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Get Screened for **Colorectal Cancer**

Doctors know how to prevent colon or rectal cancer – and you can, too.



If you're age 45 or older, you should start getting screened for colorectal cancer. Screening can help find some cancers before they cause any symptoms.

Several types of tests can be used. No matter which test you choose, the most important thing is to get screened.



Why is colorectal cancer screening important?

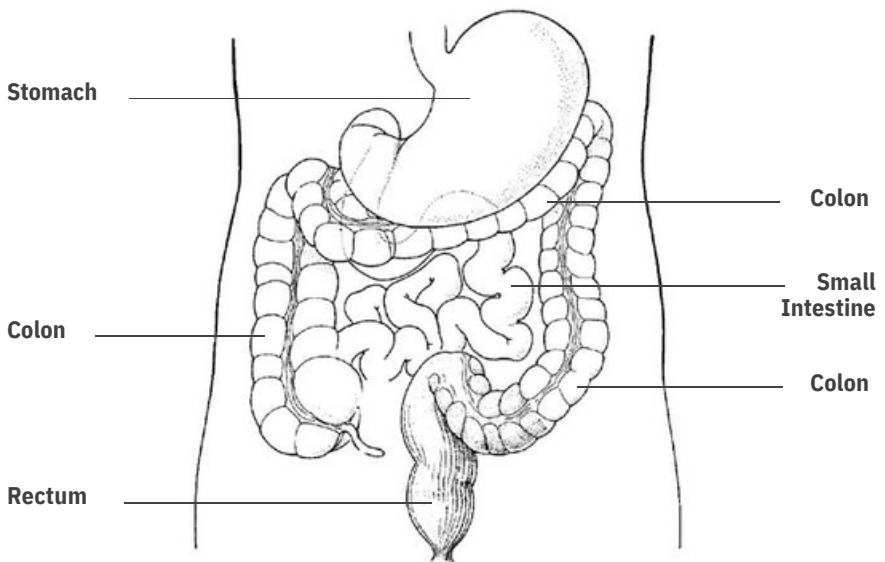
Colorectal cancer is a leading cause of cancer death in the US. But the death rate from colorectal cancer has been dropping. One reason is that, with screening, colorectal polyps (abnormal growths that can become cancer) are being found more often and removed before they can develop into cancers.

Getting screened also means a better chance of finding a cancer early. If colorectal cancer is found before it has spread, it is much more likely that treatment will be successful. But only 1 in 4 colorectal cancers are found at an early stage. When cancer has spread outside the colon or rectum, it is much harder to treat.

What is colorectal cancer?

Cancer of the colon or rectum is called colorectal cancer. The colon and rectum help the body digest food. They hold waste until it passes out of the body. The colon is also called the large intestine.

Some colorectal cancers start as abnormal growths called polyps. These growths can happen anywhere in the colon and rectum.



Colorectal cancer: Should you be concerned?

If you're age 45 or older, you should get screened for colorectal cancer. Colon and rectal cancer rates increase as people get older, but more people younger than 50 years of age are getting this disease.

People who are at a higher risk of getting colorectal cancer may need to start getting screened at a younger age. Talk to your health care provider if you have a family history of polyps or colorectal cancer, have Crohn's disease or ulcerative colitis, or have had radiation treatment to your abdomen (belly) or pelvis.

Ask your health care provider about screening.

If your health care provider doesn't mention getting screened for colorectal cancer, don't be afraid to ask about it. There's more than one way to get screened, so talk to your provider about which tests might be good options for you.

Most insurance plans cover the cost of screening tests for colorectal cancer, but check with your plan to be sure.

Screening options for colorectal cancer

There are two types of screening tests for colorectal cancer. Stool tests check your poop for signs of colorectal cancer. Visual tests let the health care provider look inside your colon and rectum for polyps and cancer.

Stool-based tests

Fecal immunochemical test (FIT)

This test looks for blood in your stool. Your health care provider will give you a test kit to take home. The kit will explain how to collect and return the stool samples to your provider's office or send to a lab to be tested. If blood is found, a colonoscopy will need to be done to look for the cause of the blood. This test can help find some colorectal cancers, but it can also miss some.

Guaiac-based fecal occult blood test (gFOBT)

This test also looks for blood in your stool. Your health care provider will give you a test kit to take home. You will need to smear a small amount of your stool on 2 to 3 cards. The cards are returned to your provider's office or a lab to be tested. If blood is found, a colonoscopy will need to be done to look for the cause of the blood. This test can help find some cancers in the colon or rectum, but it can also miss some.

Stool DNA test (FIT-DNA)

This test checks your stool for cancer cells and blood. Your health care provider will give you a test kit to take home. You will collect a sample of your stool and return it to a lab to be tested. This test can help find some colorectal cancers, but it can also miss some. If the test finds blood or cells that may be from a polyp or cancer, a colonoscopy will need to be done.

Visual tests

Colonoscopy

The doctor uses a narrow, lighted tube to look at the inside of the rectum and the entire colon for cancer or any polyps. If any polyps or growths are seen, they can be removed or a piece can be taken to test for cancer (biopsy). Colonoscopy is done in an outpatient setting, and you will need to take something to clean out your colon and rectum before the test. People are usually given medicines to help them relax and sleep during the colonoscopy.



CT colonography

With this test, air is pumped into your colon. Then a special type of x-ray called a CT scan is done. The test can be done quickly and with no sedation, but you will need to take something to clean out your colon and rectum before the test. If a polyp or growth is found, a colonoscopy must be done later to remove it or take a piece to test for cancer (biopsy).

Flexible sigmoidoscopy

A narrow, lighted tube is used to look inside your rectum and lower part of the colon. The doctor will be looking for cancer or polyps that could turn into cancer. If they see something, they can take a piece of it and test it for cancer (biopsy). This test is done in an outpatient setting and you will need to take something to clean out the lower part of your colon and rectum before the test. This test allows the doctor to look at only the lower part of the colon. If any growths or polyps are found, a colonoscopy will need to be done later to remove or take a piece of them to test for cancer (biopsy).

How do I get ready for these tests?

You don't need to do much to get ready for the stool tests. You'll have to follow the instructions of the kit and will need to return the kits to either your health care provider or a lab for testing.

For the colonoscopy, CT colonography, and sigmoidoscopy, your colon will need to be cleaned out as much as possible. You may need to have only clear liquids and no food for some time before the test. You'll take a strong laxative the day before the test and may need to give yourself an enema the morning of the test.

Which tests are best for me?

There are some differences between these tests to consider, but the most important thing is to get screened, no matter which test you choose. Talk to your health care provider about which tests might be good options for you, and to your insurance provider about your coverage.



American Cancer Society Guideline for Colorectal Cancer Screening

The American Cancer Society recommends that people at average risk of colorectal cancer start regular screening at age 45. This can be done either with a stool-based test or a visual exam.

Stool-based tests

- Fecal immunochemical test (FIT) every year,* or
 - Guaiac-based fecal occult blood test (gFOBT) every year,* or
- Stool DNA test (FIT-DNA)* every 3 years

Visual exams of the colon and rectum

- Colonoscopy every 10 years, or
- CT colonography (virtual colonoscopy)* every 5 years, or
- Flexible sigmoidoscopy* every 5 years

*If a person chooses to be screened with a test other than colonoscopy, any abnormal test result should be followed up with colonoscopy.

If you're in good health, you should continue regular screening through age 75.

For people ages 76 through 85, talk with your health care provider about whether continuing to get screened is right for you. When deciding, think about your preferences, overall health, and past screening history.

People over 85 should no longer get colorectal cancer screening.

How can I find out more about colorectal cancer?

Asking about colorectal cancer screening isn't always easy. The American Cancer Society can help. Call us at **1-800-227-2345**. We can tell you more about the tests, help you talk to your health care provider, or listen to your concerns.



There are many different tests that can be used to check for colorectal cancer in people who don't have symptoms. Learn more about them here, then talk to a health care provider about the best colorectal cancer screening plan for you.

For cancer information, day-to-day help and support, visit the American Cancer Society website at **cancer.org** or call us at **1-800-227-2345**. We're here when you need us.



cancer.org | 1.800.227.2345

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