When to See a Doctor

If you’re 50 or older (45 for African Americans), it’s time. 90% of new colon cancer cases are diagnosed in people age 50+ and the American College of Gastroenterology recommends colon cancer screening beginning at age 50 for healthy adults. Most colon cancers begin as non-cancerous growths of tissue (polyps) in the lining of the colon. Over time, these polyps can grow and become cancerous. Finding and removing them early through routine screening eliminates the chance that they will become cancerous. For some people, screening should begin earlier. If you are experiencing symptoms or have other risk factors, talk to your doctor about when screening should start for you.

Colon Cancer Facts

- Colon cancer is preventable with proper screening
- Colon cancer risk increases with age
- Colon cancer is the 3rd most common cancer diagnosis in the U.S.
- 1 in 20 people will be diagnosed with colon cancer in their lifetime

SYMPTOMS MAY INCLUDE:

- Anemia
- Blood in the stool
- Change in bowel habits
- Persistent abdominal or rectal pain
- Unexplained weight loss

*In most cases, there are NO SYMPTOMS associated with the early stages of colon cancer. It is important to follow your doctor’s recommendation for screening based on your individual risk.

RISK FACTORS INCLUDE:

- Age: over 50 (45 for African Americans)
- Genetics: a personal or family history of colon polyps or colon cancer
- Race: African Americans have a 20% higher risk for developing colon cancer
- History of Crohn’s disease or ulcerative colitis
- Obesity
- Lifestyle habits: tobacco and alcohol use, diet high in fat
Diagnosis and Treatment

The best way to prevent colon cancer is through a thorough exam and consultation with a specialist. Capital Digestive Care offers a number of screening methods recommended by the American College of Gastroenterology, the American Gastroenterological Association and the American Cancer Society. When caught early, colon cancer is treatable and beatable.

COLONOSCOPY

A visual examination of the entire large intestine (colon) using a flexible scope with a light at the tip. Full bowel preparation is needed to complete the exam successfully. Colonoscopy is considered the highest performing colorectal screening method and it is the only exam during which colon polyps may be both detected and and removed. If no abnormalities are found and your personal risk for the disease is low, this test should be repeated every 10 years.

FLEXIBLE SIGMOIDOSCOPY

A visual examination of the rectum and a portion of the colon (the sigmoid colon); the remaining portions of the colon cannot be examined with this method. Partial bowel preparation is needed and if abnormalities are found, a colonoscopy will be necessary. If no abnormalities are found, this test should be repeated every 5 years.

Fecal Occult Blood Test

A stool sample, collected at home, is sent to a laboratory to test for the presence of blood in the stool. No bowel preparation is necessary but multiple samples may be required. This test cannot detect most polyps. If abnormalities are found, a colonoscopy will be necessary. If no abnormalities are found, this test should be repeated every year.

LOCATIONS

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