CPWR KEY FINDINGS FROM RESEARCH



Overview

The Building Trades National Medical Screening Program (BTMed), managed by CPWR, provides health examinations for construction workers employed at U.S. Department of Energy nuclear weapons facilities. After an initial exam, BTMed participants can return for a re-exam every three years. Colorectal cancer (CRC) screening is offered on all exams, and BTMed follows the U.S. Preventive Services Task Force recommendations for screening eligibility and methods. BTMed has used three different types of tests since it first offered CRC screening: from 1998 to 2008, the guaiac fecal occult blood test (gFOBT); from 2009 to 2015, the fecal occult blood detection by highsensitivity quaiac (HS-gFOBT); and since 2015, the fecal immunochemical test (FIT). All three require participants to self-collect stool samples. This study examined 26,922 BTMed participants-23,452 of whom received an exam and a work history interview and 3,470 who only had an interview. Of those who had an exam, 20,038 received the CRC screening.

Mortality from Colorectal Cancer Decreases with Screenings in Occupational Health Exams

Colorectal Cancer (CRC) Screening in Occupational Health Surveillance Exams is Associated with Decreased CRC Mortality

Marianne Cloeren, John Dement, Kian Ghorbanpoor, Sammy Almashat, William Grier, Patricia Quinn, Kim Cranford, Anna Chen, Scott Haas, Knut Ringen. American Journal of Industrial Medicine, 2024.

Key Findings

This study found a higher rate of CRC screening participation than in the general population.

The 20,038 program participants who received CRC screening had a lower risk for CRC mortality than the 3,470 who did not.

The decrease in mortality among participants in the BTMed CRC screenings was similar to the decrease among members of the general population who received a screening, even though BTMed screenings were conducted every 3 years rather than annually.

The improvements in CRC screening tests were clear from the results among BTMed participants: those receiving the gFOBT had a 2% mortality reduction; with the HS-gFOBT, the reduction was 12%; and with FIT, mortality declined 61%.

Participation in BTMed's CRC screening increased as stool tests have become more convenient to administer: 68.2% for the gFOBT; 78.7% for the HS-gFOBT; and 85.9% for the FIT.

The 77.3% participation rate in BTMed's CRC screening over time is significantly higher than other published studies found among construction workers. National surveys in 2000 and 2005 found that only 27% and 35.5% of eligible construction workers, respectively, had received CRC screening.

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Read the abstract: https://bit.ly/4iVQsCw

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