



# Essential Colorectal Cancer Information

**Cancer is the leading cause of death for Latinxs/os in the U.S. Latinxs/os die more from cancer in the Bay Area than any other ethnicity. Adherence to colorectal cancer screening recommendations is lowest in the Latinx community in CA.**

## Colon and Rectum

- The colon is the last portion of your digestive tract. The colon's function is to receive the waste leftover from digestion from the small intestine and to absorb as much water from it as possible.
- The rectum is the last portion of the colon, where feces are stored until they can be expelled
- The colon is divided into 4 portions: ascending, transverse, descending, and sigmoid. All of these portions can develop cancer, and they often have different characteristics

## Colon Cancer Stages

- Cancer happens due to uncontrollable and rapid division of cells.
- It is common for everyone to develop "polyps", or abnormal growths on the surface of colon due to the abnormal division of cells. Not all polyps are cancerous, but cancer develops from polyps that don't stop growing.
- **Stage 0 and 1:** the polyps begins to have cancerous cells, grows large, and forms a tumor
- **Stage 2:** the tumor extends into deeper layers of the digestive tract
- **Stage 3:** the tumor extends deeper to reach the blood vessels and lymph nodes
- **Stage 4:** cells from the primary tumor that reached the blood traveled to other parts of the body and caused tumors to form in other parts of the body --> **metastasis**
- **EARLY DETECTION IS ESSENTIAL:**
  - Survival after 5-years of a diagnosis when the cancer is found to be local is ~91%
  - Survival after 5-years of a diagnosis when the cancer has extended further into the digestive system layers and reached the blood is ~69%
  - Survival after 5-years of a diagnosis when there is metastasis is only ~11%

## Risk Factors and Prevention

- Risk factors (people who have/do these are at a higher risk of developing colon cancer):
  - Older age
  - Being male (colon cancer is more common in men)
  - Inflammatory colon conditions (IBS, Chron's, Ulcerative colitis)
  - Obesity
  - Having a sedentary lifestyle
  - High consumption of red and processed meat
  - Diabetes and/or Insulin resistance
  - Family history
  - Genetic conditions that increase the amount of polyps in the colon

- Excessive tobacco and alcohol use
- Prevention - avoid the risk factors!
  - Exercise, reduce consumption of red meat, eat more fruits and vegetables and anti-inflammatory food, reduce use of alcohol and drugs, etc

## Symptoms

- Some common symptoms are:
  - A change in bowel habits, such as diarrhea, constipation, or narrowing of the stool, that lasts for more than a few days
  - A feeling that you need to have a bowel movement that's not relieved by having one
  - Rectal bleeding with bright red blood
  - Blood in the stool, which might make the stool look dark brown or black
  - Cramping or abdominal (belly) pain
  - Weakness and fatigue
  - Unintended weight loss



## Screening Recommendations

- All adults aged 50 to 75 years old should be screened
  - There are many screening methods. The recommendations are:
    - High-sensitivity gFOBT or FIT every year - this is an at-home test to determine if there's blood in the stool. If blood is found, more tests need to be made to find out where the blood comes from.
    - sDNA-FIT every 1 to 3 years - a lab test of the stool to look for DNA related to colon cancer
    - CT colonography every 5 years - a CT scan of your colon
    - Flexible sigmoidoscopy every 5-10 years
    - Colonoscopy screening every 10 years - a procedure to look at the inside of your colon and to remove polyps to determine if they are cancerous
- Beginning detection early is recommended if you are at high risk

