America’s #2 Cancer Killer

- Colorectal cancer is the number 2 cancer killer in the United States, yet it is one of the most preventable types of cancer. Colorectal cancer is often curable when detected early.

Risk Factors

- Lifetime risk of colorectal cancer is roughly equal in men and women.
- Colorectal cancer is most common after age 50, but it can strike at younger ages. The risk of developing colorectal cancer increases with age.

Symptoms

- Most early colorectal cancers produce no symptoms. This is why screening for colorectal cancer is so important. Possible symptoms include:
  - New onset of abdominal pain
  - Blood in or on the stool
  - A change in stool caliber or shape
  - A change in typical bowel habits, constipation, diarrhea

Colonoscopy: Preferred Screening Strategy

Colonoscopy is the preferred method of screening for colorectal cancer. The American College of Gastroenterology considers colonoscopy the “gold standard” for colorectal screening because colonoscopy allows physicians to look directly at the entire colon and to identify suspicious growths. Colonoscopy is the only test that allows a biopsy or removal of a polyp at the very same time it is first identified.

Colonoscopy for African Americans

African Americans are diagnosed with colorectal cancer at a younger age than other ethnic groups, and African Americans with colorectal cancer have decreased survival compared with other ethnic groups. The American College of Gastroenterology in 2005 issued new recommendations to healthcare providers to begin colorectal cancer screening in African Americans at age 45 rather than 50 years.

Colonoscopy is recommended for individuals of any age who are at higher than average risk for developing colorectal cancer by virtue of:
- Personal history of colorectal cancer or colorectal polyps
- A strong family history of the disease
- Inherited forms of colorectal polyps or cancer
- Predisposing chronic digestive conditions such as inflammatory bowel disease (Crohn’s disease or ulcerative colitis)

Recommendations for how often colonoscopy should be performed vary for different subsets of high risk individuals, and they should consult with their physician.

What are the Screening Options?

Talk to your doctor about what screening tests are right for you.

Colonoscopy

For normal risk individuals, the American College of Gastroenterology recommends colonoscopy screening every 10 years beginning at age 50 (see new recommendations for African Americans).

Flexible Sigmoidoscopy & Fecal Occult Blood Test

An alternative strategy for average risk individuals is an annual stool test for blood, and a flexible sigmoidoscopy exam every 5 years. Unlike colonoscopy, this approach does not allow identification and removal of polyps in the entire colon.

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The Anatomy of Colorectal Cancer

Progression from Polyp to Cancer

Screening tests can find polyps so they can be removed before they turn into cancer:
- Most colorectal cancers develop from polyps, which are abnormal growths in the colon. If polyps grow unnoticed and are not removed, they may become cancerous.
- Screening tests can find precancerous polyps so they can be removed before they turn into cancer.
- The development of more than 75-90 percent of colorectal cancer can be avoided through early detection and removal of pre-cancerous polyps.*

What is Considered High Risk?

Colon Cancer
- Small Polyps
- Medium Polyp
- Polyp on Stalk

Colon Cancer… You Can Prevent It