women are combined and a cause of considerable suffering among nearly 135,000 adults diagnosed with colorectal cancer each year.

- When adults get screened for colorectal cancer, it can be detected early at a stage when treatment is most likely to be successful, and in some cases, it can be prevented through the detection and removal of precancerous polyps.

- About 1 in 3 adults between 50 and 75 years old – about 23 million people – are not getting tested as recommended.

- The people less likely to get tested are Hispanics, American Indians or Alaska Natives, rural populations, men, those 50 to 64, and those with lower education and income.

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- Screening can save lives but only if people get tested.

- There are several recommended screening test options, including: colonoscopy, stool tests (guaiac fecal occult blood test [FOBT] or fecal immunochemical test [FIT]), and sigmoidoscopy.

- The best test is the one that gets done.

Our organizations stand united in the belief that we can substantially reduce colorectal cancer as a major public health problem.

- If we can achieve 80% by 2018, 277,000 cases and 203,000 colorectal cancer deaths would be prevented by 2030.[1]

- We know what we need to do to get more people screened for colorectal cancer, prevent more cancers and save lives.

- We share a commitment to eliminating disparities in access to care. Our organizations will work toward a common goal to empower communities, patients, health care providers, community health centers, health systems, health plans and other partners to close the screening gap.

- Achieving an 80% screening rate by 2018 will require the collaboration of many leaders; it cannot be achieved working in isolation.

- Health care providers, health systems, communities, businesses, community health centers, government and everyday Americans all have a role to play.

- Hundreds of groups, including the American Cancer Society, have pledged to work together to increase the nation's colorectal cancer screening rates and embrace the goal of reaching 80% screened for colorectal cancer by 2018.

Now is the time to work together to reach an 80% colorectal cancer screening rate by 2018.

- The percentage of the population up-to-date with recommended colorectal cancer screening increased from 56 percent in 2002 to 65 percent in 2010[2].

- It's estimated the number needing screening to reach 80% by 2018 ranges from 45,400 in Vermont to 2.72 million in California.[3] (Find the number needing screening in other states on page 8 of the 80% by 2018 Communications Guidebook.)

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- Still, patients and providers do not always know about or consider all the available recommended screening tests, and currently, many health care providers and systems are not set up to help more people get screened for colorectal cancer.

- Top health systems already are achieving 80% screening rates. Massachusetts is already screening over 76% of their eligible population, the highest screening rate in the nation.[3] An 80% screening rate is achievable.

- Across our nation significant disparities exist but we are committed to eliminating these disparities. The healthcare landscape is changing and barriers for colorectal cancer screening are breaking down.

- Part of the 80% by 2018 goal is to leverage the energy of multiple and diverse committed partners to make history and achieve this remarkable public health goal.

- By working together, demanding more of ourselves, and collectively pushing harder toward this common goal, we will make greater progress, prevent more cancers, and save more lives than we would by acting alone.

1. Meester RG, et al. Public health impact of achieving 80% colorectal cancer screening rates in the United States by 2018. Cancer. 2015 Mar 12. doi: 10.1002/cncr.29336. [Epub ahead of print]
2. Morbidity and Mortality Weekly Report: Vital Signs: Colorectal Cancer Screening Test Use — United States, 2012. Centers for Disease Control and Prevention. November 5, 2013. Vol. 62.
3. Fedewa SA, et al. How Many Individuals Will Need to Be Screened to Increase Colorectal Cancer Screening Prevalence to 80% by 2018? Table 2: Estimated Number of Individuals Needing CRC Screening to Achieve the NCCRT Goal of 80% Screening Prevalence by 2018 by Region and State. Cancer 2015;121:4258-65.