

# Many Older Americans Get Unneeded Cancer Screenings

Screenings for colorectal, cervical and breast cancer are commonly given well past the recommended ages.

August 11, 2020 By [Caroline Tien](#)

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Cancer overscreening is epidemic among older Americans, a new study has found.

Overscreening refers to cancer screening that is performed excessively or needlessly.

While the U.S. Preventive Services Task Force recommends routine cancer screening for young and middle-aged men and women, it does not recommend routine cancer screening for elderly men and women without a history of cancer. These include screenings for colorectal cancer (men and women over 75), cervical cancer (women over 65) and breast cancer (women over 75).

The reasons are twofold, said Jennifer Moss, an assistant professor of family and community medicine and public health sciences at Penn State College of Medicine, in a statement to [Medical Xpress](#). “First, when they ‘age out’ of the recommended screening age, or second, when their life expectancy is too low,” Moss said. “As with any clinical procedure, there are risks from the cancer screening tests. These risks are even higher for people who have aged out or who have a low life expectancy.”

Yet overscreening remains widespread. Moss and eight other researchers at Penn State College of Medicine reviewed data on hundreds of thousands of older men and women collected in 2018 by the Centers for Disease Control and Prevention (CDC) through its Behavioral Risk Factor Surveillance System (BRFSS). The largest continuously conducted health survey system in the world, according to the CDC, the BRFSS interviews nearly half a million American adults about their health-related risk behaviors every year.

The Penn State researchers concluded that 45.8% of older women are overscreened for [cervical cancer](#), and 73% are overscreened for [breast cancer](#). When it comes to [colorectal cancer](#), 59.3% of older men and 56.2% of older women are overscreened, they found.

Intriguingly, the researchers also found that overscreening rates varied by gender and how close individuals lived to big cities. Older women who lived in urban areas, for example, were more likely to be overscreened than those who lived in rural areas. Yet proximity to cities didn't make a

difference in older men.

The [results](#) of the study were later published in JAMA Network Open.

The pattern of overscreening, the researchers wrote, “emphasizes the need for additional research to identify risks and benefits of screening in older adults and determine who may benefit from screening after the recommended upper-age limits.”

They acknowledge that reducing these unnecessary screenings won’t be easy, however. Many doctors and nurses are reluctant to bring up life expectancy with their elderly patients, and the financial structure of the health care system can sometimes present incentives for pushing screenings.

Screening is a necessary part of cancer prevention and one that scientists and medical professionals are always trying to refine. To read about recent innovations in colorectal cancer screening, click [here](#), and to read about the fall of the Pap test, click [here](#).

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