

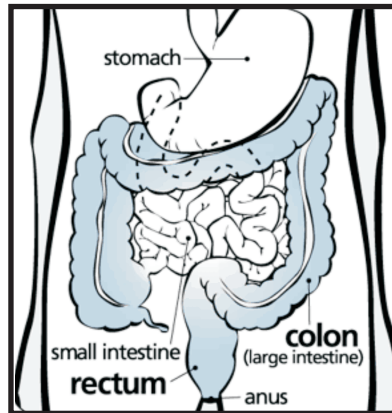
COLORECTAL CANCER SCREENING FACTS

What is Colorectal Cancer?

Colorectal cancer is cancer that develops in the colon or rectum. It is the second leading cancer killer in the U.S., but it doesn't have to be. If everyone aged 50 and older had regular colorectal cancer screening tests, more than one third of deaths from this cancer could be avoided.

Colorectal Cancer Facts and Figures

- Both men and women are at risk
- 93% of cases occur in people aged 50 and older
- The risk of developing colorectal cancer increases with age



Source: CDC

How Screening Saves Lives

Colorectal cancer almost always develops from precancerous polyps (abnormal growths) in the colon or rectum. Screening tests can find polyps, so they can be removed before they turn into cancer. Screening tests can also find colorectal cancer early, when treatment works best.



When Should I Begin Screening?

You should begin screening for colorectal cancer when you turn 50, then continue at regular intervals. However, you may need to be tested earlier or more often than other people if:

- You or a close relative have had colorectal polyps or colorectal cancer, or
- You have inflammatory bowel disease.

Talk with your doctor about when you should begin screening and how often you should be screened.

Does Colorectal Cancer Have Symptoms?

Polyps and colorectal cancer often do not cause symptoms, especially at first. But sometimes there are symptoms, such as:

- Blood in or on your stool;
- Unexplained and frequent pain, aches, or cramps in your stomach;
- A change in bowel habits, such as having stools that are narrower than usual; and
- Unexplained weight loss.

If you have any of these symptoms, talk to your doctor. These symptoms may also be caused by something other than cancer, but the only way to know what is causing them is to see your doctor.

Screening Tests for Colorectal Cancer

Below is a list of several tests that are available to screen for colorectal cancer. Some are used alone, while others are used in combination with each other. Talk with your doctor about which screening test is best for you.

Fecal Occult Blood Test (FOBT, Hemoccult, Stool Guaiac)

This test checks for occult (hidden) blood in the stool. You receive a test kit from your doctor. You may be asked to follow a special diet before and during the test. At home, you place a small amount of your stool from three bowel movements in a row on test cards. You return the cards to your doctor's office or lab, where the stool samples are checked for hidden blood.

Flexible Sigmoidoscopy

This test allows the doctor to examine the lining of your rectum and lower part of your colon using a thin, flexible, lighted tube called a sigmoidoscope. The tube is inserted into your rectum and lower part of the colon. During the exam, the doctor can find and remove polyps within reach of the sigmoidoscope. This test is performed at a doctor's office.

Combination of Fecal Occult Blood Test (FOBT, Hemoccult, Stool Guaiac) and Flexible Sigmoidoscopy

Some experts recommend combining both tests, to increase the chance of finding polyps and cancers.

Colonoscopy

This is similar to flexible sigmoidoscopy, except this test allows the doctor to examine the lining of your rectum and the entire colon using a thin, flexible, lighted tube called a colonoscope. The tube is inserted into your rectum and colon. During the exam, the doctor can find and remove most polyps and some cancers in the entire colon and rectum. A hospital visit is required for this procedure.

The Bottom Line

If you are 50 or older, get screened regularly for colorectal cancer.

For more information, visit www.cdc.gov/cancer/ScreenforLife or call the National Cancer Institute's Cancer Information Service: 1-800-4-CANCER. For TTY, call 1-800-332-8615.

SCREENING TEST OPTIONS

Screening guidelines have been developed by several medical societies and organizations. All strongly recommend that adults aged 50 or older be screened regularly for colorectal cancer. Several tests can be used to find polyps or colorectal cancer. Each has advantages and disadvantages. Here is information that can help you decide, with your doctor, which test(s) is right for you:

<i>Screening Test</i>	<i>How Often</i>	<i>Advantages</i>	<i>Disadvantages</i>
<p>Fecal Occult Blood Test (FOBT, Hemoccult, Stool Guaiac) Detects blood in stool from polyps, cancer, or other causes. Before the test, you may be asked to follow a special diet (information is included in the test kit). During the test, you place stool samples on special cards and mail the cards to your doctor's office or lab.</p>	Once a year, starting at age 50.	<ul style="list-style-type: none"> • No extra doctor's office visit • Evidence suggests it saves lives • Can be done in the privacy of your home • You do not need to miss work • No complications 	<ul style="list-style-type: none"> • May miss some polyps and cancers • Your doctor may recommend that you avoid some foods and medicines before and until stool samples are collected • If blood is detected, you will need a follow-up exam, usually with a colonoscopy
<p>Flexible Sigmoidoscopy (Flex Sig) Allows the doctor to examine the lining of the rectum and lower colon, using a thin, flexible, lighted tube. To prepare, you use a strong laxative, as prescribed by your doctor, to clean out your colon and rectum. The test is done at the doctor's office.</p>	Once every 5 years, starting at age 50.	<ul style="list-style-type: none"> • Some evidence suggests it saves lives • Provides direct view of rectum and lower colon where half of colorectal cancers occur • Tissue samples of polyps and cancers can be taken for further testing 	<ul style="list-style-type: none"> • Allows examination of only lower 1/3 of the colon • Before the test, your doctor may recommend that you restrict your diet and use strong laxatives and/or enemas • You have to visit the doctor's office and may have to miss half a day of work • You may feel discomfort during or after the exam • There is a very slight risk of perforation of the colon, reaction to medication, and bleeding • If polyps or lesions are found, you will need a follow-up exam, usually with a colonoscopy.
<p>Fecal Occult Blood Test (FOBT, Hemoccult, Stool Guaiac) and Flexible Sigmoidoscopy (Flex Sig)</p>	FOBT (Hemoccult, Stool Guaiac) annually and Flex Sig every 5 years, starting at age 50.	<ul style="list-style-type: none"> • Combination of tests may increase the chance of finding polyps and early cancers 	(See Disadvantages listed above)
<p>Colonoscopy Allows the doctor to examine the lining of the rectum and the entire colon, using a thin, flexible, lighted tube. To prepare, you use a strong laxative, as prescribed by your doctor, to clean out your colon and rectum. During the test, you are given medication to help you relax. Colonoscopy is done at the doctor's office, clinic or hospital. (Colonoscopy is usually recommended as a follow-up test if any of the other screening tests are abnormal.)</p>	Once every 10 years starting at age 50 for people with no family or personal history of polyps and no symptoms.	<ul style="list-style-type: none"> • Some evidence suggests it saves lives • Some doctors believe it is the most accurate test for finding polyps and cancers • Doctor sees lining of entire rectum and colon • In many cases, colonoscopy offers one-step screening, diagnosis, and treatment, since most polyps and lesions can be removed during the procedure 	<ul style="list-style-type: none"> • Has not been proven to save lives (research is underway to determine its effectiveness) • Before the test, your doctor will recommend that you restrict your diet and use strong laxatives and/or enemas • Preparation is more extensive than for other colorectal cancer screening tests • You visit the doctor's office for the test and will have to miss a day of work • Requires medication to help you relax - someone will have to drive you home • You may feel discomfort during or after the exam • Slight risk of perforation of the colon, reaction to medication, and bleeding

Colonoscopy

Frequently Asked Questions & Answers

Q. Why do I need a colonoscopy?

A. It is one of the tests recommended by medical experts as a way to screen for colorectal cancer. This procedure is used to look for polyps or cancer before there are any symptoms. This test is usually done every 10 years if no unusual results are found. A colonoscopy may also be recommended as a follow-up test if anything unusual is found during one of the other colorectal cancer screening tests (FOBT/hemoccult/stool guaiac/flexible sigmoidoscopy).

Q. What is a colonoscopy?

A. A doctor examines the lining of your rectum and your entire colon for signs of polyps or cancer using a thin, flexible, lighted tube about the thickness of a finger (a colonoscope). The colonoscope is inserted into your rectum and colon. The colonoscope may have a tiny video camera that can be used to send pictures to a TV monitor for the doctor to see.

Q. Where is a colonoscopy performed?

A. A colonoscopy can be performed in a hospital, an outpatient gastrointestinal specialty clinic, or a doctor's office. The procedure will be performed in a private room. You will not have to stay overnight in the hospital.

Q. How should I prepare for a colonoscopy?

A. You will be instructed to follow a special diet the day before the procedure and you will need to take a very strong laxative in the hours before the procedure.

Q. Will I have to take medicine before a colonoscopy?

A. The doctor performing the colonoscopy will usually give you medication to reduce discomfort and to make you drowsy before the procedure begins.

Q. Is it okay to take my regular medications before the procedure?

A. Tell your doctor about all over-the-counter and prescription medications you currently take, and your doctor will advise you what to do.

Q. How long does a colonoscopy take and what happens after a colonoscopy?

A. The procedure itself usually takes about 15 to 30 minutes, but there is also preparation that your doctor will tell you about. After the procedure, you will rest and wait for the medication to wear off. Then someone will need to drive you home. You will probably not be able to return to your normal activities that day.

Q. Will the colonoscopy hurt?

A. Normally the procedure is not painful. However, you may feel some pain or discomfort after it is over. You will wait at the clinic until all is well, and then someone can drive you home.

Q. What happens if the doctor finds something during the colonoscopy?

A. If a polyp(s) is found during the procedure, the doctor will remove it, or part of it, and send it to a laboratory to be checked. Further testing or treatment will depend on laboratory results.

Q. What are the symptoms of colorectal cancer?

A. It often does not cause symptoms. However, some people do have symptoms and they may include: rectal bleeding; abdominal discomfort, pain, and bloating; a change in bowel habits; fatigue due to a low blood count; and unexplained weight loss. These symptoms may be caused by several things other than cancer. If you have any of these symptoms, talk with your doctor about what may be causing them.

Q. How can I find out more about colorectal cancer?

A. Contact your clinic. Visit the Centers for Disease Control and Prevention (CDC) web site at <http://www.cdc.gov/cancer/screenforlife/index.htm>. CDC can also send you information in Spanish. Call the National Cancer Institute's Cancer Information Service: 1-800-4-CANCER. For TTY call 1-800-332-8615.

Flexible Sigmoidoscopy

Frequently Asked Questions & Answers

Q. Why do I need a flexible sigmoidoscopy?

A. It is one of the tests recommended by medical experts as a way to screen for colorectal cancer. This procedure is used to look for polyps or cancer before there are any symptoms. This test is usually done every 5 years if no unusual results are found.

Q. What is a flexible sigmoidoscopy?

A. A doctor examines the lining of your rectum and the lower part of your colon for signs of polyps or cancer using a thin, flexible, lighted tube about the thickness of a finger (a sigmoidoscope). The sigmoidoscope is inserted into your rectum and the lower part of your colon. The sigmoidoscope may have a tiny video camera that can be used to send pictures to a TV monitor for the doctor to see.

Q. Where is a flexible sigmoidoscopy performed?

A. In a doctor's office or outpatient clinic, in a private room.

Q. How should I prepare for a flexible sigmoidoscopy?

A. You will be instructed to follow a special diet the day before the procedure. Your doctor may also ask you to follow other instructions.

Q. Will I have to take medicine before a flexible sigmoidoscopy?

A. Medication is usually not required before the procedure.

Q. I have already had a Fecal Occult Blood Test (FOBT, Hemoccult, Stool Guaiac). Do I need to have a flexible sigmoidoscopy too?

A. Your doctor may ask you to have both a Fecal Occult Blood Test (FOBT, Hemoccult, Stool Guaiac) and a flexible sigmoidoscopy because there may be a better chance of finding polyps or cancer if both tests are used.

Q. Is it okay to take my regular medications before the procedure?

A. Tell your doctor about all over-the-counter and prescription medications you currently take, and your doctor will advise you what to do.

Q. How long does a flexible sigmoidoscopy take?

A. The procedure itself usually takes about 15 to 20 minutes.

Q. Will the flexible sigmoidoscopy hurt?

A. Many people experience some discomfort with the procedure, but few people find it severe enough to limit the procedure. Medication for pain is not needed for a flexible sigmoidoscopy.

Q. What happens if the doctor finds something during the flexible sigmoidoscopy?

A. If a polyp(s) is found during the procedure, your doctor may remove it, or part of it, through the sigmoidoscope and then send it to a laboratory to be checked. Your doctor may also choose to refer you to a specialist for removal and testing of the polyp(s). Further testing or treatment will depend on laboratory results.

Q. What are the symptoms of colorectal cancer?

A. It often does not cause symptoms. However, some people do have symptoms and they may include: rectal bleeding; abdominal discomfort, pain, and bloating; a change in bowel habits; fatigue due to a low blood count; and unexplained weight loss. These symptoms may be caused by several things other than cancer. If you have any of these symptoms, talk with your doctor about what may be causing them.

Q. How can I find out more about colorectal cancer?

A. Contact your clinic. Visit the Centers for Disease Control and Prevention (CDC) web site at <http://www.cdc.gov/cancer/screenforlife/index.htm>. CDC can also send you information in Spanish. Call the National Cancer Institute's Cancer Information Service: 1-800-4-CANCER. For TTY call 1-800-332-8615.

Fecal Occult Blood Test (FOBT, Hemoccult, Stool Guaiac)

Frequently Asked Questions & Answers

Q. Why do I need to take the FOBT (Hemoccult, Stool Guaiac)?

A. It is one of the tests recommended by medical experts as a way to screen for colorectal cancer. This procedure is used to look for polyps or cancer before there are any symptoms. This test is usually done every year to check for blood in the stool that can otherwise not be seen.

Q. I don't have a bowel movement every day. Can I still take the FOBT (Hemoccult, Stool Guaiac)?

A. Yes, just make sure it's three bowel movements in a row...this could be over several days. (The same holds true for people who have bowel movements more than once a day...just make sure it's three bowel movements in a row.)

Q. What if I forget or I am not in a place to collect a sample?

A. Collect a sample the next time you have a bowel movement.

Q. Can I take the FOBT (Hemoccult, Stool Guaiac) when I have my monthly period (for women)?

A. You should not take the FOBT (Hemoccult, Stool Guaiac) during your monthly period or during the first 3 days after the end of your period because there might be a mistake in testing.

Q. What if I notice blood in the stool sample I collect?

A. Call your doctor right away.

Q. What happens if the test comes back positive...is there something wrong?

A. There could be many reasons why the test came back positive. The only way to know is to talk with your doctor. Your doctor will ask you to have another test(s) to find out what caused the positive result.

Q. I am bleeding from my rectum. What should I do?

A. Call your doctor right away. You do not need to take the FOBT (Hemoccult, Stool Guaiac) if you are bleeding from the rectum.

Q. I have hemorrhoids. Can I take the FOBT (Hemoccult, Stool Guaiac)?

A. If your hemorrhoids are not bleeding right now, you can take the FOBT (Hemoccult, Stool Guaiac). If your hemorrhoids bleed often, there may be a mistake in testing with the FOBT (Hemoccult, Stool Guaiac). Ask your doctor about other ways of testing for colorectal cancer.

Q. If I don't notice any blood in my stool, do I still need to be tested?

A. Yes. Colorectal cancer and polyps in the colon and rectum often do not cause symptoms, such as bleeding. Often the blood is hidden or mixed in the stool and is difficult to see. The FOBT (Hemoccult, Stool Guaiac) detects hidden blood in your stool and helps alert doctors to the presence of polyps. If there are polyps, they can then be removed before they have a chance to turn cancerous. The FOBT (Hemoccult, Stool Guaiac) can also find symptoms of early colorectal cancer, when treatment often leads to a cure.

Q. The doctor sometimes takes a stool sample during an office visit. Is this the same thing as the FOBT (Hemoccult, Stool Guaiac)?

A. The office stool test does not work as well. The stool test works best when samples are taken at home from three bowel movements. That's why experts recommend that the FOBT (Hemoccult, Stool Guaiac) be performed at home.

Q. What are the symptoms of colorectal cancer?

A. It often does not cause symptoms. However, some people do have symptoms and they may include: rectal bleeding; abdominal discomfort, pain, and bloating; a change in bowel habits; fatigue due to a low blood count; and unexplained weight loss. These symptoms may be caused by several things other than cancer. If you have any of these symptoms, talk with your doctor about what may be causing them.

Q. How can I find out more about colorectal cancer?

A. Contact your clinic. Visit the Centers for Disease Control and Prevention (CDC) web site at <http://www.cdc.gov/cancer/screenforlife/index.htm>. CDC can also send you information in Spanish. Call the National Cancer Institute's Cancer Information Service: 1-800-4-CANCER. For TTY call 1-800-332-8615.

HOW THE FOBT (HEMOCCULT, STOOL GUAIAIC) WORKS

The Fecal Occult Blood Test, also called the Hemoccult Test or the Stool Guaiac Test, checks for hidden blood in your stool. Fecal refers to stool or bowel movement. Occult means hidden. Doctors use the FOBT (Hemoccult, Stool Guaiac) to screen (test) patients for colorectal cancer.

Colorectal cancer is cancer of the colon or the rectum. It is often called colon cancer, for short. Getting tested for colorectal cancer can help you prevent the disease. Here's how: this cancer usually starts from polyps in the large intestine that sometimes cause bleeding. Because the FOBT (Hemoccult, Stool Guaiac) can find blood in the stool, even if you can't see any blood, the test can alert your doctor that you may have polyps. Polyps can be removed before they turn into cancer. In this way, colorectal cancer is prevented. The FOBT (Hemoccult, Stool Guaiac) also helps find colorectal cancer early, when it is easiest to cure.



If your FOBT (Hemoccult, Stool Guaiac) reveals blood in the stool, you will likely be asked to have more tests to find the reason. There can be many causes. One cause is colorectal cancer, but only your doctor can tell you what is causing the problem through further testing.

The FOBT (Hemoccult, Stool Guaiac) does not hurt, and you can do it in the privacy of your own home. You will take stool samples from three bowel movements in a row. The following instructions will teach you how. If you have questions, please see the Frequently Asked Questions flyer, or call your doctor's office. Completing the Hemocult Kit/Test is an important way for you to take care of your own health.

BEFORE THE TEST

Your doctor may ask you to limit or avoid certain foods and medicines before you begin the FOBT (Hemoccult, Stool Guaiac). The reason is that some foods and medicines can make it appear that there is blood in your stool and could suggest that you have a problem when you don't (that is called a 'false positive' test result). Avoiding these foods and medicines can reduce the chance of errors in your test results. However, if you find it hard to avoid these foods and medicines, complete the test anyway. These are precautions, not reasons for you to not complete the test.

Medicines and Vitamins

At least 7 days before you start the FOBT (Hemoccult, Stool Guaiac), talk with your doctor about the medicines and vitamins you take. Be sure to let your doctor know if you are taking:

- Aspirin
- Iron supplements
- Vitamins
- Blood thinners
- Ibuprofen
- Other anti-inflammatory drugs such as Advil, Nuprin, Aleve, or Motrin

Diet

At least 3 days before you start the FOBT (Hemoccult, Stool Guaiac), review the list of foods to avoid before and during the test, including the following:

- Red or rare meat
- Turnips
- Cantaloupe
- Broccoli
- Radishes
- Cauliflower
- Horseradish
- Parsnips
- Raw beets

Talk with your healthcare provider if you have any questions or concerns about what you can and can't eat.

Other Preparations and Supplies

Before you begin your FOBT (Hemoccult, Stool Guaiac), here are a couple of other steps to take:

1. Remove all cleaners and deodorizers from the toilet bowl and tank. If the water is colored by cleaners or deodorizers, flush the toilet until the color disappears. (Do not put cleaners or deodorizers in your toilet until after you have finished taking the FOBT (Hemoccult, Stool Guaiac))
2. Look at the FOBT (Hemoccult, Stool Guaiac). You will find slides in a foil envelope, wooden sticks, and stool collection tissues. In addition to these tools, you may also want to have other materials handy. Many people who have taken the FOBT (Hemoccult, Stool Guaiac) report that some or all of these items have been helpful:

- Disposable gloves
- Plastic bags that can be sealed or tied
- Plastic wrap



Contents of the FOBT (Hemoccult, Stool Guaiac)

NOW YOU'RE READY TO START THE FOBT (HEMOCCULT, STOOL GUAIAIC)

During your FOBT (Hemoccult, Stool Guaiac), you will collect stool samples from three bowel movements in a row. Each time you have a bowel movement you will use one slide from the FOBT (Hemoccult, Stool Guaiac). (Some people find it helps to wear disposable gloves while collecting the stool sample.)

How to Take a Stool Sample

There are many ways in which people taking the FOBT (Hemoccult, Stool Guaiac) collect stool samples. You may choose any of these methods:

Use collection tissues that are provided.

To use them:

- Unfold a tissue.
- Float it on the surface of the water, making sure it sticks to the sides of the toilet bowl.
- Make sure the stool sample falls on the tissue.
- Take the stool sample off the tissue with the stick in your FOBT (Hemoccult, Stool Guaiac).
- Flush the tissue down the toilet after you take the stool sample.

Place a paper cup under your rectum during a bowel movement.

OR

Use a paper plate or put plastic wrap over the toilet bowl to collect the stool sample.

OR

Scoop the stool sample out of the toilet bowl with a paper cup or plastic spoon and place the sample on a paper plate.

AFTER YOU COLLECT THE STOOL SAMPLE

Each time you collect a stool sample (you will need to collect three stool samples), this is what you will do:

1. Use one end of the wooden stick provided in your test kit to take a small sample from the outside of the stool. Put a thin layer, or smear, of the stool on box A of the slide.
2. Then use the other end of the same stick to take a small sample from the inside of the stool. Put a thin smear of this sample on box B of the slide. Close the slide packet using the tab on the bottom.
3. Using a pen, label the slide with your name, address, date you took the stool sample, and your doctor's name.
4. Put the slide back inside the foil envelope. (Keep it away from heat, sun, light, and household chemicals like iodine, bleach, and cleaners.)
5. Place all of the supplies you used to collect the stool sample in a plastic bag. Close the bag and throw it in the trash.

NOW THAT YOU'VE COMPLETED THE FOBT (HEMOCCULT, STOOL GUAIAIC)

Now that you collected samples from three consecutive bowel movements, placed smears on all the slides, and labeled them, you are ready to return the completed FOBT (Hemoccult, Stool Guaiac) to the doctor's office or laboratory using the pre-addressed envelope provided with the test.

THE RESULTS

Please call your doctor's office if you have not received a call or letter within 3 weeks of returning the slides.



FECAL OCCULT BLOOD TEST (FOBT, HEMOCCULT, STOOL GUAIAIC)



FECAL OCCULT BLOOD TEST (FOBT, HEMOCCULT, STOOL GUAIAIC) CHECKLIST

- Get the FOBT (Hemoccult, Stool Guaiac) from your doctor or nurse.
- Tell your doctor or nurse about the over the counter and prescription medicines and vitamins you take. Ask if you should continue taking them before and during the time you do the FOBT (Hemoccult, Stool Guaiac).
- If your doctor or nurse has given you a list of foods to restrict or avoid before and during the FOBT (Hemoccult, Stool Guaiac), review the list.
- Complete the test, getting stool samples from three bowel movements in a row. Prepare and label the slides, as directed.
- Return the completed test in the pre-addressed envelope included with the kit.
- To get your test results, please call your doctor's office if you have not received a call or letter within 3 weeks of returning the completed test.

If you have questions, please call the clinic:

Name: _____

Phone number: _____

E-mail: _____

AT YOUR NEXT DOCTOR'S APPOINTMENT



- Ask your doctor about getting tested for colon cancer. Testing is important for all men and women aged 50 and older.
- There are several tests used to detect colon cancer. With your doctor, decide which is right for you. Then make arrangements to be tested.
- Find out when and how you will learn the test results. For example, will the doctor call you or mail the results? Or do you need to call your doctor's office to learn the results?
- Ask the doctor if there are any other tests you need.
- If you have questions, please write them below and bring them with you to your appointment:

After Your Doctor's Appointment

- Complete the colon cancer screening test as directed.