

Colon Cancer is the second leading cause of cancer deaths in Idaho.

AND YET, COLON CANCER IS BOTH PREVENTABLE AND TREATABLE.

In fact, the survival rate is 95% when caught early through a routine cancer screening.

Whether you or a loved one are worried about getting colorectal cancer, have just been diagnosed, are going through colorectal cancer treatment, or are trying to stay well after treatment, the following information can help you find the answers you need.

WHAT IS COLORECTAL CANCER?

Colorectal cancer starts in the colon or the rectum. These cancers can also be called colon cancer or rectal cancer, depending on where they start. Colon cancer and rectal cancer are often grouped together because they have many features in common. Cancer starts when cells in the body start to grow out of control.

HOW DOES COLORECTAL CANCER START?

Most colorectal cancers start as a growth on the inner lining of the colon or rectum. These growths are called polyps. Some types of polyps can change into cancer over time (usually many years), but not all polyps become cancer. The chance of a polyp turning into cancer depends on the type of polyp it is.

CAN POLYPS BE FOUND EARLY?

Screening is the process of looking for cancer or pre-cancer in people who have no symptoms of the disease. Regular screening is one of the most powerful tools against colorectal cancer. Screening can often find colorectal cancer early, when it's small, hasn't spread, and might be easier to treat. Regular screening can even prevent colorectal cancer. A polyp can take as many as 10 to 15 years to develop into cancer. With screening, doctors can find and remove polyps before they have the chance to turn into cancer.

Unfortunately, about 1 in 3 people in the US who should get tested for colorectal cancer have never been screened. This may be because they don't know that regular testing could save their lives from this disease, or due to things like cost and health insurance coverage issues.



SHOULD I GET SCREENED?

Yes! If you are 45 or older, talk to your primary care provider about when and how to be screened



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MAKE TIME FOR SCREENING

Screening tests are designed to find polyps so they can be removed before they turn into cancer. Tests can also find cancer in the early stages when it is easier to treat.

- You don't have to have a family history of colon cancer to be at risk.
- The risk of colon cancer increases as you get older.
- Colon cancer often has no symptoms.
- Many insurance plans cover colon cancer screening.
- If you have a family history of colon cancer talk to your doctor about when to be tested.

SIGNS, SYMPTOMS & OTHER THINGS TO LOOK FOR

While colon cancer often has no symptoms, some do exist. Schedule a doctor's appointment right away if you experience any of the following symptoms:

- Bleeding from your rectum
- Blood in your stool
- Stool that is skinnier than usual
- Going at unusual times
- Diarrhea, constipation or both
- Constant, full feeling and random stomach aches
- Gas pains or stomach pains
- Tired feeling
- Vomiting
- Weight loss for unknown reason

IN ADDITION TO SCREENING, WHAT ELSE CAN I DO?

You might be able to lower your risk of colorectal cancer by managing your diet and physical activity.

- Weight: Being overweight or obese increases the risk of colorectal cancer in both men and women, but the link seems to be stronger in men. Staying at a healthy weight may help lower your risk.
- Physical activity: Being more active lowers your risk of colorectal cancer and polyps. Regular moderate to vigorous activity can lower the risk. Limiting your sitting and lying down time may also lower your risk. Increasing the amount and intensity of your physical activity may help reduce your risk.
- Diet: Overall, diets that are high in vegetables, fruits, and whole grains, and low in red and processed meats, probably lower colorectal cancer risk, although it's not exactly clear which factors are important. Many studies have found a link between red meats (beef, pork, and lamb) or processed meats (such as hot dogs, sausage, and lunch meats) and increased colorectal cancer risk.
- In recent years, some large studies have shown conflicting evidence that fiber in the diet probably lowers colorectal cancer risk. Research in this area is still under way. Recent studies looking specifically at whole grain intake, however, show that colorectal cancer risk appears to go down as you add more whole grains to your diet.
- Limiting red and processed meats and eating more vegetables, fruits, and whole grains may help lower your risk.
- Alcohol: Several studies have found a higher risk of colorectal cancer with increased alcohol intake, especially among men. It is best not to drink alcohol. For people who do drink, they should have no more than 1 drink per day for women or two drinks per day for men. Not drinking alcohol may help reduce your risk.
- Quit smoking. Long-term smoking is linked to an increased risk of colorectal cancer, as well as many other cancers and health problems.

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