

# Colorectal Awareness Member Education

#### What is Colorectal Cancer?

Colorectal cancer is cancer that occurs in the colon or rectum. Sometimes it is called colon cancer, for short. The colon is the large intestine or large bowel. The rectum is the passageway that connects the colon to the anus.

## What is Colorectal Cancer Screening?

A screening test is used to look for a disease when a person does not have symptoms. When a person does have symptoms, diagnostic tests are used to find out the cause.

Sometimes abnormal growths, called polyps, form in the colon or rectum. Over time, some polyps may turn into cancer.

Screening tests can find pre-cancerous polyps, so that they can be removed before they turn into cancer. Screening tests can also find colorectal cancer in its early stage, when treatment works best.

#### When Should I Begin to Get Screened?

Most people should begin screening for colorectal cancer at age 50, then continue getting screened at regular intervals. Speak with your doctor about when you should begin screening and how often you should be tested. You may need to be tested earlier than at age 50, or more often than other people, if the following are true:

- You or a close relative have had colorectal polyps or colorectal cancer.
- You have an inflammatory bowel disease, such as Crohn's disease or ulcerative colitis.
- You have a genetic syndrome, such as familial adenomatous polyposis (FAP) or hereditary non-polyposis colorectal cancer (Lynch syndrome).

# **Types of Colorectal Screening Tests:**

#### **Stool Tests**

• The **fecal occult blood test (FOBT)** uses a chemical to detect blood in the stool. It is done once a year. For this test, you receive a test kit from your health care provider. At home, you use a stick or brush to obtain a small amount of stool. You return the test kit to the doctor or a lab, where the stool sample is checked for the presence of blood.

- The **fecal immunochemical test (FIT)** uses antibodies to detect blood in the stool. It is also done once a year in the same way as a FOBT.
- The **FIT-DNA test** (also referred to as the stool DNA test) combines the FIT with a test that detects altered DNA in the stool. For this test, you collect an entire bowel movement and send it to a lab to be checked for cancer cells. It is done once every one to three years.

# **Double contrast Barium Enema (DCBE)**

During this test, a liquid containing barium (which is a radiocontrast agent) is put into the rectum. The barium outlines the colon and rectum on an x-ray and helps to show abnormalities. This test is usually done every five years.

#### Flexible Sigmoidoscopy

For this test, the doctor puts a flexible, lighted tube into your rectum. The doctor checks for polyps or cancer inside the rectum and lower third of the colon. This is usually repeated every five years.

# Colonoscopy

This is similar to a flexible sigmoidoscopy test, except that the doctor uses a longer instrument to check for polyps or cancer inside the rectum and the entire colon. During the test, the doctor can find and remove most polyps and some cancers. Colonoscopy is also used as a follow-up test if anything unusual is found during one of the other screening tests. A screening colonoscopy is usually repeated every ten years.

## How do I Know Which Screening Test is Right for Me?

There is no single "best test" for any person. Each test has its advantages and disadvantages. Talk to your doctor about the pros and cons of each test, and how often you should be tested. Which test to use depends on:

- Your preferences.
- Your medical condition.
- The likelihood that you will get the test, based on your level of comfort.
- The resources available for testing and follow-up.

If you do not have a primary doctor, you may search the Alliant Health Plans' website at <a href="www.AlliantPlans.com">www.AlliantPlans.com</a>, and click on the "Find a Provider" link located on the home page to begin your search.



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