

Colorectal Cancer Screening — What you need to know



What is colorectal cancer?

Colorectal cancer is the 2nd 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. Screening tests can find polyps before they are cancer. Then they 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 treat it early on.

- Regular screening is recommended for all adults who are 50 to 75 years old.
- If you are between ages 76 to 85 years old, ask your doctor if you should be screened.
- African Americans should begin screening at 45 years old.
- Individuals with a 1st degree relative with cancer should be screened with a colonoscopy 10 years prior to the age of diagnosis of their 1st degree relative.
- Patients with inflammatory bowel disease (IBD) should discuss screening strategies with their doctor.



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 50+
- Family history of:
 - Colorectal polyps or colorectal cancer
 - Inflammatory bowel disease (Crohn's disease or ulcerative colitis)
 - A genetic syndrome 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 (eight or more drinks per week for women, fifteen or more drinks per week for men)



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.



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)

Turn paper over to learn what screening test is right for you.

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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.

TEST	WHAT IS IT?	PREPARATION			HOW OFTEN?	SPECIAL CONSIDERATIONS
		Nothing	Special Diet	Laxative /Enema	# of Years	
Fecal Immunochemical Test (FIT)	The first part of 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.	X			1 year	If anything unusual is found in the sample, your doctor will tell you to get a follow-up colonoscopy.
Colonoscopy	This is an exam that uses a small camera to look inside your colon. It is done at a doctor's office or hospital. 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.		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.
Flexible Sigmoidoscopy (flex sig)	The doctor uses a thin lighted tube to check for polyps or cancer inside the rectum and lower portion of the colon. They can remove any growths or polyps they find during the test.		X	X	5 years or once every 10 years if you get a FIT test every year.	
CT Colonography (virtual colonoscopy)	Your doctor will use X-rays and computers to get pictures of your whole colon.		X	X	5 years	
FIT-DNA	The first part of 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			1–3 years	If anything unusual is found, your doctor will tell you to get a follow-up colonoscopy.
Guaic-based Fecal Occult Blood Test (gFOBT)	The first part of 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 use a stick to take a small stool sample. You will mail the test to your doctor or a lab. The samples will be tested for blood. This test needs you to take 3 separate samples.		X		1 year	If anything unusual is found, your doctor will tell you to get a follow-up colonoscopy.

Adapted from the Centers for Disease Control and Prevention's Screen for Life: National Colorectal Cancer Action Campaign, May 2017 and Colon Cancer Alliance's National Campaign May 2017.