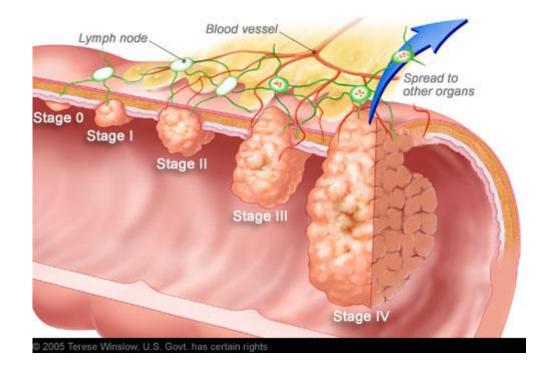
# Colon Cancer screening: When, What, Why, When, How, Where...

Sekou RS Rawlins, MD, FACP March 26, 2019

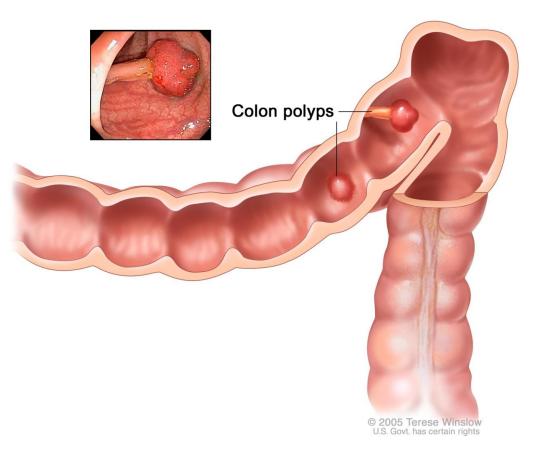
#### What is colon cancer?

- A cancer that starts in the colon or the rectum
- Cancer starts when the cells in the body grow out of control, can spread to other areas of the body



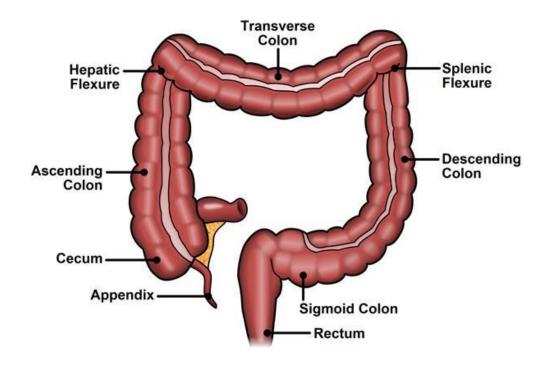
#### Where does cancer start?

 Most cancers start as growths on the inner lining called a polyp



#### What does the colon do?

- A 5 foot long muscular tube
- Absorbs water and salt from the remaining food matter after it passes through the small intestines



#### How much colon cancer is there?

- 136,830 people diagnosed with CRC in 2014
- **50,310** people die of colon cancer annually
- Fourth most commonly diagnosed cancer, second leading cause of cancer death
- Both incidence and death rates have declined in the past decade
  - Why? Increased colonoscopy use
- Incidence and mortality rates 25% and 50% higher in African Americans than Whites
  - Also high risk in Ashkenazi Jews
  - Lower in other ethnic groups

### Who gets colon cancer?

- 4.4% for women
- 4.7% for men
- Usually adults over 50

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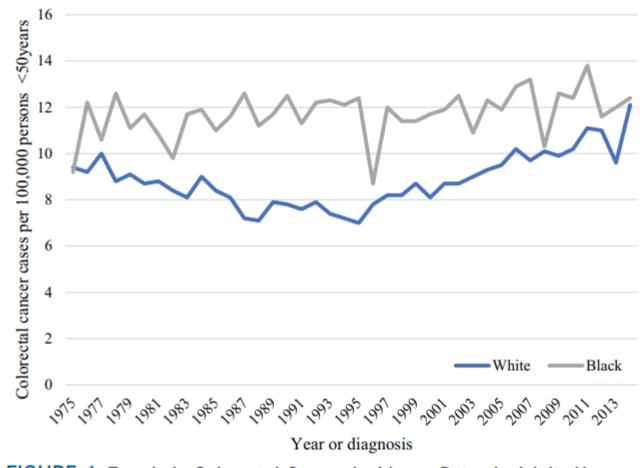


FIGURE 1. Trends in Colorectal Cancer Incidence Rates in Adults Younger Than Age 50 Years by Race, 1975 to 2014.

#### What increases the risk for colon cancer?

#### **Avoidable risks**

- Overweight/ obese
- Physical inactivity
- Diet high in red meat
- Fried, grilled, broiled meats
- Low in vegetables, fruits, whole grains
- Smoking
- Heavy alcohol use

#### Unavoidable risks

- Being older
- Personal history of colorectal polyps or colorectal cancer
- Personal history of inflammatory bowel disease
- Family history of colorectal cancer or polyps
- Inherited cancer syndromes
- Type 2 diabetes

#### When does family history matter?

- Family history of cancer or polyps
- Family cancer syndromes
  - Familial adenomatous polyposis (FAP)
  - Gardner syndrome
  - Lynch syndrome
  - Turcot syndrome
  - Peutz-Jeghers syndrome
  - **MUTYH-associated polyposis**

# What if nobody else in my family has colon cancer?

- Most cancers aren't heritable
  - Your risk is likely average

# What if my personal risk is very low?

• Then your risk is average (not negligible)

#### What if people in my family never get cancer?

• Congratulations! Your risk is average!

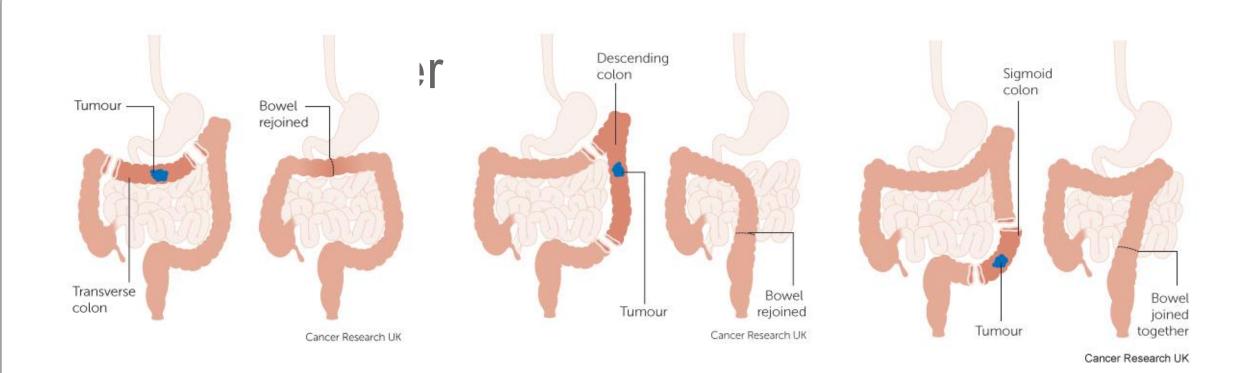
# What if I don't want to get screened for colon cancer?

Then accept the small (but real) risk of a (completely preventable) cancer

# Is there a cure?

- Prevention through polypectomy
- Surgery
- Adjunctive radiation therapy
- [Chemotherapy for metastatic dissease}





#### Can it be prevented?

• Yes. That's why we do screening tests.

### What is a screening test?

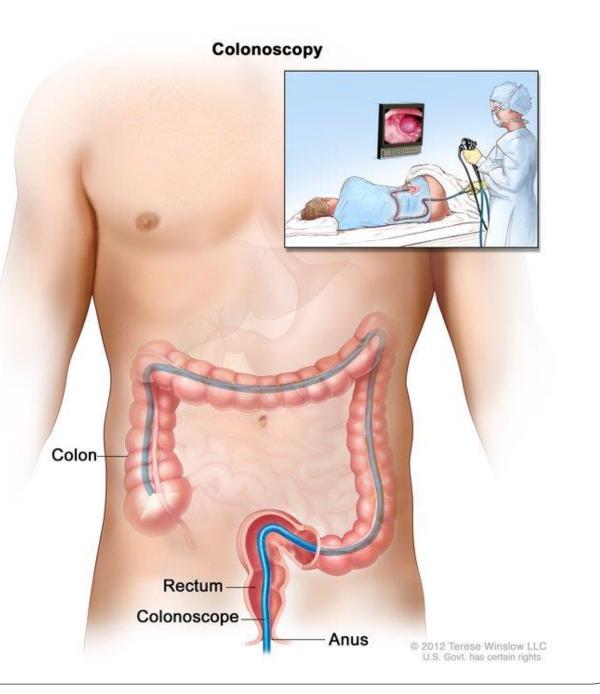
- A test that helps to identify people with increased risk for a disease before they have symptoms
- This is the core of preventive health care

# **Available Screening Options**

- Colonoscopy
- Fecal Immunochemical Testing (FIT)
- Fecal Occult Blood Testing (FOBT)
- Cologuard (Stool DNA)
- Flexible Sigmoidoscopy
- Computed Tomographic (CT) Colonography
- Barium Enema (BE)

# Colonoscopy

- What?
- How?
- Where?
- Will it hurt?
- How often?

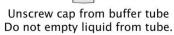


# FIT

- What?
- How?
- Where?
- Will it hurt?
- How often?

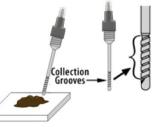


After an evacuation, wipe normally and retain a small amount of feces on toilet paper





Shake tube for three (3) seconds



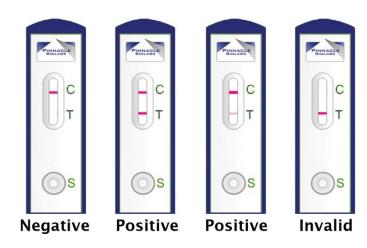
Collect a small sample of feces onto the grooves of the wand



Unscrew smaller, clear cap



Return wand to tube



Apply 3 drops from buffer tube to sample well.

Interpret results after five minutes. Do not read results after 10 minutes.

# FOBT

- What?
- How?
- Where?
- Will it hurt?
- How often?



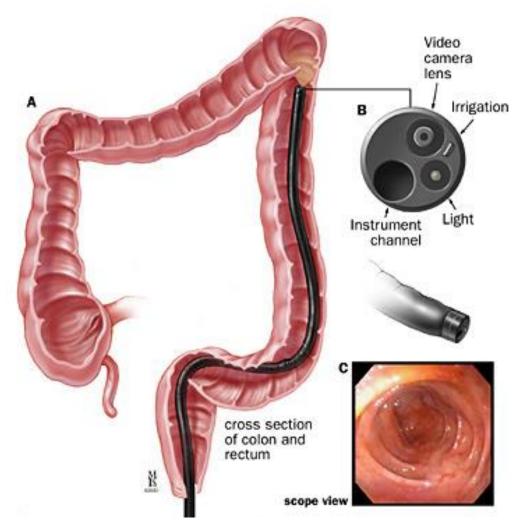
# Stool DNA

- What?
- How?
- Where?
- Will it hurt?
- How often?



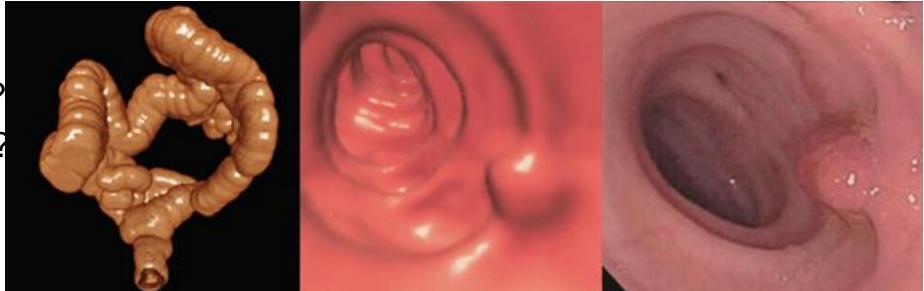
# Flexible Sigmoidoscopy

- What?
- How?
- Where?
- Will it hurt?
- How often?



# CT Colonography

- What?
- How?
- Where?
- Will it hurt?
- How often?



# **Barium Enema**

- What?
- How?
- Where?
- Will it hurt?
- How often?



# Is there a good reason NOT to get screened for CRC?

### Questions?

#### Thank You!!