

MARCH 2024

COLORECTAL CANCER AWARENESS MONTH

Weekly Topic Briefer

WHO SHOULD GET SCREENED?

- The U.S. Preventive Services Task Force, a group of medical experts, recommends that adults who are **45 to 75 years** old be screened for colorectal cancer. The decision to be screened between ages 76 and 85 should be made on an individual basis. If you are older than 75, talk to your health care provider about getting screened. Several different screening tests can be used to find polyps or colorectal cancer.
- People with average risk and no family history should begin screening at the age of 45. **A family history of polyps or colorectal cancer means screening should start ten years before a loved one was diagnosed or a polyp was found.**
- Every patient is different. Please talk with your provider about your health history to determine when colon cancer screening should begin for you.

WHY SHOULD WE SCREEN?

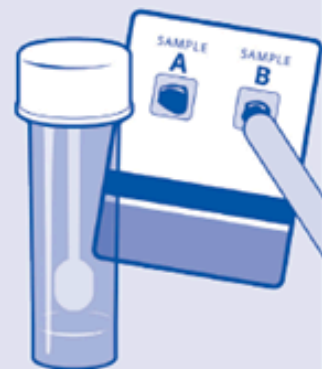
- Colorectal cancer usually starts from precancerous polyps in the colon or rectum. A polyp is a growth that shouldn't be there. Over time, some polyps can turn into cancer.
- Screening tests can find precancerous polyps, so they can be removed before they turn into cancer. Screening tests can also find colorectal cancer early, when treatment works best.

STOOL TESTS

Fecal Immunochemical Test (FIT)

HOW OFTEN: **Once a year**

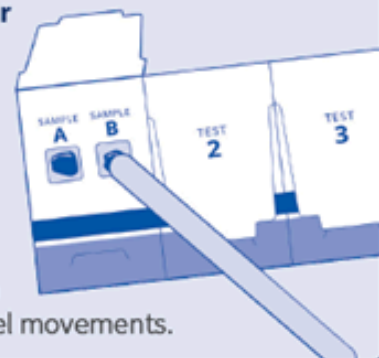
- » You take a stool sample at home using a kit your provider gives you.
- » It checks for blood in samples from 1 bowel movement.
- » You mail your sample to a lab.



High-sensitivity Guaiac-based Fecal Occult Blood Test (HSgFOBT)

HOW OFTEN: **Once a year**

- » You take stool samples at home using a kit your provider gives you.
- » You mail your samples to a lab.
- » It checks for blood in samples from 3 bowel movements.



Multi-target Stool DNA (MT-sDNA)

HOW OFTEN: **Every 3 years**

- » You collect a bowel movement and stool sample at home using a kit your provider has shipped to you.
- » It checks stool for blood and abnormal DNA from polyps or cancer.
- » You mail a whole bowel movement and stool sample to a lab.



Image sourced from American Cancer Society Fact Sheet

PREP IS NOT WHAT IT USED TO BE

There are several different types of colonoscopy prep available today. It's important to review any questions or concerns you may have with your doctor about preparing for a colonoscopy.

- Polymer-based formulas (PEG)
 - The most commonly prescribed bowel prep formulas use a polymer-based laxative known as polyethylene glycol 3350 (PEG). PEG formulas are typically in powder form designed to be mixed with large volumes of water.
- Saline-based formulas (NaP)
 - Saline-based laxatives include sodium phosphate (NaP) as a primary osmotic agent, and often other mineral salts such as potassium and magnesium.

MYTHS ABOUT CRC SCREENING

MYTH: Screening is too expensive.

FACT: Most screening tests are covered by insurance, including Medicare. There are also low-cost screening options.

MYTH: Nobody in my family has a history of colorectal cancer, so I am not at risk.

FACT: Most colorectal cancers are found in people without a family history of colorectal cancer. Those with a family history are at higher risk.

MYTH: If my stool looks normal, I should be fine.

FACT: You can have colorectal cancer or polyps even if your stool looks normal.

MYTH: Colorectal cancer is not that common.

FACT: Colorectal cancer is the second-leading cause of cancer related deaths in the U.S. Screening is the best way to prevent death from colorectal cancer.

MYTH: Having a colonoscopy is the only way to get screened.

FACT: There are several different screening tests available. Some are simple and can be done at home.

VISUAL TESTS

Colonoscopy

HOW OFTEN: **Every 10 years**

- » Your provider uses a tube with a tiny camera to look for and remove polyps and cancer in your colon and rectum.
- » You take a prep (tablets and something to drink) before the test to empty the colon. It causes diarrhea (watery stool).
- » You will be sedated and need a day off work. You will need someone to drive you.



CT Colonography(CTC)

HOW OFTEN: **Every 5 years**

- » The test is also called virtual colonoscopy.
- » Your provider uses an x-ray machine to look for polyps and cancer in your colon and rectum.
- » You take a prep (tablets and something to drink) before the test to empty the colon. It causes diarrhea (watery stool).



Flexible Sigmoidoscopy (FS)

HOW OFTEN: **Every 5 years**

- » Your provider uses a tube with a tiny camera to look for polyps and cancer in the lower part of your colon and rectum.
- » You give yourself 1 or 2 pre-filled enemas before the test to empty and clean the colon.
- » This test is not available in most places.



Image sourced from American Cancer Society Fact Sheet

Click on the Links Below to Learn More

1. [What Should I Know about Screening for Colorectal Cancer](#)

2. [Colorectal Cancer Screening - NCI](#)

3. [Colorectal Cancer Guideline | How Often to Have Screening Test](#)

4. [Colorectal Cancer Fach Sheet for Health Care Providers](#)