

# Age-Specific Trends in Colorectal Cancer Mortality Rates Over a 27-Year Period

Timothy A. Zaki, MD<sup>1</sup>; Peter S. Liang, MD, MPH<sup>2</sup>; Jeffrey K. Lee MD, MPH<sup>3</sup>; Folasade P. May, MD, PhD, MPhil<sup>4</sup>; Caitlin C. Murphy, PhD, MPH<sup>5</sup>

(1) Department of Internal Medicine, University of Texas Southwestern Medical Center, Dallas, TX

(2) New York University Langone Health, New York, New York; VA New York Harbor Health Care System, New York, NY

(3) Department of Gastroenterology, Kaiser Permanente San Francisco, San Francisco, CA; Division of Research, Kaiser Permanente Northern California, Oakland, CA

(4) Vatche and Tamar Manoukian Division of Digestive Diseases, David Geffen School of Medicine at the University of California Los Angeles, Los Angeles, CA

(5) School of Public Health, University of Texas Health Science Center at Houston (UTHealth), Houston, TX

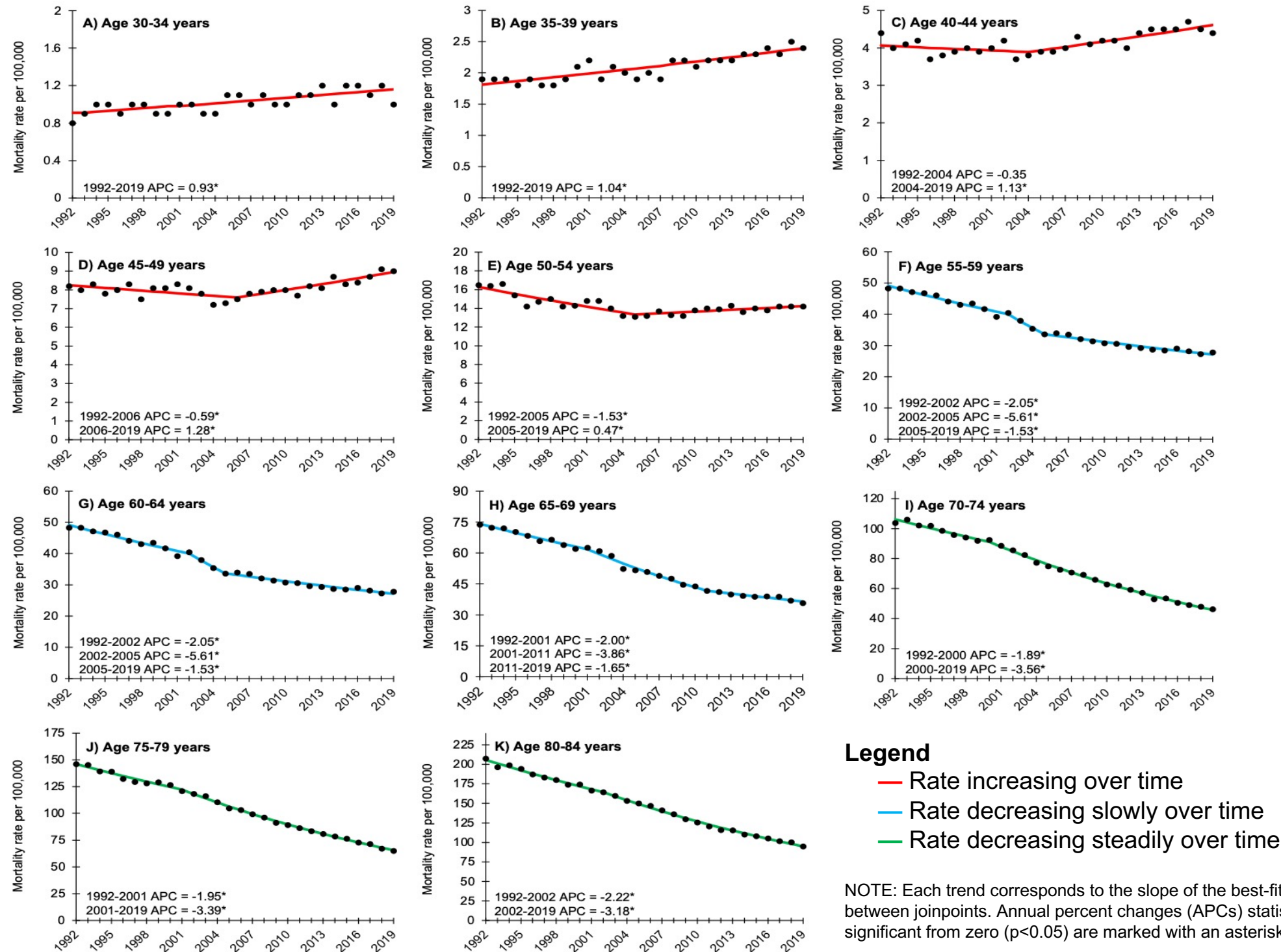
## Background

- Incidence rates of colorectal cancer (CRC) are increasing among younger adults (age <50 years) in the U.S.
- More recently, rates have increased in persons age 50-54 years.
- To better understand the corresponding changes in mortality, we examined trends in CRC mortality rates by age over a 27-year time period.

## Methods

- We used population-based data from the National Cancer Institute's Surveillance, Epidemiology, and End Results program of cancer registries to estimate age-specific (30-84 years, by 5-year age group) mortality rates per 100,000 persons in 1992-2019.
- We used joinpoint regression analysis to quantify changes in the direction and magnitude of mortality rates.
- The slope of the best-fit line between joinpoints corresponds to the annual percent change (APC) in mortality, with  $p < 0.05$  indicating a statistically significant difference from a slope of zero.

**Figure. Annual percent change in age-specific mortality rates of colorectal cancer, National Center for Health Statistics, 1992 – 2019**



## Results

- Age-specific CRC mortality rates mirror the well-described trends in CRC incidence rates.
- We observed increasing mortality rates in every age group up to 50-54 years and slowing rates in age groups 55-59 to 65-69 years.
- After age 69, mortality rates decreased steadily.

## Conclusion

- Our findings suggest that CRC diagnoses and deaths are increasingly common in middle-aged adults, despite the availability of screening and improved treatment options.
- Future efforts should identify factors contributing to increasing CRC mortality rates, as well as implement strategies to improve screening participation in these age groups.