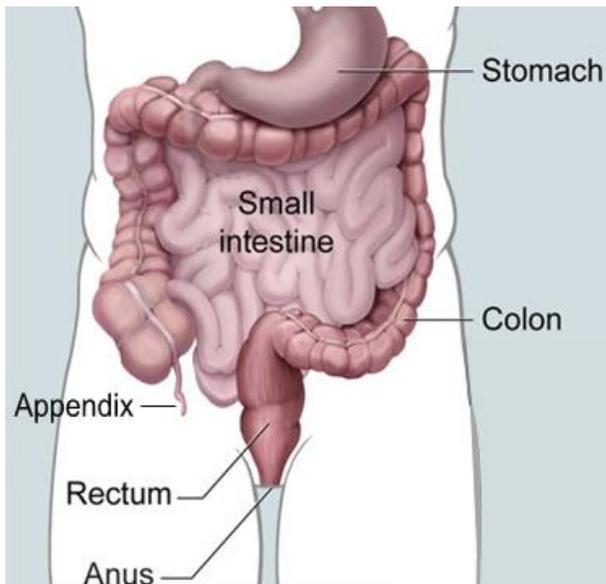


Colorectal Cancer

Information Sheet



What is colorectal cancer?

Colorectal cancer is cancer that starts in your colon or rectum. Your **colon**, also called the large intestine, removes water and nutrients from food and turns the rest into waste (stool). The waste then moves into your **rectum**, the lowest part of the colon. The colon and rectum act as the body's trash compactor.

Colorectal cancer can start from polyps in the colon or rectum. A **polyp** is a growth that shouldn't be there. Over time, some polyps can turn into cancer.

In Wisconsin, colorectal cancer is the third most common cancer for both men and women.

How can I prevent colorectal cancer?

You can lower your chances of developing colorectal cancer by making healthy choices.

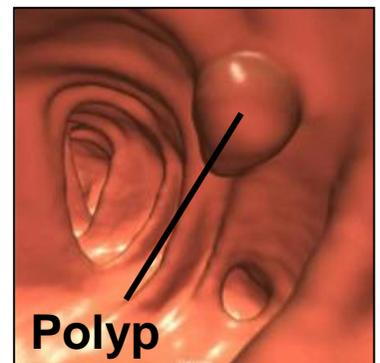
- Eat lots of fruits, vegetables and foods high in fiber (berries, beans, oatmeal)
- Limit foods high in saturated fat (red meat, fried food)
- Be active and have a healthy body weight
- Limit alcoholic drinks
- Do not smoke

What are the possible symptoms of colorectal cancer?

In its early stages, colorectal cancer may have no symptoms.

As colorectal cancer develops, you may experience:

- Blood in or on your stool (bowel movement)
- Stomach pain, aches or cramps that do not go away
- Losing weight and you don't know why
- Change in bowel habits – diarrhea, constipation, narrowing of stools



Talk to your health care provider if you experience any of these symptoms. These symptoms may be caused by something other than cancer, but the only way to know what is causing them is to talk with your health care provider about them.

Are there screening tests that can prevent colorectal cancer or find it early?

- Fecal Occult Blood Testing (FOBT) or a Fecal Immunochemical Test (FIT) every year; or
- Sigmoidoscopy, every 5 years with FOBT or FIT in between; or
- Colonoscopy, every 10 years to examine the entire colon

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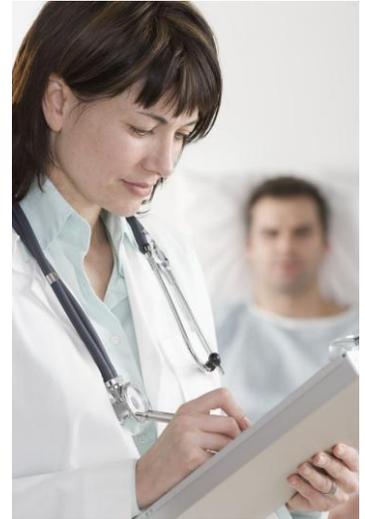
Generally, men and women start colorectal screening at age 50. If you have a mother, father, sister, brother or child who had colorectal cancer and/or you have inflammatory bowel disease, you may need to begin screening at age 40 or younger.

Talk to your health care provider about when to start colorectal cancer screening.

What do all these tests mean?

Different screening tests can be used to find polyps or colorectal cancer. Each can be used alone. Sometimes they are used in combination with each other.

- An **FOBT** and **FIT** are tests that look for blood in your stool. You collect a small amount of a bowel movement at home and then send it to a lab to be tested for the presence of blood. If the test is positive, a colonoscopy should be done.
- A **sigmoidoscopy** examines the rectum and the descending colon. Polyps are not removed during a sigmoidoscopy. If the test is positive or a poly is found, a colonoscopy should be done.
- A **colonoscopy** examines the rectum and the entire colon. A mild sedative is given for a colonoscopy to help calm the patient. During the exam, your health care provider may remove polyps or small pieces of tissue, called a **biopsy**.



A colonoscopy is a safe procedure and is considered the gold standard of colorectal cancer screening.

Where can I get more information?

The National Cancer Institute provides accurate and up-to-date information about colorectal cancer, other cancer types, prevention, detection, treatment, survivorship and end of life care.

Phone: 1-800-4CANCER (1-800-422-6237)

Website: www.cancer.gov

The Rural Cancer Network (RCaN) offers other user-friendly, cancer educational handouts. For more information about questions to ask your doctor about colorectal cancer screening, please see the “Colorectal Cancer Screening: Questions to Ask Your Doctor” handout.

Website: www.ruralcancernetwork.org

For more local information, please contact:

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