**Op-Ed Tips**

Op-Eds (short for “opposite the editorial page”) are articles published in the opinion section of a newspaper and often written by a person who is an expert on a particular subject, or is known for having a strong opinion or interesting perspective. As a physician, you are in a great position to submit an Op-Ed to promote the importance of colorectal cancer screening throughout your community.

To get your Op-Ed published:

* **Tailor your submission**. Media outlets often require exclusives and won’t publish Op-Eds that have been submitted to or appeared in other outlets. Use your own background or experience to make the Op-Ed your own and share your thoughts about the importance of screening.
* **Review samples and guidelines**. Read Op-Eds in the publication you’re submitting to get an idea of style, format and length. You may note that Op-Eds often include people’s stories and experiences. **Visit the publication’s website to determine preferred word count and submission instructions.**
* **Don’t delay.**  An Op-Ed may take a few weeks to get noticed and published so you won’t want to miss the window of time when it’s relevant.

An Op-Ed is a narrative essay that conveys your opinion on an issue. The Op-Ed can include the key messaging in the template provided below. You can submit the template with little customization. However, if you can share a personal experience with an unnamed patient (keeping HIPAA in mind) or relate a personal story of how your skills and training make the difference in your work, the opinion piece will be even stronger and more likely to be published.

**Template Op-Ed for Local Newspapers**

Anyone can get colorectal (colon) cancer and most people don’t experience symptoms in the early stages, which is why regular screening beginning at age 45, if you’re at average risk, can save your life. Colon cancer is one of the few cancers that can be prevented through regular screening and when it is caught early, it has a 90% survival rate.

Colon cancer is the second most common cause of cancer death in the United States – in [your state] more than [number] of people died of colon cancer in 2018 – and it’s estimated two-thirds of those deaths could be prevented through regular screening.2

Yet 1 in 3 American adults are not getting screened for colon cancer as recommended, although there are more screening options than ever.3 If you are not at high risk for colon cancer, you have three options for screening: the stool-based FIT (fecal immunohistochemistry) every year, the stool-based mt-sDNA (Cologuard®) every three years, or colonoscopy every 10 years.

If you are at high risk, colonoscopy is the *only* advised screening option and your doctor may recommend you *start screening before age 45*. You fall in the *high-risk category* if you have even one of the following : a first degree relative (parent, sibling, child) who developed colon cancer before age 60; multiple first-degree relatives with colon cancer at any age; an inherited colorectal cancer syndrome; ulcerative colitis; Crohn’s colitis, a personal history of colorectal cancer or pre-cancerous colorectal polyps; or symptoms such as rectal bleeding, anemia, a change in bowel habits, persistent abdominal pain or unintentional weight loss.

Colonoscopy is the only screening test that prevents colon cancer by providing the unique ability to identify and remove polyps before they become cancerous.

If you are 45 or older – or younger if you have a family history – I strongly encourage you to contact your doctor to ask about colon cancer screening. You can learn more about the importance of colon cancer screening and best practices for preventing this cancer by visiting ASGE.org/Screening,

[Your name, your title and institution]

References:

<https://www.cancer.org/content/dam/cancer-org/research/cancer-facts-and-statistics/colorectal-cancer-facts-and-figures/colorectal-cancer-facts-and-figures-2020-2022.pdf>

<https://www.cdc.gov/pcd/issues/2020/20_0039.htm#:~:text=Our%20estimate%20of%2068%25%20(35%2C530,from%2060%25%20to%20100%25>.

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7075255/>