

Understanding Colon Cancer Screening

Colon Cancer Screening Saves Lives

Approximately 150,000 new cases of colorectal cancer are diagnosed every year in the United States and nearly 50,000 people die from the disease. It has been estimated that increased awareness and screening would save at least 30,000 lives each year. Colorectal cancer is highly preventable and can be detected by testing even before there are symptoms. The American Society for Gastrointestinal Endoscopy encourages everyone over 50, or those under 50 with a family history or other risk factors, to be screened for colorectal cancer.



A colonoscopy screening exam is almost always done on an outpatient basis. The procedure typically takes less than 45 minutes.

Six Questions That Could Save Your Life (or the Life of Someone You Love)

Test your knowledge about colorectal cancer (CRC) screening. If you think the answer is true or mostly true, answer true. If you think the answer is false or mostly false, answer false.

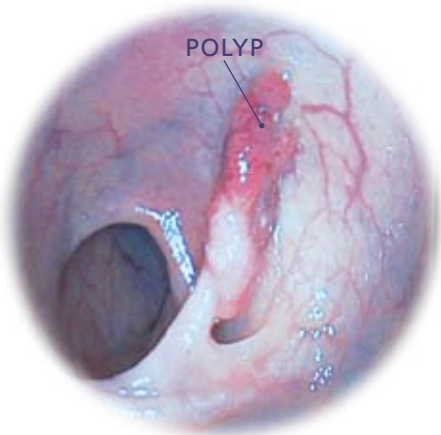
1. Colorectal cancer is predominantly a “man’s disease,” affecting many more men than women annually.

FALSE. Colorectal cancer affects an equal number of men and women. Many women, however, think of CRC as a disease only affecting men and might be unaware of important information about screening and preventing colorectal cancer that could save their lives, says the American Society for Gastrointestinal Endoscopy.

2. Only women over the age of 50 who are currently experiencing some symptoms or problems should be screened for colorectal cancer or polyps.

FALSE. Beginning at age 50, all men and women should be screened for colorectal cancer EVEN IF THEY ARE EXPERIENCING NO PROBLEMS OR SYMPTOMS.

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Polyps are abnormal growths in the colon lining that are usually benign (noncancerous). They vary in size from a tiny dot to several inches.



ENDOSCOPE

Among the recommended procedures for colon cancer screening, colonoscopy and flexible sigmoidoscopy are endoscopic procedures. Among the recommended procedures for colon cancer screening, colonoscopy and flexible sigmoidoscopy are endoscopic procedures.

▶ **March is National Colorectal Cancer Awareness Month**

3. A colonoscopy screening exam typically requires an overnight stay in a hospital.

FALSE. A colonoscopy screening exam is almost always done on an out-patient basis. A mild sedative is usually given before the procedure and then a flexible, slender tube is inserted into the rectum to look inside the colon. The test is safe and the procedure itself typically takes less than 45 minutes.

4. Colorectal cancer is the third leading cause of cancer deaths in the United States.

TRUE. After lung cancer, colorectal cancer is the third leading cause of cancer deaths in the United States. Annually, approximately 150,000 new cases of colorectal cancer are diagnosed in the United States and 50,000 people die from the disease. It has been estimated that increased awareness and screening would save at least 30,000 lives each year.

5. Tests used for screening for colon cancer include digital rectal exam, stool blood test, flexible sigmoidoscopy and colonoscopy.

TRUE. These tests are used to screen for colorectal cancer even before there are symptoms. Talk to your healthcare provider about which test is best for you. Current recommended screening options* include:

Beginning at age 50, men and women should have:

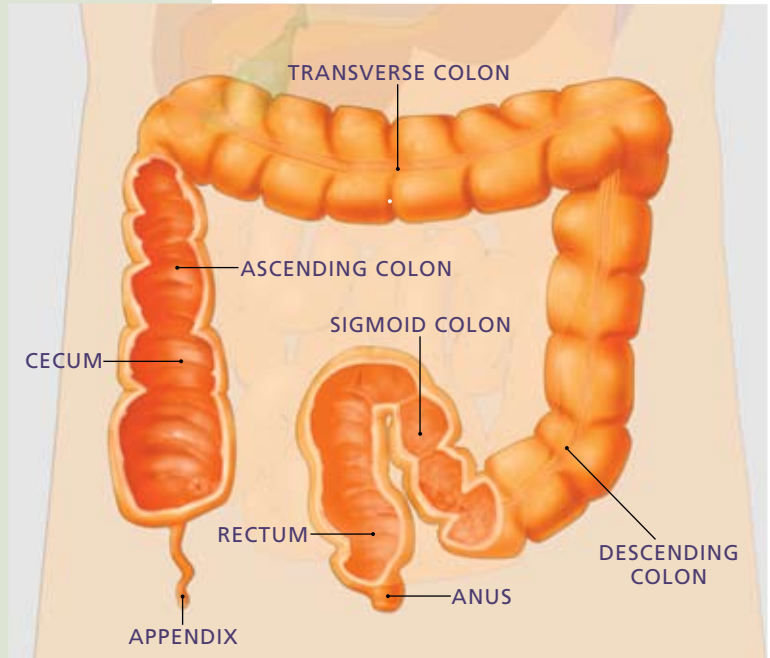
- An annual occult blood test on spontaneously passed stool (at a minimum);
- A flexible sigmoidoscopy every 5 years; or,
- A complete colonoscopy every 10 years.

Important: You may need to begin periodic screening colonoscopy earlier than age 50 years if you have a personal or family history of colorectal cancer, polyps or long-standing ulcerative colitis.

6. Colon cancer is often preventable.

TRUE. Colorectal cancer is highly preventable. Colonoscopy may detect polyps (small growths on the lining of the colon). Removal of these polyps (by biopsy or snare polypectomy) results in a major reduction in the likelihood of developing colorectal cancer in the future.

In a colonoscopy, the physician passes the endoscope through your rectum and into the colon, allowing the physician to examine the tissue of the colon wall for abnormalities such as polyps.



The endoscope is a thin, flexible tube with a camera and a light on the end of it. During the procedure, images of the colon wall are simultaneously viewed on a monitor.

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The American Society for Gastrointestinal Endoscopy encourages you to talk with your healthcare provider about colon cancer screening and encourages everyone over the age of 50 to undergo the appropriate screening. If your primary healthcare provider has recommended a colonoscopy, you can find a physician with specialized training in these GI endoscopic procedures by using the free Find a Doctor tool on ASGE's Web site at www.screen4coloncancer.org. For more information about colon cancer screening, visit www.screen4coloncancer.org.

asge.org

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Notes or questions:

This information is intended only to provide general guidance. It does not provide definitive medical advice. It is important that you consult your doctor about your specific condition.

Since its founding in 1941, the American Society for Gastrointestinal Endoscopy (ASGE) has been dedicated to advancing patient care and digestive health by promoting excellence in gastrointestinal endoscopy. ASGE, with more than 11,000 members worldwide, promotes the highest standards for endoscopic training and practice, fosters endoscopic research, and is the foremost resource for endoscopic education. This information is the opinion of and provided by the American Society for Gastrointestinal Endoscopy.



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