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COLORECTAL CANCER AWARENESS



FUTUREHEALTH CORPORATION

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Cancers of the colon and rectum, also known as colorectal cancer, are among the fourth most commonly diagnosed cancers in the United States and rank second among cancer deaths. They occur equally in both men and women and are most often found among people over the age of 50. Cancers of the colon and rectum are highly curable when detected and treated early.

Who is at risk?

The exact causes of colorectal cancer are unknown. However, studies suggest that the following factors may place individuals at a higher risk for developing the disease:

Age: Individuals over 50 are most susceptible, although it can occur at younger ages.

Diet: A diet that is high in fat and calories and low in fiber can increase risk.

Polyps: Individuals who have had colon polyps (small non-cancerous growths) are at risk.

Medical history: Ulcerative colitis or inflammatory bowel disease can increase risk.

Personal history: Those who have had cancer of the ovaries, endometrium or breast are at risk.

Family medical history: Individuals who have a close family member (such as a parent or sibling) with colorectal cancer are at increased risk for the disease.

Cigarette smoking: Smoking has recently been identified as a risk factor.

Obesity: Individuals who are overweight have increased risk.

How can I decrease my risk for colorectal cancer?

In recent years, evidence has shown that certain lifestyle changes may help to decrease the risk of developing colorectal cancer. These lifestyle changes include:

- Eating a diet that is high in fiber and low in fat and calories
- Quitting smoking
- Decreasing or eliminating alcohol consumption
- Exercising regularly
- Developing an awareness of the risk factors
- Getting regular screenings if you are over 50 or if you have other risk factors

What are the signs and symptoms?

Some of the signs and symptoms of colorectal cancer are:

- Change in bowel habits
- Blood (either bright red or very dark) in the stool
- Diarrhea or constipation
- Stool that appears narrower than usual
- Weight loss with no known reason
- Vomiting
- Fatigue
- Generalized abdominal discomfort, i.e., feelings of fullness, bloating, cramping or excessive gas

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Who should be screened?

The American Cancer Society recommends that all adults at average risk begin screening by age 50. Those individuals who are less than 50 years of age and have pre-existing risk factors should consult with their healthcare providers to determine when it is appropriate to initiate screening.

Currently, there are five tests available to screen for colorectal cancer:

Fecal occult blood test: A small stool sample is placed on a special card and returned to the physician's office or medical laboratory. This test examines the stool for occult (hidden) blood.

Flexible Sigmoidoscope: An examination in which a doctor uses a sigmoid (a thin, lighted instrument) to view the inside of the lower colon and rectum for polyps, tumors or abnormal areas. If the doctor sees a polyp or other abnormal tissue during the procedure, a small piece of the abnormal area can be removed and further examined under a microscope.

Colonoscope: An examination in which a physician uses a colonoscope (a thin, lighted instrument) to view the inside of the entire colon for polyps, tumors or abnormal areas. This test allows the physician to see much further into the bowel. If the doctor sees a polyp or other abnormal tissue during the procedure, a small piece of the abnormal area can be removed and further examined under a microscope. Both the sigmoidoscope and colonoscope are inserted into the rectum.

Double contrast barium enema: A procedure in which a liquid containing barium (a silver-white metallic compound) is inserted as an enema into the colon. Barium will outline the colon when a x-ray is taken, and show polyps and other abnormalities if present.

Digital rectal exam: The physician or nurse inserts a lubricated-gloved finger into the rectum and feels for lumps.

Some of these tests require special preparation prior to the exam. Consult with your healthcare provider for more details.

What is the treatment?

Currently, the most common forms of treatment are surgery, chemotherapy and radiation. Your physician will determine the best treatment plan, depending on the type of cancer and severity.

Follow-up care

If you are experiencing any of these signs or symptoms, it is important that you report them to your healthcare provider so that you can be screened for the disease. For those individuals who have already been diagnosed and treated for colorectal cancer, it is important that they receive regular follow-up care. This includes complying with scheduled appointments with their healthcare provider and maintaining a healthy lifestyle to reduce the risk of recurrence of the disease.

For more information on colorectal cancer, visit the National Cancer Institute at www.nci.nih.gov.