

Colorectal Cancer Screening

Dr Kishor Muniyappa
4012 Kelcey Ct, Suite 103
Tallahassee, FL 32308
Ph: 850-297-0351

What we'll be talking about

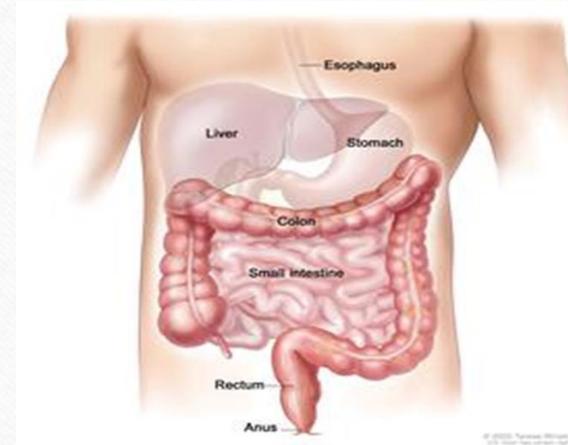
- How common is colorectal cancer?
- What is colorectal cancer?
- What causes it?
- What are the risk factors?
- Can colorectal cancer be prevented?
- Tests to find colorectal cancer early
- What you can do
- More information ?

Colorectal cancer: How common is it?

- The 3rd most common cancer in both men and women in the U.S.
- 2nd leading cause of cancer-related death in the U.S. when men and women are combined
- It's estimated that more than half of all cases could be prevented by regular colonoscopy screening!

What is colorectal cancer?

- The **colon** (large bowel or large intestine)
 - A muscular tube about 5 feet long
 - Part of the digestive system
 - Absorbs water and salt from food
 - Stores waste matter
- The **rectum** is the last 6 inches of the digestive system.



What is colorectal cancer?

- Cancer is the growth of abnormal cells.
- Cancer cells can invade and damage normal tissue.
- Colorectal cancer starts in the colon or the rectum (parts of the digestive system).
- ColoRectal Cancer is often abbreviated as CRC.

Causes of colorectal cancer

- We do not know the cause of most colorectal cancers.
- Most likely cause is related to changes in the genetic material (DNA) in our cells.
- Most DNA changes are related to our lifestyle.

Colorectal cancer risk factors

- **Risk factors** are anything that can increase or decrease a person's chance of getting a disease, such as cancer.
- Age
 - Most CRC occurs in people age 50 and older
- Diet
 - High in red meats (like beef, pork, or lamb) and processed meats (like hot dogs, bacon, or cold cuts)  **raises** risk for CRC
 - High in fruits and vegetables  **lowers** risk

Colorectal cancer risk factors

- Physical activity
 - Less active → raises risk
- Overweight
 - Obesity → raises risk of having and dying from CRC
- Smoking → raises risk
- Alcohol use → raises risk
- Type 2 diabetes → raises risk



Myths about CRC

**YOUR EXCUSE TO
AVOID COLONOSCOPY...**

**"I HAVE
NO RISK
FACTORS."**

**THE SINGLE
BIGGEST MODIFIABLE RISK
FACTOR FOR COLORECTAL
CANCER IS FAILURE TO
BE SCREENED.**

PHYSICIANS from the AMERICAN COLLEGE OF GASTROENTEROLOGY
RECOMMEND COLONOSCOPY
as the **PREFERRED COLORECTAL CANCER PREVENTION TEST**

 
GI.ORG/COLONCANCER

Myths about CRC

YOUR EXCUSE TO AVOID COLONOSCOPY...

"ONLY MEN GET COLON CANCER."

COLON CANCER IS AN EQUAL OPPORTUNITY DISEASE. WOMEN HAVE THE SAME RISK AS MEN.

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Colorectal cancer – major risk factors

Some adults have risk factors that make them much more likely to develop CRC than others:

- Those with inflammatory bowel disease such as
 - Ulcerative colitis
 - Crohn's disease

(Irritable bowel disease is not a risk factor.)

Colorectal cancer – major risk factors

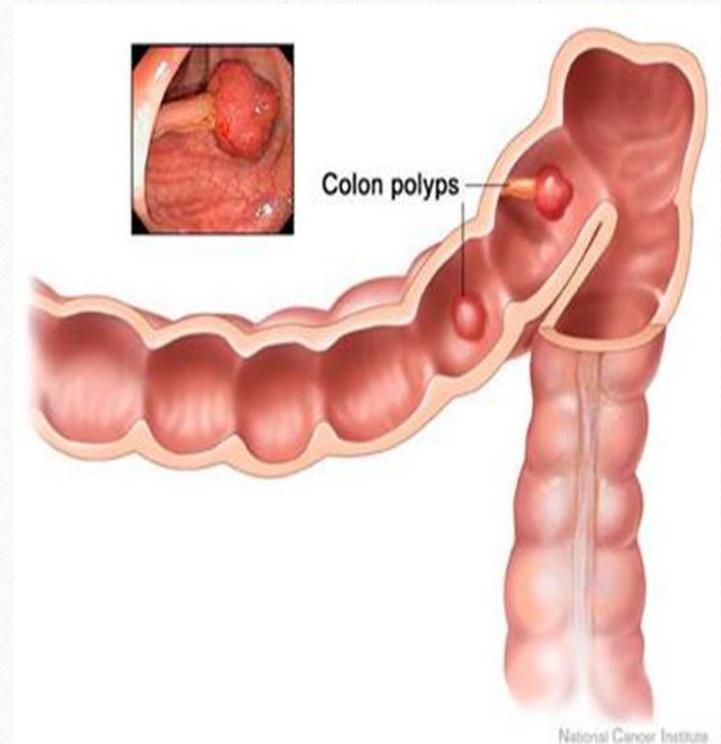
- People who have had adenomatous polyps
- People from families with adenomatous polyps, CRC, or certain inherited syndromes
- Those who have had CRC in the past

(Risk is even higher if the CRC occurred at a younger age)

Talk to your doctor right away if you or people in your family have any of these major risk factors.

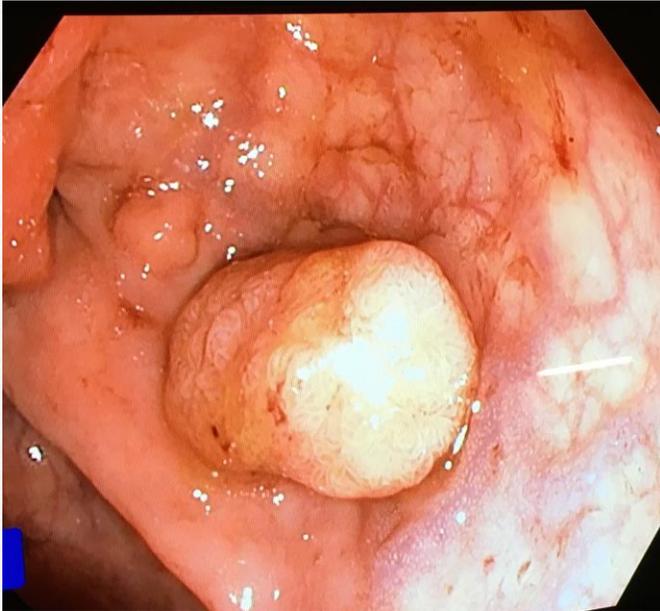
Risk factors – polyps

- A polyp is a growth of tissue in the lining of an organ.
- There are 2 main types of colorectal polyps:
 - Hyperplastic
Very small chance they'll grow into cancer
 - Adenomatous
Most colon and rectal cancers start as adenomatous polyps (“adenomas”)

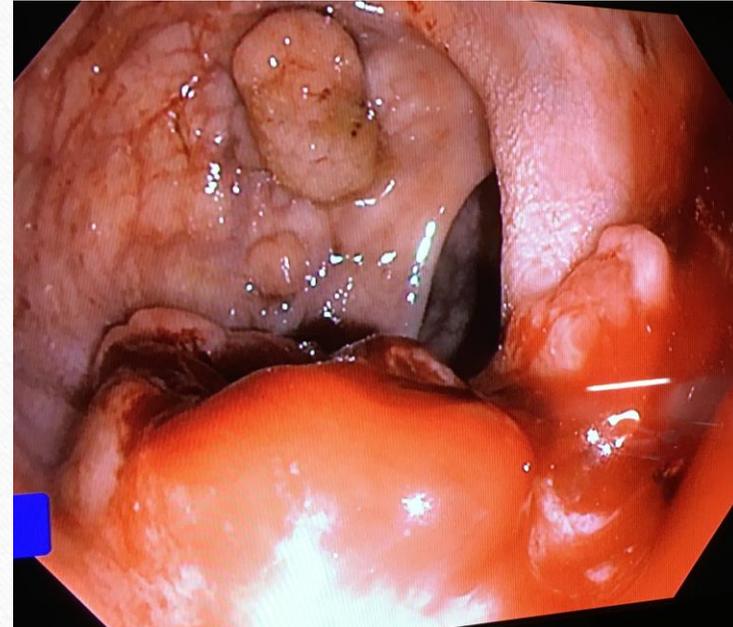


Polyps

Colorectal cancer can develop from a polyp



Polyp



Cancer

Preventing colorectal cancer

- Many colorectal cancers could be prevented with regular screening.
- Screening is testing to find a disease in people who have no symptoms.
- Why screen?
 - To find and remove polyps before they become cancer
 - To find CRC early – when it's small and has not spread, and when treatment can be more effective

How is CRC screening done?

Colonoscopy: Gold Standard

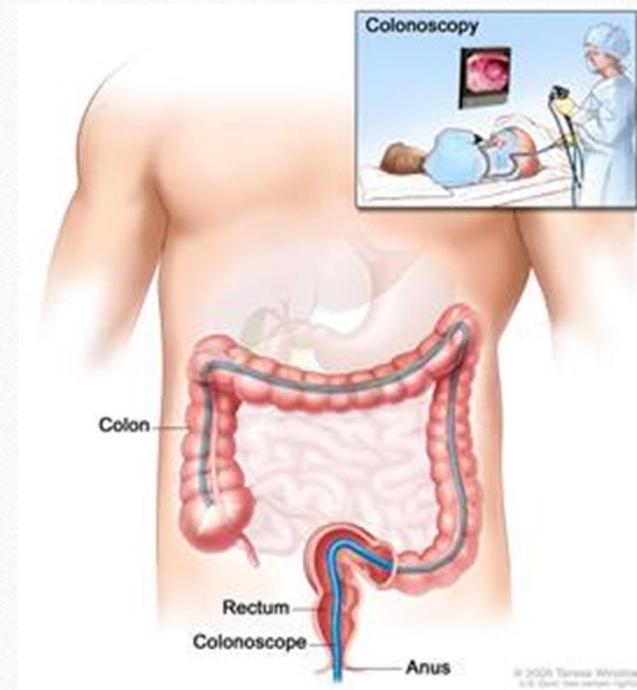
Alternatives

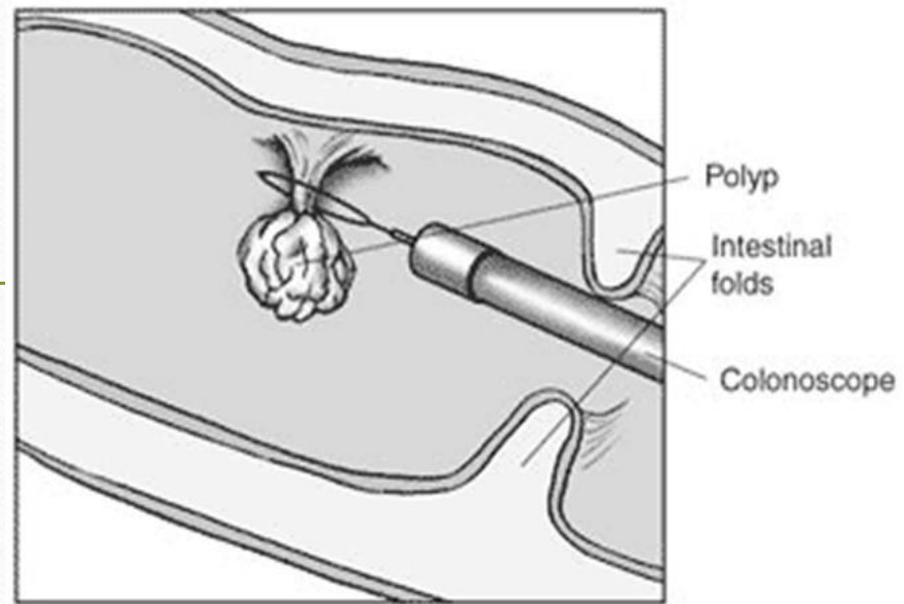
- Flexible Sigmoidoscopy every 5-10 years
- CT Colonography every 5 years
- Annual Hemoccult Sensa
- Fecal DNA testing every 3 years

Colonoscopy

A thin, lighted tube is put in through the anus and rectum and passed up into the colon to look for abnormal areas.

Tissue can be taken from any areas of concern and polyps can be removed.





If polyps are found during a colonoscopy they can be removed with tools used through the narrow scope. Removing polyps before they turn into cancer is how tests like this can prevent cancer.

Colonoscopy

WHAT TO EXPECT FROM COLONOSCOPY:

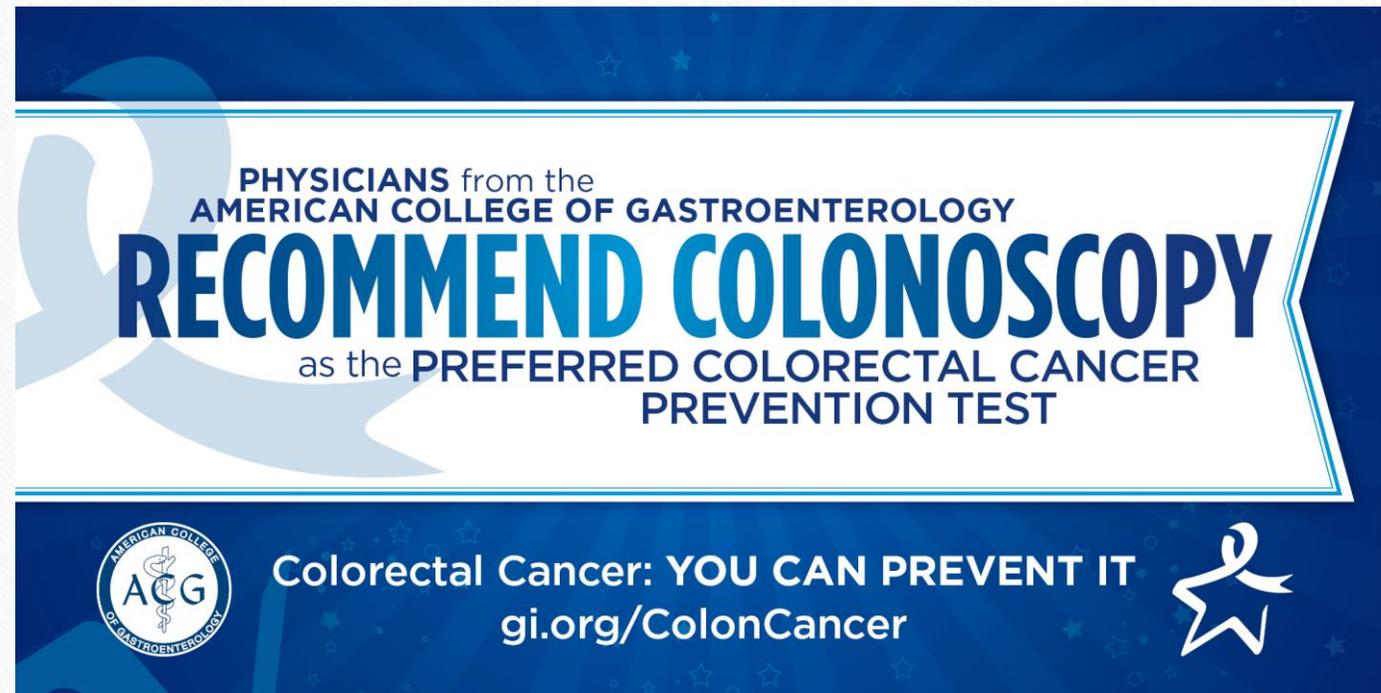
You will be **SAFE AND COMFORTABLE**. While you sleep,
WE TREAT YOU WITH CARE, and MAKE A DIFFERENCE
in PREVENTING COLORECTAL CANCER!



Colorectal Cancer: YOU CAN PREVENT IT
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Colonoscopy



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 Colorectal Cancer: YOU CAN PREVENT IT
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Colorectal Cancer Screening Guidelines

- At age 50, both men and women should begin regular screening and have one of the screening tests listed here or on the next slide:

Tests that find both polyps and cancer

- Colonoscopy every 10 years, or
- Flexible sigmoidoscopy (FSIG) every 5 years*, or
- Double-contrast barium enema (DCBE) every 5 years*, or
- CT colonography (virtual colonoscopy) every 5 years*

*Colonoscopy should be done if anything is found by these tests

Colorectal Cancer Screening Guidelines

- At age 50, both men and women who have an average risk of CRC should begin regular screening and have one of the screening tests listed here or on the previous slide:

Tests that find mainly cancer

- Guaiac-based fecal occult blood test (gFOBT) every year*, or
- Fecal immunochemical test (FIT) every year*, or
- Stool DNA test (sDNA) every 3 years*

*Colonoscopy should be done if anything is found by these tests

African Americans

PHYSICIANS FROM THE AMERICAN COLLEGE
OF GASTROENTEROLOGY RECOMMEND THAT
**AFRICAN AMERICANS BEGIN
COLORECTAL CANCER SCREENING
WITH COLONOSCOPY AT AGE 45**



Colorectal Cancer: YOU CAN PREVENT IT
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So what can you do to
prevent and beat
colorectal cancer?

What you can do

- Stay at a healthy weight
- Be active
 - ✓ At least 150 minutes of moderate or 75 minutes of vigorous intensity activity per week, or an equivalent combination, preferably spread throughout the week
- Limit sedentary behavior

What you can do

- Eat right
 - ✓ Choose foods and beverages in amounts that help you get to and stay at a healthy weight
 - ✓ Eat at least 2½ cups of vegetables and fruits each day
 - ✓ Choose whole grains
 - ✓ Limit red meats (like beef, pork, or lamb) and processed meats (like hot dogs or luncheon meats)
- Limit alcohol
 - ✓ No more than 2 drinks a day for men and 1 for women

What you can do

- If you are age 50 or older, get tested for colorectal cancer.
- Talk with a doctor about which screening test is best for you.
- Talk with a doctor about your medical history and your family history to find out if you need to start testing earlier or have more frequent tests.

Excuse: I feel fine

**YOUR EXCUSE TO
AVOID COLONOSCOPY...**

**"I FEEL
FINE."**

**COLON POLYPS AND EARLY COLON
CANCER CAN DEVELOP SILENTLY
WITHOUT SYMPTOMS. WAITING UNTIL
SYMPTOMS OCCUR CAN MEAN THE
CANCER IS MORE ADVANCED AND
LESS LIKELY TO BE CURABLE.**

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Excuse: I'm Healthy

YOUR EXCUSE TO
AVOID COLONOSCOPY...

"I'M HEALTHY...
WHY GET SCREENED?!"

ACCORDING TO EXPERTS FROM THE AMERICAN
COLLEGE OF GASTROENTEROLOGY, COLORECTAL
CANCER SCREENING IS FOR HEALTHY PEOPLE! IF
WE FIND A POLYP, WE REMOVE IT AND PREVENT
IT FROM BECOMING COLORECTAL CANCER.

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Excuse: No family history

YOUR EXCUSE TO
AVOID COLONOSCOPY...

"NO ONE IN
MY FAMILY HAD
COLON CANCER...!"

DON'T BE THE FIRST.

ROUGHLY 5 IN 100 PEOPLE ARE
DESTINED TO GET COLORECTAL CANCER
IN THEIR LIFETIME EVEN WITH
NO FAMILY HISTORY.

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What you can do

- Colonoscopy offers the best way to prevent CRC or find it early. Finding cancer early gives you a better chance for successful treatment.
- Early CRC usually has no symptoms. Don't wait for symptoms to occur. Again —treatment is most effective when CRC is found early.

Bowel Prep

WE WON'T LIE. BOWEL PREP FOR COLONOSCOPY IS NO FUN, BUT THE NEWER PREPS HAVE MADE IT EASIER FOR PATIENTS TO HANDLE. ACG RECOMMENDS A "SPLIT DOSE" BOWEL PREP.



Colorectal Cancer: YOU CAN PREVENT IT
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Prevention

ACCORDING TO PHYSICIANS FROM THE
AMERICAN COLLEGE OF GASTROENTEROLOGY:

Screening by
COLONOSCOPY AND POLYP REMOVAL
PREVENTS COLORECTAL CANCER
before it can start



Colorectal Cancer: **YOU CAN PREVENT IT**
gi.org/ColonCancer



More info

- You can call us at 850-297-0351
- Gi.org/coloncancer
- Screen4coloncancer.org (ASGE)
- Cancer.org/colon

- Information for presentation obtained from above organizations