

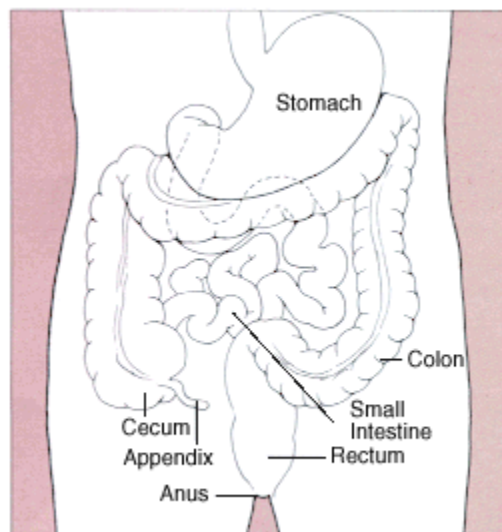
## March Is National Colorectal Cancer Awareness Month



*Emblem introduced in 2004 by the Colon Cancer Alliance*

### What Is Colorectal Cancer?

The colon and rectum are parts of the body's digestive system. They remove water and salts from food and store stool (feces) until it passes out of the body. Colorectal cancer occurs in the colon or rectum when the cells become abnormal and divide without control or order, forming a mass called a tumor.



Colon, rectum, and other parts of digestive system

### What Are the Key Statistics About Colorectal Cancer?

The lifetime risk of developing colorectal cancer is: about 1 in 23 (4.3%) for men and 1 in 25 (4.0%) for women. It is the third leading cause of cancer-related deaths in men and women in the United States. In 2020, it is estimated that 147,950 new cases will be diagnosed, and 53,200 people will die from colorectal cancer.

### Who's At Risk for Colorectal Cancer?

The exact causes of colorectal cancer are not known. However, studies show that certain factors are linked to an increased chance of developing colorectal cancer:

- **Age** - Colorectal cancer is more likely to occur as people get older. Although the disease can occur at any age, most people who develop colorectal cancer are over the age of 50.
- **Polyps** - Polyps are growths that stick out from the inner wall of the colon or rectum. They are quite common in people over age 50. Most polyps are benign (noncancerous). Experts believe that most colorectal cancers develop in certain polyps, called adenomas. Finding and removing these growths may help prevent colorectal cancer.

- **Personal history** - Research shows that some women with a history of ovarian, uterine, or breast cancer have a higher-than-average chance of developing colorectal cancer.
- **Family history** - People who have a close relative (parent, sibling, child) or several family members with a history of colorectal cancer are more likely to develop this type of cancer. This is especially true if these family members were diagnosed at a younger age. Most cases of colorectal cancer are not hereditary; only about 10% are caused by inheriting certain genes. Two types of hereditary colon cancer are Hereditary Non-Polyposis Colorectal Cancer (HNPCC) and Familial Adenomatous Polyposis (FAP).
  - **Hereditary Nonpolyposis Colorectal Cancer**, or HNPCC, is caused by a change in the genes that help repair cells. People with HNPCC tend to develop colon cancer on the right side of the colon. Most people with HNPCC will develop colorectal cancer around the age of 45, and typically only have few polyps in the colon. Women with HNPCC are also at a higher risk for endometrial, or uterine and ovarian cancers.
  - **Familial Adenomatous Polyposis**, or FAP, is a rare, inherited condition in which hundreds of polyps develop in the colon and rectum. The people with FAP will develop colorectal cancer by the age of 40. Because this condition is very likely to lead to colorectal cancer, it is usually treated with surgery to remove the colon and rectum.

If you are concerned about your family history of colon cancer, genetic counseling is available through The Hereditary Oncology Prevention and Evaluation (HOPE) program at Rutgers Cancer Institute of New Jersey. To schedule an appointment, please call 732-235-7110.

- **Ulcerative colitis or Crohn's disease** - Ulcerative colitis is a condition that causes swelling and sores (ulcers) in the lining of the colon. Crohn's disease can cause swelling of the entire gastrointestinal tract, but most often affects the end portion of the small intestine and the colon. People who have ulcerative colitis or Crohn's disease may be more likely to develop colorectal cancer than people who do not have these conditions.
- **Diet** - Research suggests that the development of colorectal cancer may be linked with a diet that is high in fat, red meats, calories, and low in fiber, fruits, and vegetables.
- **Exercise** - Some research suggests that an inactive lifestyle may be linked with an increased risk of colorectal cancer. In contrast, people who exercise regularly may have a decreased risk of getting colorectal cancer.

## Can Colorectal Cancer Be Found Early?

Yes! Screening means checking for health problems before they cause signs or symptoms. Screening can find polyps that may in time become cancerous (precancerous polyps), as well as some cancers in an early stage, before they spread to other parts of the body. If screening detects an abnormality, diagnosis and treatment can occur quickly. Finding and removing early colon cancers before it has spread is almost always curative.

Beginning at age 45, both men and women should follow 1 of these 7 testing schedules:

- yearly guaiac-based fecal occult blood test (gFOBT)\*
- yearly fecal immunochemical test (FIT)\* flexible sigmoidoscopy every 5 years
- stool DNA test (sDNA) every 3 years\*
- flexible sigmoidoscopy every 5 years\*
- double-contrast barium enema every 5 years\*
- colonoscopy every 10 years
- CT colonography (virtual colonoscopy) every 5 years\*

\* If the test is positive, a colonoscopy should be done.

If you are at high risk of colon cancer based on family history or other factors, you may need to be screened using a different schedule. Talk with your health care provider about your history and the testing plan that's best for you.

## **What are Signs and Symptoms of Colorectal Cancer?**

See your doctor if you have any of these warning signs:

- Bleeding from your rectum
- Blood in the stool or in the toilet after you have a bowel movement
- A change in bowel habits, such as diarrhea, constipation, or narrowing of the stool, that lasts for more than a few days
- Cramping pain in your lower abdomen
- A feeling that you still need to have a bowel movement that doesn't go away after you have one
- A low red blood count (anemia) without another obvious explanation

Other conditions can cause these symptoms. You should be checked by your doctor to find the reasons for your symptoms.

## **Can Colorectal Cancer Be Prevented?**

The current American Cancer Society recommendations for good nutrition and physical activity are important to colorectal cancer prevention.

- Eat a variety of healthy foods, with emphasis on plant sources
- Be physically active
- Maintain a healthy weight
- Limit use of alcoholic beverages

## **Cancer Prevention Clinical Trials**

If you would like information about clinical trials available in New Jersey for preventing cancer, please call the Cancer Institute of New Jersey at 732-235-8675. For additional information about nationwide cancer prevention trials, you can call the National Cancer Institute at 1-800-4 CANCER or visit their Web site at [www.cancer.gov](http://www.cancer.gov).

## Where Can I Find Further Information?

The Resource and Learning Center                      732-235-9639  
[www.cinj.org/rlc](http://www.cinj.org/rlc)  
Provides reliable, relevant and current information about all aspects of cancer.

National Cancer Institute                                      1-800-4-CANCER  
[www.cancer.gov](http://www.cancer.gov)

The American Cancer Society                                      1-800-ACS-2345  
[www.cancer.org](http://www.cancer.org)

American Institute for Cancer Research                                      1-800-843-8114  
[www.aicr.org](http://www.aicr.org)

National Institute of Health                                      301-496-4000  
[www.nih.gov](http://www.nih.gov)

Colon Cancer Alliance (CCA)                                      877-422-2030  
<http://www.ccalliance.org/>

MedlinePlus  
[www.medlineplus.gov](http://www.medlineplus.gov)



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