

Colon Cancer Screening: What Can I Expect?



Colorectal (KOH-loh-REK-tul) cancer is cancer of the colon or rectum.

Your colon and rectum make up what is called your large intestine (in-TES-tin). This is a long tube that absorbs water and cleans your body of waste. The large intestine is the final place where food is processed after you eat. It is also where stools are formed. **If you find colorectal cancer early, your chances of surviving are high. The best way to catch it early is to get screened or tested.**

Did you know?

- Most people have no symptoms in the early stages of colorectal cancer. It can grow for years without your feeling any pain or discomfort.
- About 1 in 15 people get colorectal cancer.
- If colorectal cancer is caught in its early stage, it is up to 90% curable.

Who Should Get Screened for Colorectal Cancer?

You should get screened for colorectal cancer if you:

- Are over 50 years old.
- Have had polyps (PAH-lips), which are small balloon-shaped pouches in the colon or rectum that may contain cancer cells.
- Have had colorectal cancer before.
- Have parents, brothers, sisters, or children who have had colorectal cancer.
- Have ulcerative colitis (UHL-ser-uh-TIV koh-LI-tiss) or Crohn's (Kronze) disease, which cause inflammation in the colon or small intestine.
- Are African American.

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How Will My Doctor Test for Colorectal Cancer?

When you turn 50 or if you are in a high-risk group, your doctor will want you to get screened.

Your doctor will talk to you about which test is best for you:

Name of Test	How It Works	How Often?
Fecal occult (FEE-kuhl uh-KUHLT) blood test	Checks for blood in stool. Sometimes cancers or polyps can bleed in such small amounts that it's hard for you to notice yourself. This test can find small amounts of blood. Your doctor may do this test during your visit or may give you a test kit for use at home.	Once a year
Sigmoidoscopy (sigmoid-AH-skuh-pee)	The doctor examines your rectum and lower colon with a lighted instrument (scope) that looks like a thin hollow tube. The doctor inserts the tube in your rectum and can see through the scope. Your doctor can remove any small polyps that are found.	Every 5 years
Barium enema with air contrast	You are given an enema (a liquid is forced, using low pressure, through the anus into the large intestine) that contains barium, a chalky substance that allows the doctor to do X-rays of your colon and rectum.	Every 5 years
Colonoscopy (colun-AH-skuh-pee)	The doctor examines your rectum and your colon with a lighted instrument (scope). The colonoscope is a flexible lighted tube, about the size of a finger. If the doctor finds any polyps, they can be removed.	Every 10 years

If you are in a high-risk group, your doctor may want you to get these tests more often and may want you to start getting tested before you turn 50.