



Hereditary Colorectal Cancer (Lynch syndrome)

Average risk screening for colorectal cancer (CRC) is recommended every 2 years from age 50-74 with the fecal immunochemical test (FIT). Average risk includes individuals with no first-degree relative who has been diagnosed with CRC.

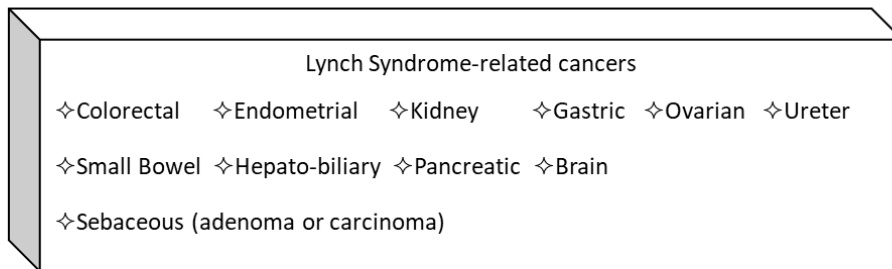
Individuals with 1 or more first-degree relatives with CRC are at increased risk and should have colonoscopy at age 50 or 10 years earlier than the age the youngest relative was diagnosed with CRC, whichever comes first.

Individuals who meet one or more of the criteria below may be eligible for modified CRC screening such as early or more frequent colonoscopy, genetic counselling and/or genetic testing.

Risk assessment:

Consider referral for a genetics assessment if your patient has:

- A known Lynch Syndrome mutation in the family
- At least three (3) relatives** with a cancer associated with Lynch syndrome (see Box).



The following criteria should **also** be present:

- One (1) must be a first degree relative of the other two
- At least two (2) successive generations must be affected
- At least one (1) relative with Lynch Syndrome-related cancer should be diagnosed before age 50

Find the contact information for your local [Genetics Centre here](#) or go to www.geneticseducation.ca > Genetics Centres > Canada > [Clinics](#).