

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. Screening tests look for cancer **before** you have any symptoms.

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

Most colon cancers develop from polyps [pol-ips], or growths, in your colon or rectum. The goal of cancer screening is to identify polyps or cancer as early as possible to lower your risk of dying from cancer.

What are the risk factors?

Some people with certain risk factors for colorectal cancer may need to get screenings at an earlier age and get screenings more often. If you believe you have one of these risk factors, you should talk with your provider about a screening test:

- Personal history of colon polyps, colorectal cancer, or inflammatory bowel disease (Crohn's disease or ulcerative colitis)
- Family history of colorectal cancer or advanced adenoma (high-risk) polyp (see note)
- Personal **or** family history of certain genetic cancer syndromes like familial adenomatous polyposis (FAP) or hereditary non-polyposis colorectal cancer (Lynch syndrome)
- Prior history of radiation to your abdomen (like prior cancer treatment)

Please note: In this case, family history only includes one first-degree relative (parents, siblings, or children) with colorectal cancer or advanced adenoma before 60 years old, or multiple first-degree relatives with colorectal cancer or advanced adenomas at any age.

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Important

If you have a strong family history of colorectal cancer or advanced adenoma (see note on last page), colonoscopy is recommended.



Other factors can increase colorectal cancer risk but do not normally mean you need to get screened earlier, including:

- You eat a lot of red meats (beef, pork, lamb), processed meats, or fatty foods
- You have low physical activity levels (don't exercise a lot)
- You are obese
- You smoke or have other tobacco use
- You have heavy alcohol use (8 drinks or more for women every week and 15 drinks or more for men every week)

Colorectal Cancer Screening Tests: Which is right for you?

Each type of screening test has pros and cons to think about before choosing a test. **All of the test options below have been shown to reduce the risk of dying from colon cancer.** Talk with your provider about which types of tests are right for you. There could also be differences in cost and insurance coverage depending on the type of test you choose. You should call your health insurer before choosing a test to understand the potential costs.

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Test	Preparation	How Often	Special Considerations
Colonoscopy An exam that uses a small camera to look inside your colon, done at a doctor's office or hospital. If found, polyps can be removed during the procedure. Patients are usually given a mild sedative to help relax. A colonoscopy will accurately find 85 to 95% of cancer cases in patients with cancer.	Special diet on the day before the procedure A laxative drink is consumed the day before to "prep" the colon so the doctor can see any polyps more easily. This will require being close to a bathroom all day.	Every 10 years if results are normal; more often if results are not normal	Anesthesia or sedation is used for most patients during a colonoscopy You will need 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 small cancers are found during the test, they can be immediately removed. You may need colonoscopies more often in the future. There is a very small chance (Less than 1 in 500 people) of bowel perforation or a major bleed during colonoscopy.
Fecal Immunochemical Test (FIT) You can do this test at home by yourself. You will collect a small stool (poop) sample and then mail the test kit with your sample back to your provider or lab in 1 to 2 days. They will check the sample for blood. A FIT test will accurately find about 75 to 80% of cancer cases in patients with cancer. Over time, though, the accuracy is similar to a colonoscopy or FIT DNA test since it's a yearly test and completed more frequently.	None	Every year	If anything unusual is found in your sample, a follow-up colonoscopy will be needed. If you do this test every year, detection of cancer is similar to that of colonoscopy, although FIT cannot find polyps as well as a colonoscopy

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Test	Preparation	How Often	Special Considerations
FIT-DNA You can do this test at home by yourself. A FIT-DNA test will accurately find 92% of cancer cases in patients with cancer. The FIT-DNA test has more false positives (positive when there is no cancer present) than just a FIT test, so it is more likely that you will need a follow-up colonoscopy. The company that makes the FIT-DNA test will mail the test kit to your home. You will collect a whole bowel movement (poop) and then mail the test kit with the sample to a lab. It will be tested for changes in your DNA that might show cancer cells or precancerous growths.	None	Every 3 years	If anything unusual is found, a follow-up colonoscopy will be needed.