

## Colorectal Cancer

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Colorectal cancer, or cancer of the colon and rectum, is the second most common cause of death from cancer in the U.S. More than 56,000 men and women die from colorectal cancer each year. Most victims are over age 50. Screening (or looking for colorectal cancer before the person has any symptoms) can prevent many of these deaths by catching the disease at an early stage when a cure is likely.

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### Q . What is colorectal cancer?

A . The *colon* and *rectum* together make up the large intestine (bowel). Colorectal cancer develops when cells from the inner lining of the large intestine become abnormal and develop uncontrolled growth or *cancer*. In most cases, this change occurs gradually, over ten years or more. Early on, colorectal cancer begins as a small, benign (non-cancer) growth called a *polyp*. As polyps grow, some may develop cancer cells. During this early stage, the cancer is usually confined to the polyp and most people don't have symptoms, such as abdominal pain or seeing blood in the stool. Removing polyps at this stage usually cures the cancer. If cancerous polyps are not removed, they eventually grow and invade the large intestine. Once this occurs, treatment becomes more difficult and curing the cancer is less likely.

### Q . I have no family members with colorectal cancer. Am I at risk?

A . The most common risk factor for both men and women is age. If you are over age 50, you are at a higher risk for colorectal cancer and the risk increases the older you become. Other risk factors include:

- Having a parent, child or sibling with colon cancer
- Having a personal history of colon polyps
- Having a personal history of ulcerative colitis or Crohn's disease

You can help reduce your risk of colorectal cancer by exercising regularly, eating a diet low in fat and high in fruits, grains and vegetables, maintaining a normal body weight, and limiting alcohol consumption.

### Q . I have normal bowel movements and no visible blood in my stool. Do I need to be screened for colorectal cancer even if everything is normal?

A . It is common for men or women with colorectal polyps or cancer to have no warning symptoms such as abdominal pain, altered bowel habits, or visible blood in the stool. Of course, if you do have any of these symptoms, you should see your health care provider immediately. Screening for colorectal cancer, however, attempts to detect polyps and early colorectal cancer before there are symptoms. At this early stage, most of the cancer can be easily removed.

**Q . Who should be screened for colorectal cancer?**

**A .** All men and women over age 50 should discuss screening with their health care provider. If you have very poor health and are over age 80, you may not need the screening, but you should discuss this with your health care provider.

**Q . How is colorectal screening done?**

**A .** Four tests are commonly used for screening:

- Checking stool samples for small amounts of blood that are invisible to the naked eye (fecal occult blood test)
- Sigmoidoscopy – using a flexible, lighted tube to examine the lower part of the colon and rectum
- Colonoscopy – using a flexible, lighted tube, similar to the sigmoidoscope, to examine the entire colon
- Double contrast barium enema – using x-ray with barium and air to examine the entire colon

Fecal occult blood tests are usually done once a year and an exam using sigmoidoscopy is done every three to five years. Instead, you can also choose to have a colonoscopy once every ten years. In some instances, it may be better to screen with a double contrast barium enema. Your health care provider can discuss the risks and benefits of each test and help determine which test is best for you.

**Q . Does Medicare pay for colon cancer screening?**

**A .** Yes. Medicare pays for fecal occult blood testing once a year and sigmoidoscopy every four years. As of July 1, 2001, Medicare pays for a screening colonoscopy once every ten years. Medicare will pay for a screening barium enema if your healthcare provider feels that this is a better test for you.

In addition to the blood glucose level, another type of blood test that can be used is the hemoglobin A1C, or glycosylated hemoglobin. This test provides a measure of a person's average blood glucose levels over the prior two to three months.

**Q . Where can I learn more about colon cancer and screening?**

**A .** You can call, write or visit the websites of these organizations for more information:

Centers for Disease Control National Center for Chronic Disease Prevention and Health Promotion

CDC/DCPC 4770 Buford Hwy. NE, MS K64, Atlanta, GA 30341

Toll free: 1-888-842-6355

Fax: 1-770-488-4760

E-mail: [cancerinfo@dcd.gov](mailto:cancerinfo@dcd.gov)

Web site: <http://www.cdc.gov/cancer/screenforlife/>

National Cancer Institute

Office of Communication, 31 Center Drive, MSC 2580, Bethesda MD 20892-2580

Toll free: 1-9-800-4-CANCER

TTY: 1-800-332-8615

Web site: <http://www.nci.nih.gov>

