

WARNING SIGNS AND SYMPTOMS

Most people with colorectal cancer do not have any symptoms in the early stage of the disease. That is why a screening colonoscopy, is so important.

SIGNS AND SYMPTOMS INCLUDE

- *Changes in bowel habits*
- *Blood in the stool*
- *Unexplained weight loss*
- *Pain with bowel movement*
- *Feeling that your bowel does not empty completely*
- *Abdominal discomfort (frequent gas, bloating, fullness, cramps and pain)*
- *Problems related to blood loss (anemia, weakness, fatigue, shortness of breath, pounding or racing heart, chest pain and intolerance to exercise)*

These symptoms may be caused by colorectal cancer or by other conditions such as infections, hemorrhoids and inflammatory bowel disease. It is important to tell your doctor about any of these symptoms and ask if a colonoscopy is appropriate for you.

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UNDERSTANDING COLORECTAL CANCER



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PREVENTION

Making lifestyle changes, especially eating less red meat and more fiber, losing weight, quitting smoking and getting more exercise, may help prevent the disease, even in people with a family history.

AM I AT RISK?

Most cases of colorectal cancer occur in men and women over age 50. Even if you have no family history of colorectal cancer, an unhealthy lifestyle can increase your risk of developing the disease. Some experts believe making healthy lifestyle changes may lower the risk of developing colorectal cancer by as much as 70 percent. If colorectal cancer is diagnosed, the prognosis depends on how much the cancer has spread. Although colorectal cancer is responsible for thousands of deaths each year, it is highly treatable if caught early.

RISK FACTORS

- Age (being over 50)
- Previous colorectal cancer
- A history of adenomatous polyps
- Family history of colorectal cancer
- Smoking
- Obesity
- Heavy use of alcohol
- Diabetes
- Previous endometrial or ovarian cancer
- Undergoing radiation for gynecologic cancer
- Prolonged consumption of red and processed meat
- Inflammatory bowel disease (such as Crohn's disease and ulcerative colitis)

TREATMENT OPTIONS

Surgery to remove the part of the colon containing the tumor is primary treatment. Depending on the stage of the cancer, surgery is followed by chemotherapy. If the tumor is in the rectum, radiation and chemotherapy may be required before or after surgery.

EARLY DETECTION

Colorectal cancer is the second leading cause of cancer-related deaths in America. Most colorectal cancers begin as benign adenomas, or polyps, that grow on the lining of the colon or rectum. These growths spread slowly, taking 10 to 20 years to become cancerous. Since colorectal cancer is highly preventable, even curable when detected early, regular screening can detect polyps before they become cancerous. Current guidelines recommend these screening options, starting at age 50 for people with an average risk of colon cancer:

- **Colonoscopy**, every 10 years (if previous colonoscopy was normal and no other risk factors are present), examines the rectum and entire colon using a lighted instrument.
- **Double contrast barium enema**, every five years (assuming all previous tests were normal and no other risk factors are present), examines series of x-rays that reveal outlines of the colon and rectum.
- **Flexible sigmoidoscopy**, every five years, examines the rectum and lower colon using a lighted instrument.
- **Annual fecal occult blood testing** tests for blood in the stool.
- **Stool DNA testing** tests for DNA markers shed by cancer cells of precancerous polyps.
- **Virtual colonoscopy (CT colonography)**, every five years (assuming all previous tests were normal and no other risk factors are present), uses a CT scan to take images of the colon.

Those with a family history of colorectal cancer should have a screening colonoscopy starting at least 10 years before the age of the relative at the time of his or her diagnosis.