

Colorectal Cancer Screening Information

Adapted from:



Colorectal Cancer

WHAT IS COLORECTAL CANCER?

Colorectal cancer is a cancerous growth in the colon and the rectum. The colon and rectum form the large bowel. The colon is the upper 5 to 6 feet. The rectum is the last 6-8 inches.

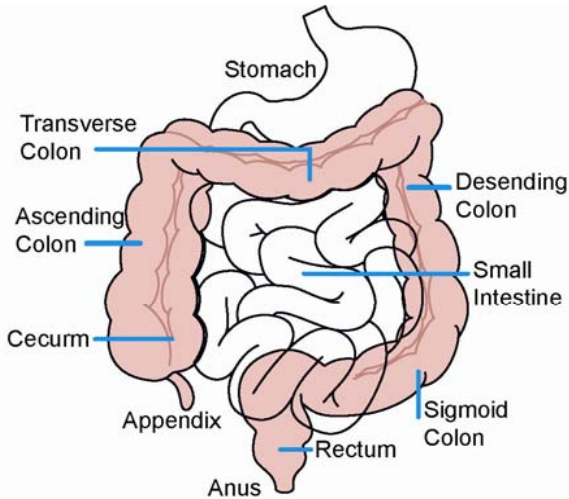


Diagram of the Colon & Rectum

WHAT CAUSES COLORECTAL CANCER?

When abnormal cells grow in the colon, a cancerous tumor may form. These tumors grow slowly, but they may get big and block the bowel.

WHAT CAN I DO TO PREVENT IT?

Early detection is the most important factor. Colon and rectal cancers may be completely curable if found early. If you are at average risk (no family history of colon cancer or polyps and no personal history of inflammatory colon disease), you should talk with your health care provider about having one of the following screening tests for early detection and are described in more detail on the following pages:

- *A home stool blood test (3 samples) once every year starting at age 50*
 - *A sigmoidoscopy every 5 years starting at age 50*
 - *A home stool blood test every year plus sigmoidoscopy every 5 years*
 - *Double contrast barium enema every 5 years; or*
 - *Colonoscopy every 10 years*
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- *Talk with your health care provider about the benefits and risks of these screening tests and decide which one is best for you.*



- A **stool blood test** (fecal occult blood test) checks for hidden blood in your stool from polyps, cancer, or other causes. Your Health Care Provider will give you a test kit to take home. You will be instructed to place a small amount of your stool from three bowel movements in a row on the test cards. You are to return the cards to the Provider's office or a lab, where the samples are tested for any hidden blood.



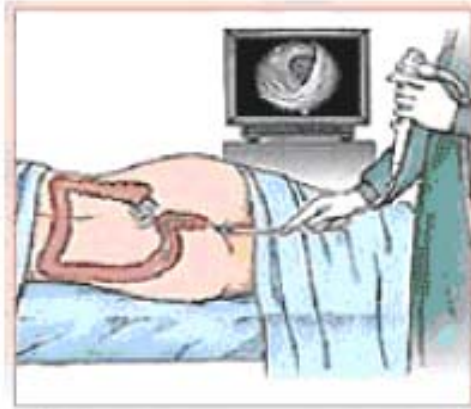
Example of a fecal occult blood test. Using an applicator stick, you apply a stool sample to two test windows on a supplied card. You then mail the card to your doctor's office or lab.



Once the card reaches a doctor's office or a lab, a chemical is applied to the back of the card over the test windows. If blood is present, the chemical will react and appear as a different color.



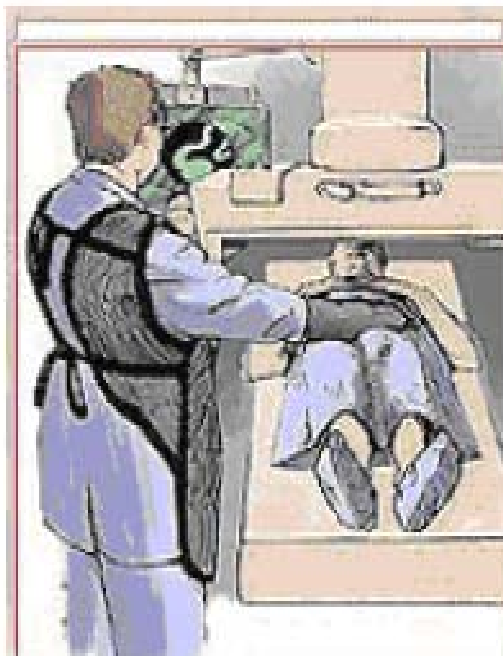
- A **flexible sigmoidoscopy** allows the Health Care Provider to examine the lining of your rectum and the lower part of your colon. This is done by inserting a thin, lighted tube into your rectum and lower colon. The Provider can take samples of polyps or cancers if necessary.



A tiny video camera at the tip of a sigmoidoscope transmits images to a television monitor so that your doctor can look closely at the inside of your rectum and sigmoid colon.

- A **colonoscopy** allows the Health Care Provider to examine your rectum and entire colon. Like the sigmoidoscopy, a thin, lighted tube is inserted into your rectum and entire colon. You will be sedated for this procedure.

- A **double contrast barium enema** allows the provider to see an x-ray image of the rectum and entire colon. You will be given an enema with a liquid called barium that flows from a tube into the colon, followed by an air enema. The barium and the air create an outline around your colon, allowing the doctor to look for abnormalities.



By pressing on your abdomen and pelvis, the radiologist positions your colon for enhanced viewing.

QUESTIONS TO ASK YOUR HEALTH CARE PROVIDER

- What can I do to prevent colorectal cancer?
- Can you explain the screening tests to me?

There are two key people on your health care team, *you* and *your health care provider*. You are just as important as your provider in directing your health care. The first step you should take in becoming an active team member of your health care team is to understand what you are being treated for and why. Continue to ask questions until you understand the answer. By paying attention to your health and maintaining your own records, you will become an active, informed decision maker in your health care.



Endorsed by: VA National Center for Health Promotion
and Disease Prevention

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Abbreviated for QUICS Study 10/06 per Bruce Ling, MD, MPH /tae and approved by My Health eVet Program Management Office.

The information provided in this booklet is only for use in this research study and has not been endorsed by the VAPHS for education of other patients.

QUICS Study

Quality Improvement of Patient-Provider Communication for Colorectal Cancer Screening

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For more information on
Colorectal Cancer Screening
Please visit our website:
www.va.gov/pittsburgh/quics/quics.htm.

