

# Colorectal Health

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Colorectal cancer is the third most diagnosed cancer in women, following breast and lung cancers. The myth that Colorectal cancer is just a "Man's Disease" is wrong. Colorectal cancer strikes equally among women and men and has no racial bias. Colorectal cancer often strikes without any warning signs or symptoms. Usually, Colorectal cancer occurs in mid-life, after the age of 50 years.

What most people do not know is that the majority of Colorectal cancers begin as a polyp, an abnormal growth of tissue found on the wall of the colon. When polyp(s) are detected, they may be removed at the pre-malignant state and prevent the development of Colorectal cancer.

## Who is at risk for Colorectal cancer?

All adults are at risk and risk generally increases as we get older. Without undergoing screening or taking preventive action, approximately one in 17 persons in the United States will develop Colorectal cancer at some point in life. Average Risk: Every adult over age 50.

## What are the symptoms of Colorectal cancer?

Colorectal cancer is a silent stalker, usually causing no symptoms until the disease is very advanced. If you experience any of the following signs or symptoms, see your health care provider.

- Rectal bleeding or pain
- Change in a regular bowel habit
- Unexplained anemia
- Weight loss
- New onset of lower abdominal pains

## Colorectal Cancer Screening Recommendations

The strategy for reducing Colorectal cancer deaths is simple.

- For normal risk individuals, screening tests begin at age 50 and the preferred approach is a screening colonoscopy every 10 years; an alternate strategy consists of annual stool test for blood and a flexible sigmoidoscopic exam every 3 to 5 years.
- Colonoscopic surveillance (also called screening colonoscopy) needs to be available at more frequent intervals for individuals at high risk for Colorectal cancer (for instance, those with a personal history of Colorectal cancer or adenomatous polyps; family history of Colorectal cancer; nonhereditary polyposis; Colorectal cancer; or a predisposing condition such as inflammatory bowel disease.) Medicare provides for surveillance colonoscopy no more frequently than once every two years for those at high risk.
- For both average and high risk individuals, all potential pre-cancerous polyps must be removed.

## Steps you can take to prevent colorectal cancer:

- Adopt a low-fat, high fiber diet. Include a variety of vegetables, natural grains, and fruits.
- Consider taking calcium supplements and a daily multivitamin with 0.4 mg of folic acid. Also increase intake of foods with high levels of vitamins C, A, and D.
- Try to stay at a healthy weight. Ask your health care provider about a healthy weight range for you.
- Consume alcoholic beverages in moderation. For women, drink no more than one drink per day.
- Avoid salt-cured, pickled, and smoked foods.
- If you smoke, quit. Ask your health care provider or nurse for help.
- Get regular physical activity.
- When you turn 50, start getting regular colorectal screening exams. These include yearly rectal exams and stool blood tests, as well as sigmoidoscopy every 5 years and colonoscopy every 10 years. If family members developed cancer at a young age, talk to your health care provider about testing at an earlier age.

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## For more information:

American College of Gastroenterology, (301) 263-9000, [www.acg.gi.org](http://www.acg.gi.org)  
Colon Cancer Alliance, (877) 442-2030, [www.ccalliance.org](http://www.ccalliance.org)  
Colon Cancer Network, (301) 879-1500, [www.colorectal-cancer.net](http://www.colorectal-cancer.net)