

Screening for Colorectal Cancer

Introduction

Cancer of the colon or rectum is called “colorectal cancer.” It is one of the most common cancers among men and women.

Colorectal cancer is the second leading cause of cancer-related death in the United States. About 57,000 people died from colorectal cancer in the United States in 2004. It kills more people each year than breast cancer or prostate cancer.

The earlier colorectal cancer is found, the better doctors can treat it.

This reference summary gives you information about colorectal cancer. It will also help you understand the two screening tests most often used to find colorectal cancer early. You will learn about the advantages and disadvantages and the possible risks and complications of these two screening tests.

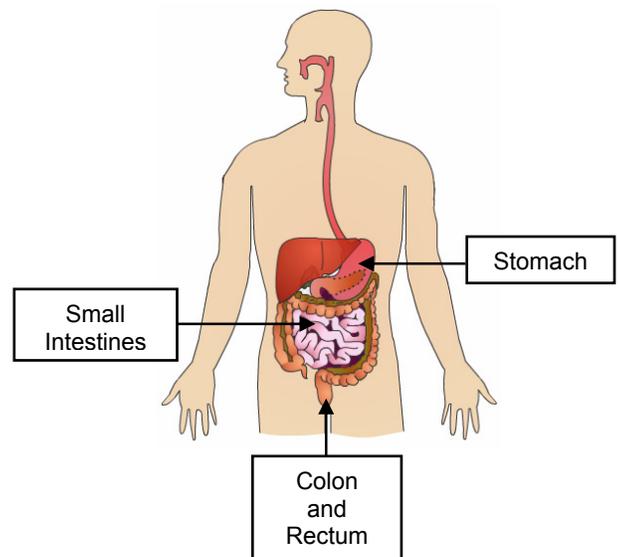
The Colon

When you eat, food goes into your stomach.

When food is digested, it goes from the stomach to the small intestines and then to the colon.

In the colon, stools are formed from leftover food that your body can't use.

Stools are stored in the last part of the colon before going out of your body through the rectum.

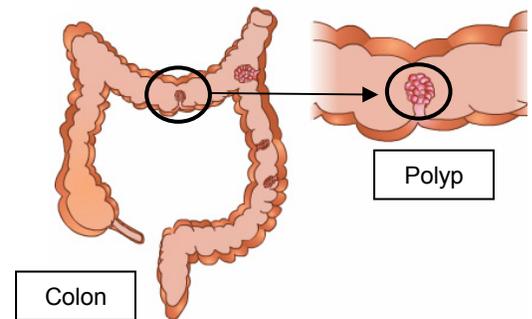


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Polyps and cancers in the colon usually grow slowly. A polyp is a mass of tissue that grows inside the colon. It looks like a small grape.

Polyps may bleed from time to time. Some polyps can turn into cancer over time if they are not removed early.

Sometimes this blood is visible in a person's stool; other times it is not.



Screening

Doctors recommend that all people who are 50 years of age and older get screened for colorectal cancer.

Some people may need to be screened earlier because they may be more likely to get colorectal cancer. For example, doctors may recommend screening earlier if someone in your family has already had colorectal cancer because it sometimes runs in families.

Doctors may recommend screening earlier if you are African-American because African-Americans sometimes get this type of cancer at younger ages.

Screening tests find warning signs even before you feel anything wrong. The two tests doctors suggest most often are colonoscopy and the fecal occult blood test or FOBT.



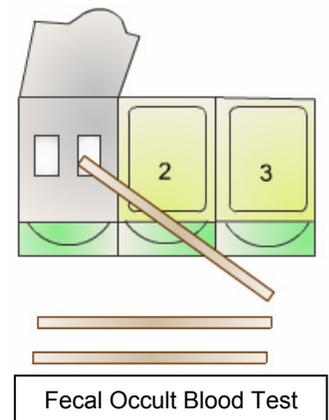
A colonoscopy is a procedure that allows a doctor to look inside the colon and to find cancer very early. It is the only test that allows your doctor to look directly at the inside of your entire colon and take small samples from polyps or remove polyps completely. When a doctor takes small samples, the test is known as a biopsy.

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Blood in your stool can sometimes be found by a screening test like FOBT, which may give a warning sign that you could have colorectal cancer. A screening test like colonoscopy can find polyps earlier, even before they bleed or become cancer. It also allows the doctor to remove polyps if they are found.

Not all polyps grow to be cancer, but they should be watched very closely.

Fecal means stools, occult means not seen by the naked eye. Therefore, a fecal occult blood test, or FOBT, detects blood in stools that you can't see.



If an FOBT detects blood, however, this does not necessarily mean that you have colorectal cancer. Many other conditions can cause blood in the stool. If the test finds blood, your doctor will order other tests to diagnose the cause of the bleeding.

These next sections explain and compare colonoscopy and FOBT.

Colonoscopy

Doctors recommend that you have a colonoscopy once every ten years after age 50 unless your doctor finds something that needs to be checked more often.

Before you have a colonoscopy, the colon needs to be very clean. You will be given a strong laxative. You will drink it the night before the procedure. It will make you go to the bathroom with diarrhea to clean your colon out.

Your doctor may also ask you to only drink clear liquids for 1 or 2 days so you will have less to clean out.

A colonoscopy is done as a same day or outpatient procedure. The procedure only takes about 15-20 minutes. You will get medicine to relax and sedate you. You will be sleepy and should not have pain.

The doctor puts a small, flexible “camera” called a scope inside the colon, through the rectum. It projects pictures of the inside of the colon on a video screen.



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When the scope goes into the rectum, you may feel the need to have a bowel movement. Let your doctor know if you feel this. You may need more medicine to relax you.

The scope will be used to see your entire colon. If your doctor finds a polyp or anything not normal, he or she may remove it and send it to the lab to see if it is cancer or not. At the end of the procedure, the doctor takes the scope out. A colonoscopy is usually not painful, but you may experience some discomfort.



You will need someone to drive you home after the procedure. You will need to take the rest of the day off while the effects of the sedation medicine wear off.

A colonoscopy is a very safe procedure that could be life saving. However, it has possible risks:

- Sometimes the colon is not as clean as it needs to be. If this happens, you might need to have the test another day when your colon is cleaner.
- If a polyp or other tissue is taken out, you could have some bleeding from the rectum. There is usually not much bleeding.
- A rare injury is that the scope could hurt the inside of the colon or even make a small hole in it. If this happens, an operation might be needed to fix the injury.

The FOBT Test

Doctors recommend that you have FOBT once every year after age 50. Some patients prefer the FOBT test even though it is not as good as colonoscopy at finding polyps or early cancer.

You need to watch what you eat before having an FOBT test. Some foods you eat can make the FOBT test give incorrect results. If you eat them before the test it could look like there is blood in your stool even though you don't really have any blood in your stool.

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To avoid this problem, do not eat the following foods for 2 to 3 days before the test: turnips, beets, radishes, horseradish, artichokes, mushrooms, broccoli, bean sprouts, cauliflower, apples, oranges, bananas, grapes and melon.

The blood in red meat can also make the test inaccurate. Do not eat red meat for 2 to 3 days before the test.

Do not take iron supplements, aspirin, or Vitamin C before the test because they can also affect the results.

Your doctor may ask you to stop taking some medicines that could affect the FOBT test results. Ask your doctor about what not to take before you have the test.



If you have your menstrual period or have bleeding hemorrhoids, the FOBT should be done at another time.

To be most accurate, the test should be done at home over several days.

A small sample of stool is placed on a test card. Follow the instructions carefully. For most tests, you will use stool samples from three bowel movements on three different days. For 2-3 days before each test, remember not to eat foods or take medicines that could make it look like you have blood in your stools when you really don't.

Although you may find it unpleasant to collect a stool sample, the test has no risks and is a good way to screen for cancer.

Things people use to clean or deodorize the toilet may affect the test. If the stool sample card touches any part of the toilet or other place where cleaning products were used you should redo the test.

If your FOBT test shows blood in your stool, your doctor may ask you to repeat the FOBT. You may also be asked to have a colonoscopy. It does not necessarily mean that you have cancer.

Remember that many foods and medicines affect results. Also remember that most patients who have bleeding have it from a health problem that is not cancer.

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Conclusion

Colonoscopy is the most accurate test for diagnosing colon cancer. A colonoscopy is a very safe procedure that can detect colon cancer very early. Most people find preparing for the test to be unpleasant. The procedure is uncomfortable but not usually painful. You need someone to drive you to get the test and take you home.

Colonoscopy has some risks and complications, but they are very rare. Colonoscopy is expensive but your insurance company may pay for the majority of the cost. Check how much your insurance pays and if you have a co-payment.

The FOBT test is completely safe and can detect colon cancer early. It has no risks or complications. You can't eat certain foods and medicines before having the test. In addition, you have to collect stools on 3 different days at home.

If the FOBT test shows blood in your stools, your doctor will ask you to have more tests. You may be asked to have a colonoscopy. FOBT is less sensitive than colonoscopy, meaning that FOBT would be less likely to detect a cancer than a colonoscopy.

The FOBT test doesn't cost much. Check how much your insurance pays and if you have a co-payment. Get screened; It could save your life! Ask your doctor about which cancer screening test is best for you.



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