

American College of Gastroenterology

Digestive Disease Specialists Committed to Quality in Patient Care

Common Gastrointestinal Problems

A Consumer Health Guide

Common GI Problems in Women: Colon Cancer Prevention & Screening

Colon cancer is the second most common cause of cancer death in the United States, causing an estimated 56,000 deaths each year. The myth that colon cancer is a just a “Man’s Disease” is wrong. Colon cancer strikes equally among women and men and has no racial bias. Colon cancer often strikes without any warning signs or symptoms. Usually, colon cancer occurs in mid-life, after the age of 50 years.

What most people do not know is that the majority of colon cancers begin as a polyp, an abnormal growth of tissue found on the wall of the colon. When polyp(s) are detected, they may be removed at the pre-malignant state and prevent the development of colon cancer.

Who is at risk for colon cancer?

All adults are at risk and risk generally increases as we get older. It is estimated that colon cancer will strike 1 in 10 couples during their lifetime.

Average Risk:

- * Every adult over age 50 yrs

High Risk:

- * Family history (parent, sibling, child) of colon cancer or an adenomatous colon polyp
- * Familial Polyposis Coli Syndrome
- * Family Cancer Syndrome
- * Personal history of colon polyps
- * Personal history of Crohn’s Disease or Ulcerative colitis

What are the symptoms of colon cancer?

Colon cancer is a silent stalker, usually causing no symptoms until the disease is very advanced.

If you experience any of the following signs or symptoms, see your doctor.

- * Rectal bleeding or pain
- * Change in a regular bowel habit
- * Unexplained anemia
- * Weight loss
- * New onset of lower abdominal pains

How can I prevent colon cancer?

Like breast, cervical, and prostate cancer screening, everyone should be screened to prevent colon cancer.

Average Risk Screening

At 50 years: Sigmoidoscopy every 5 years plus annual stool test for microscopic bleeding or a colonoscopy every 10 years.

Screening for High Risk Individuals

Complete endoscopic examination of the colon – colonoscopy.

Screening usually starts at 40 yrs or 10 years younger than the age of the youngest family member affected. If you have questions, ask your doctor.

If my parent has a colon polyp, do I have an increased risk of polyps and colon cancer? What should I do?

There are two general types of colon polyps: “hyperplastic” and “adenomatous.” Only the adenomatous colon polyps have the potential to become cancers.

What Everyone Should Know About Colon Cancer Prevention & Screening

If you have a first degree relative (parent, brother or sister) that had an adenomatous colon polyp there is a modest, but important, increased risk for you to develop adenomatous polyps and colon cancer. If you can't determine whether the close relative's polyp was hyperplastic or adenomatous, it is prudent to treat it as if it were adenomatous and be screened. It is generally recommended that you have colonoscopy at an age 10 years younger than when your first degree relative was discovered to have adenomatous polyp(s) or age 40, whichever occurs first.

What can you do to prevention colon cancer?

Many studies are ongoing, but preliminary evidences suggest the following are helpful:

- * Reduction of animal fat in the diet
- * Increased vegetables and fiber in the diet
- * Perhaps an aspirin tablet each day
- * Calcium and the vitamin, folic acid

There is also some exciting preliminary research that newly available pain medications, called COX-2 inhibitors, may also have some chemopreventive features, that is, they may help prevent colon cancer. More research is needed and is ongoing.

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