

# Colorectal Cancer Screening



*The physicians at the Florida Medical Clinic offer optimal health care to patients who have entrusted us for their health and well being. As our valued patient we want to provide important information regarding your health issues.*

Colorectal Cancer is the second leading cause of cancer death in the United States. Most colorectal cancers and most deaths from colorectal cancer are preventable through proper screening. Screening is the search for precancerous polyps or early colon cancers in asymptomatic persons. Colorectal cancer has several features that make it ideal for screening.

**FIRST**, it is both common and serious. It is fatal if not identified early or if left untreated. There are approximately 150,000 new cases of colorectal cancer identified each year. Further, about 60,000 people will die from this disease this year. It is the fourth most frequently diagnosed cancer in this country.

**SECOND**, colorectal cancer frequently arises from a slow growing lesion, or polyp. By removing these polyps, the progression to colon cancer is prevented. Colon Cancer can also be identified and reliably diagnosed during this screening.

**THIRD**, colorectal cancer, once developed, is believed to advance relatively slowly from stages that are readily treatable to stages that are not. Thus by identifying cancers, especially those in early stages, long-term cure is often expected. About 45% of colorectal cancers are considered early stage and are associated with an 80-100% five-year survival with appropriate surgical intervention.

**FOURTH**, currently recommended prevention tests are widely available. Usual screening tests include a physical examination, stool occult blood tests, flexible sigmoidoscopy and colonoscopy, all of which are available within the Florida Medical Clinic.

**FLEXIBLE SIGMOIDOSCOPY** is an examination of the rectum and sigmoid colon with a lighted instrument. This examination is generally done in a doctor's office and

takes only a few minutes. Approximately 40% of all colon cancers and half of all colon polyps occur outside the reach of this instrument limiting its usefulness as a screening tool.

**COLONOSCOPY** is an examination of the entire colon using a longer flexible lighted instrument. This

examination is generally done in an outpatient setting. Sedation is given to provide greater patient comfort. Many abnormalities including colon polyps can be treated and removed during this procedure.

## Recommendations For Colon Cancer Screening

The following recommendations for colon cancer screening were developed by a panel of experts belonging to the American College of Gastroenterology and are endorsed by the American Cancer Society.

### Average Risk patients

Average risk patients are persons 50 years and older who have no other risk factors for developing colorectal cancer other than their age.

**Recommendation:** Initial screening colonoscopy beginning at age 50 followed by repeat examinations every 10 years. If precancerous polyps are discovered, follow up examinations at one year and every three to five years thereafter should be pursued.

### Moderate Risk patients

Persons with a first degree relative diagnosed with colorectal cancer at an age greater than 60 years are at a moderately increased risk to develop colon cancer. Their risk is approximately two times that of the general population.

**Recommendation:** Screening colonoscopy beginning at age 40 with interval follow up examinations every ten years.



## High Risk Patients

These patients have a strong family history of colorectal cancer: multiple first degree relatives with colon cancer; or a single first degree relative diagnosed with colon cancer at less than 60 years of age.

**Recommendation:** Screening colonoscopy beginning at 40 or ten years younger than the age of diagnosis of the youngest affected relative with follow up examinations every three to five years.

Multiple clinical trials have been performed to evaluate the most effective screening strategies to prevent colorectal cancer. Average risk patients who underwent screening colonoscopy and removal of polyps experienced a 70-90% reduction in the development of colon cancer when compared to those not screened. Moderate risk patients are two times more likely to develop colon cancer than the general population. High risk patients are three to four times more likely to develop colon cancer than average risk patients. These statistics justify the intensified program for these patients.

Florida Medical Clinic provides a comprehensive medical facility for our patients and our community. A colorectal cancer-screening program is being offered to allow for preventative health maintenance and the reduction of colon cancer within our medical community. Feel free to discuss colon cancer screening with your primary care physician for more information. You can also obtain information regarding colon cancer screening from any of our Gastroenterologists.

### AVERAGE RISK

**Colonoscopy beginning at age 50 and every ten (10) years there after**

### MODERATE RISK

**Colonoscopy beginning at age 40 and every ten (10) years there after**

### HIGH RISK

**Colonoscopy beginning at age 40 or 10 years prior to the index age and every 3-5 years there after**

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