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Colon Polyps and Cancer

HEALTH EDUCATION

Colorectal cancer is the second most common cancer in the United States. The average person's lifetime risk of developing it is about 1 in 20.

Changes that occur in the cells that line the colon and rectum can lead to growths called polyps. Polyps are fleshy clumps of tissue. Small polyps are usually not cancerous.

Over time – sometimes years – cells in a polyp can change and become cancer. The larger a polyp grows, the more likely this is to happen. Removing polyps early may prevent cancer from forming.

Why do polyps and cancer form?

No one knows the exact cause, but research has shown that people with certain risk factors are more likely than others to develop polyps and colorectal cancer.

- Age 50 or above, age 45 for African Americans
- Family History
  Close relatives (parents, brothers, sisters, or children) of a person who has had colorectal cancer are somewhat more likely to get colorectal cancer.
- Genes and Hereditary
  Changes in certain genes increase the risk of colorectal cancer.
  - Hereditary Nonpolyposis Colon Cancer (Lynch Syndrome) is the most common type of inherited colon cancer.
  - Familial Adenomatous Polyposis (FAP) is a rare inherited condition in which hundreds of polyps form in the colon and rectum.
- Diet
  Diets high in animal fat (Red meat and processed meat such as beef, liver, hot dogs and some lunch meat) and low in calcium, folate, and fiber may increase the risk of colorectal cancer.
- Cigarette smoking
  A person who smokes cigarettes may be at increased risk of developing polyps and rectal cancer.

Symptoms

Colorectal cancer is known as a "silent" disease because it rarely causes symptoms in its early stages. Symptoms that may occur include:

- Rectal Bleeding
- Change in stool color
- Change in bowel habits
- Iron deficiency anemia, pain, nausea and vomiting

How are polyps/cancer detected?

- Physical exam and medical history
- Digital rectal exam (DRE): Often part of the physical exam. Your doctor inserts a lubricated, gloved finger into your rectum to feel for abnormal areas.

- Fecal Occult Blood Test (FOBT): Sometimes polyps or cancers bleed. This test can detect tiny amounts of blood in your stool.
- Flexible Sigmoidoscopy: An exam of the rectum and lower colon using a lighted, flexible tube that is inserted into the rectum. Images of the rectum and sigmoid colon are shown on a video screen.
- Double-contrast barium enema: You are given an enema with barium solution and air is pumped into your rectum. Several X-rays are taken of your colon and rectum. The barium and air help polyps or tumors in the colon and rectum show up.

  Colonoscopy: This is the best test doctors have for finding colorectal polyps and cancer. The test is usually done on an outpatient basis. The day before the test, you do a "bowel prep" to clean out your colon. Before the test, you will be given medication to make you sleepy. The doctor inserts a long, flexible lighted tube into your rectum. The scope is guided slowly so the doctor can view your whole colon.

What can I do to help prevent polyps?

- Eat more fruits and vegetables, and whole grains.
- Lose weight if you are overweight, increase activity and exercise.
- Avoid eating fatty food, red meat such as beef and pork and processed meat such as bacon, sausage, hot dogs and lunch meat.
- Quit smoking.
- Limit alcohol to no more than 2 drinks per day for men and 1 for women.
- Some research suggests increasing vitamin D and calcium in your diet helps prevent polyps and colon cancer. Foods high in vitamin D include eggs, liver and salmon. Milk, cheese, yogurt and broccoli are rich in calcium. Milk and milk products may also have vitamin D added.

Why is early detection so important?

- **Precancerous polyps can be cured 100% of the time and early cancers up to 90%.**
- Once symptoms such as bleeding, change in bowel function, and belly pain occur, the cancer has only about a 50% cure rate.

Almost all polyps can be removed during colonoscopy. Some larger polyps and polyps that are suspicious for cancer may require surgery.

Talk with your doctor about any questions or concerns.

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