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FOR THE MEDIA



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Education

The Johns Hopkins University

Current Research Interests

Dr. Zauber's primary research focus is identifying and assessing ways to prevent and reduce the burden of colorectal cancer incidence and mortality, specifically through screening and surveillance. Her work involves population-based statistical modeling and precision medicine to identify effective and cost-effective screening strategies to better inform health policy and randomized clinical trials. Dr. Zauber leads the Cancer Intervention and Surveillance Modeling Network (CISNET) colorectal group, a multi-center group of microsimulation modelers sponsored by the National Cancer Institute. Her team conducted decision analyses for the 2008, 2016, and 2020 United States Preventive Services Task Force's colorectal cancer screening recommendations on optimal age to begin and end screening, screening intervals, and screening modalities. Additionally, her modeling group conducted a decision analysis for the American Cancer Society (ACS) for age to begin screening given the rising incidence rates for colorectal cancer in younger cohorts, which resulted in the ACS recommendation to begin screening at age 45. The CISNET decision analyses have also informed colorectal cancer screening strategies for higher risk populations such as those with Cystic Fibrosis and Lynch Syndrome. Dr. Zauber and her CISNET team have worked closely with the Centers for Medicare and Medicaid Services and the Centers for Disease Control and Prevention on colorectal cancer screening and prevention, and the cost-effectiveness of available and novel screening tests on average and genetically predisposed (high risk) populations. Currently, her group is partnering with the New Hampshire Colonoscopy Registry to elucidate the natural history of the serrated pathway, and how this understanding may lead to updated policies on screening and surveillance. Dr. Zauber is also a leader in screening studies. She was the Principal Investigator for the National Colonoscopy Study, a multi-center randomized controlled trial for screening colonoscopy and fecal occult blood testing and serves as a co-Principal Investigator on the NCI PROSPR I consortium. She demonstrated in the landmark National Polyp Study that removal of adenomas, the precursor lesion of colorectal cancer, reduces both incidence and mortality of colorectal cancer. She has also served on the advisory panel for the colorectal cancer screening recommendations for the International Agency for Cancer Research. Additionally, Dr. Zauber continues to serve as biostatistician on many national and international studies including the Nordic-European Initiative on Colorectal Cancer and serves as the statistical editor for *Gastroenterology* and other high impact journals. She is a Fellow of the American Statistical Association and of the American Gastroenterology Association.

Publications

Selected peer-reviewed publications:

Knudsen AB, Rutter CM, Peterse EFP, Lietz AP, Seguin CL, Meester RGS, Perdue LA, Lin JS, Siegel RL, Doria-Rose VP, Feuer EJ, Zauber AG, Kuntz KM, Lansdorp-Vogelaar I. Colorectal Cancer Screening: An Updated Modeling Study for the US Preventive Services Task Force. *JAMA*. 2021 May 18;325(19):1998-2011.

Peterse EFP, Meester RGS, Siegel RL, Chen JC, Dwyer A, Ahnen DJ, Smith RA, Zauber AG, Lansdorp-Vogelaar I. The impact of the rising colorectal cancer incidence in young adults on the optimal age to start screening: Microsimulation analysis I to inform the American Cancer Society colorectal cancer screening guideline. *Cancer*. 2018 Jul 15;124(14):2964-2973.

Corley DA, Jensen CD, Marks AR, Zhao WK, Lee JK, Doubeni CA, Zauber AG, de Boer J, Fireman BH, Schottinger JE, Quinn VP, Ghai NR, Levin TR, Quesenberry CP. Adenoma detection rate and risk of colorectal cancer and death. *N Engl J Med*. 2014 Apr 3;370(14):1298-306.

Zauber AG, Winawer SJ, O'Brien MJ, Lansdorp-Vogelaar I, van Ballegooijen M, Hankey BF, Shi W, Bond JH, Schapiro M, Panish JF, Stewart ET, Wayne JD. Colonoscopic polypectomy and long-term prevention of colorectal-cancer deaths. *N Engl J Med*. 2012 Feb 23;366(8):687-96.

Zauber AG, Lansdorp-Vogelaar I, Knudsen AB, Wilschut J, van Ballegooijen M, Kuntz KM. Evaluating test strategies for colorectal cancer screening: a decision analysis for the U.S. Preventive Services Task Force. *Ann Intern Med*. 2008 Nov 4;149(9):659-69.

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MSK requires doctors, faculty members, and leaders to report (“disclose”) the relationships and financial interests they have with external entities. As a commitment to transparency with our community, we make that information available to the public. Not all disclosed interests and relationships present conflicts of interest. MSK reviews all disclosed interests and relationships to assess whether a conflict of interest exists and whether formal COI management is needed.

Ann Zauber discloses the following relationships and financial interests:

- National Cancer Institute
Professional Services and Activities
- Pancreatic Cancer Action Network
Professional Services and Activities

The information published here is a complement to other publicly reported data and is for a specific annual disclosure period. There may be differences between information on this and other public sites as a result of different reporting periods and/or the various ways relationships and financial interests are categorized by organizations that publish such data.

This page and data include information for a specific MSK annual disclosure period (January 1, 2024 through disclosure submission in spring 2025). This data reflects interests that may or may not still exist. This data is updated annually.

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