



Colorectal cancer: Are you at risk?

Colorectal cancer starts in the colon or rectum. According to the National Cancer Institute, it is the third most common type of cancer.¹ While researchers don't know exactly what causes colorectal cancer, they have found several factors that can increase a person's risk of developing it.

About colorectal cancer

The colon and rectum form a long, muscular tube called the large intestine, and are part of the body's digestive tract. Colorectal cancer can also be called colon cancer or rectal cancer, depending on where it starts. Both cancers are often grouped together because they have many of the same features.² Most colorectal cancers start as abnormal growths called polyps that form on the inner lining of the colon or rectum. Over time, some types of polyps become cancerous.



Colorectal cancer may not cause any changes right away, but if it does, a person may experience the symptoms to the right.³

Signs and symptoms of colorectal cancer

- A change in your bowel habits that lasts for more than a few days (including diarrhea, constipation or narrowing of the stool)
- A feeling that you need to have a bowel movement that is not relieved by having one
- Rectal bleeding with bright red blood
- Blood in the stool, which may make the stool look dark
- Cramping or abdominal pain
- Weakness and fatigue
- Unintended weight loss

See your healthcare provider right away if you have any of these signs. You may not have colorectal cancer. But if there is cancer in your colon or rectum, the earlier your provider can find it and treat it, the better.

Take the quiz below to help you evaluate some of your risks for colorectal cancer.

Are you at risk for colorectal cancer? Check yes or no for each statement below.	YES	NO
Are you over age 50?		
Do you have a personal history of colorectal polyps or colorectal cancer?		
Do you have a personal history of inflammatory bowel disease?		
Do you have a family history of colorectal cancer or precancerous polyps?		
Are you African-American?		
Do you have type 2 diabetes?		
Are you overweight or obese?		
Are you physically inactive?		
Do you eat a diet high in red meats and processed meats?		
Do you smoke or have you ever smoked?		
Are you a heavy alcohol drinker (more than two drinks per day for men, or more than one drink per day for women)?		

Colorectal cancer risk assessment results

According to the American Cancer Society, the more times you answered “Yes” to the quiz, the greater your risk for developing colorectal cancer.⁴

Regardless of your score, if you are age 50 or older, you should talk to your healthcare provider about when and how often to have a colorectal cancer screening.

Talking about your risk factors with your healthcare provider

Anything that increases your chance of getting a disease is called a risk factor. Having a risk factor does not mean you will get cancer; not having risk factors doesn’t mean that you won’t get cancer. If you think you may be at risk, you should talk to your provider.



Here are some questions to help get you started

- Am I at risk?
- Should I have a colorectal cancer screening test?
- What tests are available and how can I prepare for them?
- How can I prevent or lower my risk of colorectal cancer?
- How do you get colorectal cancer?
- What are the symptoms?
- If diagnosed with colorectal cancer, what are my treatment options?

Detecting colorectal cancer

Colorectal cancer screening tests can find precancerous polyps so they can be removed before they turn into cancer. Screening tests can also find colorectal cancer early, when treatment works best.⁵

The U.S. Preventive Services Task Force recommends that adults age 50 to 75 be screened for colorectal cancer. If you're older than 75, ask your healthcare provider if you should be screened.⁶

Several screening tests can be used to detect colorectal cancer.⁵ Some check for blood in the stool while others look for polyps. Talk to your healthcare provider about which of the following tests is right for you.

- **Colonoscopy.** For this test, a doctor uses a long, thin, flexible, lighted tube to check for polyps or cancer inside the rectum and the entire colon. Polyps and some cancers can be found and removed. A colonoscopy is recommended once every 10 years.
- **Fecal immunochemical test (FIT).** This test uses antibodies to detect small amounts of blood through a stool sample. It is recommended annually.
- **Flexible sigmoidoscopy.** This test uses a short, thin, flexible, lighted tube to check for polyps or cancer in the rectum and lower part of the colon. It is recommended once every 5 years, or once every 10 years in combination with an annual FIT.
- **Fecal occult blood test (gFOBT).** This test detects small amounts of blood through a stool sample. It is administered via a take-home kit from your healthcare provider. It is recommended annually.
- **FIT-DNA test.** This test, also called a stool DNA test, detects blood and DNA in a stool sample, which may indicate precancerous or cancerous cells. It is recommended once every 1 to 3 years.



Schedule your screening today!

Remember, the sooner cancer is detected, the easier it is to treat and the more likely that treatments will be successful.⁵

References

¹National Cancer Institute

www.cancer.gov/types/colorectal

²American Cancer Society

www.cancer.org/cancer/colon-rectal-cancer/about/what-is-colorectal-cancer.html

³American Cancer Society

www.cancer.org/cancer/colon-rectal-cancer/detection-diagnosis-staging/signs-and-symptoms.html

⁴American Cancer Society

www.cancer.org/cancer/colon-rectal-cancer/causes-risks-prevention/risk-factors.html

⁵Centers for Disease Control and Prevention

www.cdc.gov/cancer/colorectal/basic_info/screening/index.htm

⁶Centers for Disease Control and Prevention

www.cdc.gov/cancer/colorectal/basic_info/screening/tests.htm

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