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- 507 Rates of Intervention and Cancer Detection on Initial versus Subsequent Whole-body MRI Screening in Li-Fraumeni Syndrome**
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The cancer detection rate, burden of recommended interventions, and rate of false-positive findings found on subsequent WB-MRI screenings in patients with LFS are not well understood. Our findings suggest that annual WB-MRI screening has clinical utility and likely does not result in an unnecessary invasive intervention burden for patients.

RESEARCH ARTICLES

- 513 Risk Factors for Early-onset Sporadic Colorectal Cancer in Male Veterans**
Thomas F. Imperiale, Laura J. Myers, Barry C. Barker, Jason Larson, Timothy E. Stump, and Joanne K. Daggy
Screening 45- to 49-year-olds for colorectal cancer is relatively new with uncertain uptake thus far. Furthermore, half of EOCRC occurs in persons < 45 years old. Using risk factors may help 45- to 49-year-olds accept screening and may identify younger persons for whom earlier screening should be considered.
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- 523 Liver Fibrosis Scores and Prostate Cancer Risk and Mortality in the Atherosclerosis Risk in Communities Study**
Anqi Wang, Mariana Lazo, Jiayun Lu, David J. Couper, Anna E. Prizment, Mara Z. Vitolins, Samuel R. Denmeade, Corinne E. Joshi, and Elizabeth A. Platz
Investigating the link between liver fibrosis and prostate cancer risk and mortality, our study reveals the potential influence of liver health on prostate cancer development and on detection using PSA test, urging further research to understand the differential findings by race and to optimize prevention and intervention strategies.
- 531 Association and Prediction Utilizing Craniocaudal and Mediolateral Oblique View Digital Mammography and Long-Term Breast Cancer Risk**
Simin Chen, Rulla M. Tamimi, Graham A. Colditz, and Shu Jiang
Expanding use of digital mammography and repeated screening provides opportunities for risk assessment. To use these images for risk estimates and guide risk management in real time requires efficient processing. Evaluating the contribution of different views to prediction performance can guide future applications for risk management in routine care.

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ABOUT THE COVER

With the rise in colorectal cancer (CRC) incidence and mortality in adults under 50 years, Imperiale and colleagues conducted a case-control study, starting on page 513, to identify factors associated with early onset CRC in male veterans aged 35–49 years with the goal of determining who should be considered for screening prior to age 45 or 50. Cases ($n = 600$) of early onset CRC were identified between 2008 and 2015 in men aged 35–49 years and were matched on facility and year of diagnosis to 1200 colonoscopy controls and 1200 clinic controls without CRC. The cover image is adapted from Fig. 3 and shows the decile of predicted probability of CRC (on the x -axis) vs. the observed CRC risk (percent; on the y -axis) in the validation cohort for the 15- and 7-variable models derived from the derivation cohort across five imputed datasets. Both models are well-fitted to the data. The 7-variable model includes age (from 35 to 49 years); service-connected disability; the Charlson comorbidity score; CRC in a first-degree or second-degree relative; current ethanol use; and no regular use of either statins or NSAIDs.

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