

# Colorectal Cancer Screening — What You Need to Know

## What is colorectal cancer?

Colorectal cancer is the 3rd most common cancer that kills men and women in the United States. Colorectal cancer may be preventable with screening tests.

Cancer happens when some cells in the body are growing out of control. Colorectal cancer happens when those cancer cells are growing in the colon or rectum area of the body.

Most colon cancers develop from polyps [pol-ips] in the colon or rectum. A polyp is a growth of tissue that can turn into cancer. Some screening tests can find polyps before they develop into cancer. Other screening tests can detect cancer at an earlier, more treatable stage. Polyps can be easily removed to lower your risk of cancer.

## Who gets colorectal cancer?

Both men and women can get colorectal cancer, and the disease may be preventable through screening. Screening means having tests done early to try to prevent cancer from developing or to detect cancer at an earlier, more treatable stage. Screening can also help prevent death by finding and treating it early.

- Regular screening is recommended for all adults who are 45 to 75 years old.
- If you are over 75, speak with your care team about whether continued screening is right for you.
- African Americans, American Indian and Alaskan Indian adults have higher rates of colorectal cancer incidence.
- Individuals with an immediate relative with cancer or a history of certain high-risk polyps are at increased risk for colon cancer. They should be screened with a colonoscopy at age 40 or 10 years prior to the age of diagnosis of their immediate relative, whichever is earlier.
- Patients with some types of inflammatory bowel disease (IBD) are at an increased risk of colon cancer. They should discuss screening strategies with their doctor.

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## What are the risk factors?

People who have risk factors for colorectal cancer may need to start screening at an earlier age and get tested more often than people who do not have risk factors.

You may be at risk for colorectal cancer if you have any of these risk factors:

- Age 45 or older
- African American
- Personal **OR** family history of colon polyps or colorectal cancer
- Personal history of inflammatory bowel disease (Crohn's disease or ulcerative colitis)
- Personal **OR** family history of certain genetic cancer syndromes like familial adenomatous polyposis (FAP), or hereditary non- polyposis colorectal cancer (Lynch syndrome)
- You eat a lot of red meats, (beef, pork, lamb), processed meats and fatty foods
- Low physical activity levels
- Obesity
- Smoking and other tobacco use
- Heavy alcohol use

## What are the symptoms?

Symptoms of colorectal cancer may not be noticeable. Pre-cancerous polyps and early-stage colorectal cancer don't always cause symptoms. Don't wait for symptoms to appear before deciding to get tested for colorectal cancer. If you have symptoms, they may include:

- Blood in your stool
- Diarrhea or constipation
- Pains, aches, or cramps in your stomach that do not go away
- Unexpected weight loss

Talk to your doctor about the need for getting screened for colorectal cancer if you have any of these symptoms.

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## Lower your risk of colorectal cancer

Make these lifestyle changes to lower your risk of colorectal cancer:

- Get regular screenings
- Maintain a healthy weight
- Live a physically active lifestyle
- Eat a healthy diet
- Don't use tobacco products
- If you drink alcohol, keep it moderate (No more than one drink per day for women and no more than two drinks per day for men)

## Colorectal Cancer Screening Tests

### Which colorectal cancer screening test is right for you?

Each type of screening test has pros and cons to think about before making a decision. Talk with your doctor about which types of tests are right for you and how often you should be screened for colorectal cancer. Use this chart to learn more about each of the different types of screening tests.

#### Important

If you have a personal history of polyps or inflammatory bowel disease (ulcerative colitis or Crohn's disease) or a family history of colon or rectal cancer in a parent, sibling or child, you have a higher risk of developing colon cancer. Stool-based screening (FIT and FIT-DNA) is not recommended. Colonoscopy is the only recommended screening test in patients with these histories.



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		Preparation			How Often	
Test	What is it?	Nothing	Special Diet	Laxative/ Enema	# of Years	Special Considerations
<b>Colonoscopy</b> <b>Best</b> for cancer prevention <b>and</b> detection.  Detects most small and large polyps. Polyps can be removed during procedure.	<p>This is an exam that uses a small camera to look inside your colon. It is done at a doctor's office or hospital.</p> <p>If there is a growth or polyp in the colon, the doctor will be able to remove it during the colonoscopy. Patients are usually given a mild sedative to help relax.</p>		X	X	10 years	Ask a friend or family member to give you a ride home after the colonoscopy. You won't be able to drive yourself. If polyps or cancer cells are found during the test, you will need colonoscopies more often in the future.
<b>Fecal Immunochemical Test (FIT)</b>  Better at cancer detection than prevention.  Misses more cancers than other tests.  Does <b>NOT</b> detect small or most large polyps.	<p>This test can be done by you in the privacy of your own home. Your doctor will give you a test kit to take home. You will collect a small stool sample and then mail the test kit with your sample back to your doctor or lab. They will check the sample for blood.</p>	X			1 year	If anything unusual is found in a follow-up colonoscopy will be recommended.

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		Preparation			How Often	
Test	What is it?	Nothing	Special Diet	Laxative/Enema	# of Years	Special Considerations
<b>FIT-DNA</b>  Better at cancer detection than prevention.  Misses more cancers than colonoscopy, but catches more than FIT.  Does <b>NOT</b> detect small or most large polyps.  Higher false positive rate than FIT, leading to more colonoscopies.	This test can be done by you in the privacy of your own home. Your doctor will give you a test kit to take home. You will collect a whole bowel movement and then mail the test kit with the sample to a lab. It will be tested for changes in DNA that might show cancer cells or precancerous lesions or growths.	X			3 years	If anything unusual is found, a follow-up colonoscopy will be recommended.
<b>CT Colonography</b> (virtual colonoscopy)  Detects most large polyps, but can miss small polyps.  Not available everywhere.  Requires radiation exposure.  Good test for cancer prevention and detection.	Your doctor will use X-rays and computers to get pictures of your whole colon.		X	X	5 years	If anything unusual is found, a follow-up colonoscopy will be recommended.