

Colorectal Cancer

Colorectal cancer is the second-leading cancer killer of men and women combined in the U.S. More than 90 percent of colorectal cancer cases are discovered in people age 50 and over. Screening is essential to diagnosing colorectal cancer because the disease typically lacks symptoms in the early stages. Up to 60 percent of colorectal cancer deaths could be prevented if everyone age 50 and over were screened routinely and treated appropriately. Colorectal cancer develops in the cells lining the colon and rectum. The stage is based on the extent of the spread of cancer through deeper layers, lymph nodes, and surrounding structures.

Statistics

- In 2017, an estimated 135,430 cases of colorectal cancer will be diagnosed in the United States.
- An estimated 50,260 people in the United States will die from colorectal cancer in 2017.
- The five-year survival rate for colorectal cancer discovered early and before the cancer spreads is 90 percent, but because of low screening rates, only 39 percent of colorectal cancers are identified in this early stage.
- In Texas in 2017, there are 9,690 expected new cases of colorectal cancer and 3,700 deaths.

Risk Factors

- **Age:** People age 50 and over have a higher risk of developing colorectal cancer.
- **Family History:** People with a family history of colorectal polyps along with a family history of colorectal cancer are at greater risk. Those with a family history of polyps or colorectal cancer should consult a doctor about screening frequency.
- **Inflammatory Bowel Disease:** People with inflammatory bowel disease have a higher risk of colorectal cancer.
- **Diet:** Diets that contain large amounts of red and processed meats can increase risk.
- **Health:** Overweight and inactive people are at a higher risk. Type 2 diabetes has been linked to an increased risk of colorectal cancer. People with a history of polyps and inflammatory bowel disease are also at an increased risk, and may need earlier or more frequent screening. Long-term smoking and heavy alcohol use raise risk.
- **Lynch Syndrome (HNPCC):** This inherited condition affecting the body's genes increases risk of colorectal cancer. Lynch syndrome is responsible for about 3 percent of colorectal cancers, and those with the condition have a lifetime risk of up to 80 percent of developing colorectal cancer. Genetic testing can determine if a person has the gene mutation associated with Lynch syndrome.

Symptoms

Typically, people in the early stages of colorectal cancer do not have symptoms; symptoms become apparent as the disease advances. If a person experiences any of the following symptoms, he or she should consult a physician.

- | | | |
|------------------------------------|---------------------------------------|--|
| • Abnormal bowel habits | • Bleeding from the rectum | • Anemia |
| • Vomiting, diarrhea, constipation | • Blood in the stool | • Unexpected weight loss |
| • Cramping or stomach discomfort | • Feeling of weakness or fatigue | • Feeling that bowel doesn't fully empty |
| • Frequent gas or feeling bloated | • Stools that are narrower than usual | |

Prevention

- **Screening:** Men and women age 50 and older with an average risk for developing colorectal cancer should discuss the most appropriate screening test with their physician. Screening tests include annual fecal occult blood test (FOBT) or fecal immunochemical test (FIT); stool DNA test every three years; flexible sigmoidoscopy every five years; double-contrast barium enema every five years; virtual colonoscopy every five years; or colonoscopy every 10 years. Those with increased risk factors should consult their physician whether to begin screenings earlier than age 50. Eighty percent of colorectal cancer could be prevented by removing colon polyps.
- **Lifestyle:** Maintaining a healthy weight through a regular exercise schedule and healthy diet may decrease the risk of colorectal cancer. A healthy diet includes plenty of fruits, vegetables, and whole grains, and limited consumption of red and processed meats, and alcohol. Use aspirin and other related drugs in moderation. Aspirin, ibuprofen, and naproxen are linked to lower risk of colorectal cancer and polyps. However, these drugs can have serious side effects. You should talk with your physician before taking them specifically to lower your risk.

Treatment Options

Main types of treatment for colorectal cancer include surgery, radiation therapy, proton therapy, chemotherapy, and targeted therapies. Specific needs may be addressed by surgeons, gastroenterologists, or medical or radiation oncologists. For complex treatments, a team of specialists may be involved.

Sources: American Cancer Society, Centers for Disease Control and Prevention, National Cancer Institute, and U.S. Department of Health and Human Services



More breakthroughs. More victories.
www.TexasOncology.com