

# COLORECTAL (COLON OR LARGE INTESTINAL) CANCER

Colorectal polyps are abnormal growths in the colon (large intestine) or rectum that can turn into cancer if not removed.

Among Asian Americans, large intestinal cancer is the second most commonly diagnosed cancer.<sup>1</sup> Asian Americans have one of the lowest rates of large intestinal cancer screening in the United States with only 52% up-to-date on their screening compared to 66% among non-Hispanic whites.<sup>2</sup>

Native Hawaiian men have the highest death rate from large intestinal cancer among all ethnic groups.<sup>3</sup>

## SYMPTOMS

Large intestinal cancer does not always cause symptoms. If symptoms are present, they may include:

- A change in bowel habits
- Blood in or on your stool
- Diarrhea, constipation, or feeling that the bowel does not empty all the way
- Abdominal pain, aches, or cramps that don't go away
- Unexplained weight loss



## RISK FACTORS

Your risk for large intestinal cancer increases as you get older. Other risk factors include:

- Inflammatory bowel disease
- Personal or family history
- Genetic disorder
- Lack of regular physical activity
- Diet low in fruit and vegetables
- Being overweight or obese
- Alcohol and tobacco use

## PREVENTION AND SCREENING

Decrease your chances of developing large intestinal cancer by:

- Increasing physical activity
- Eating fruits and vegetables like breadfruit, taro, cabbage, mango, papaya, bok choy
- Limiting alcohol consumption
- Avoiding tobacco/cigarette smoking

The U.S. Preventive Services Task Force recommends that adults age 45 to 75 be screened for large intestinal cancer.

### TYPES OF SCREENING TESTS:

#### Stool tests include:

- **Guaiac-based fecal occult blood test (gFOBT)** uses the chemical guaiac to detect blood in the stool.
  - **How Often:** Once a year
- **Fecal immunochemical test (FIT)** uses antibodies to detect blood in the stool.
  - **How Often:** Once a year
- **FIT-DNA test (stool DNA test)** checks for altered DNA and for the presence of blood.
  - **How often:** Every three years

**Flexible sigmoidoscopy** checks for polyps or cancer inside the rectum and lower third of the colon.

- **How often:** Every 5 years, or every 10 years with a FIT every year

**Colonoscopy** serves as a follow-up test if anything unusual is found during one of the other screening tests.

- **How often:** Every 10 years, if you do not have an increased risk of colorectal cancer

**CT colonography** uses X-rays and computers to produce images of the entire colon for the physician to analyze.

- **How often:** Every 5 years

Visit your physician, Community Health Center, Rural Health Center, or Native Hawaiian Health Center if you have any questions or want to know what screening test is best for you.

## RESOURCES

- Find a Health Center: [findahealthcenter.hrsa.gov](http://findahealthcenter.hrsa.gov)
- National Cancer Institute Helpline: [cancer.gov/help](http://cancer.gov/help) or call 1-800-4-CANCER
- American Cancer Society: [cancer.org](http://cancer.org) or call 1-800-ACS-2345