



March is Colorectal Cancer Awareness Month

Do not put off needed health care, especially preventive tests.

Remember, the most common symptom of early colorectal cancers is NO symptom, so it's important to get screened.

For more info, please visit the American College of Gastroenterology at:
<https://gi.org/topics/colorectal-cancer/>

Thank you.

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45 IS THE NEW 50!

LOWER AGE TO START SCREENING

Age 45 is now the recommended age to begin screening for colorectal cancer, among adults at average risk, according to the American College of Gastroenterology.

AN IMPORTANT CHANGE

- This is an important change from earlier guidelines that recommended starting screening at age 50 for most people and age 45 for African Americans. Now “45 is the new 50” to start screening for *everyone* at average risk for colorectal cancer.

YOU CAN PREVENT COLORECTAL CANCER

- With screening, your gastroenterologist can diagnose colorectal cancers at an earlier stage, find colon polyps early so they can be safely removed, and help to prevent colorectal cancers.

DON'T PUT OFF PREVENTIVE HEALTH SCREENINGS

- Do not put off needed health care, especially preventive tests.
- Remember, the most common symptom of early colon and rectal cancers is **NO** symptom, so it is important to get screened.

NEVER IGNORE NEW OR WORRYING SYMPTOMS

It is important to reach out to your health care providers if you have any symptoms, **REGARDLESS** of age.

Do not hesitate to talk to your health care team about new or worrying bowel symptoms, even those that seem hard to discuss or share, including:

- blood in the stool
- change in bowel habits
- change in the shape and size of stool
- rectal pain
- abdominal pain
- unexpected weight loss
- unexplained or new anemia

LEARN ABOUT YOUR SCREENING OPTIONS FOR COLORECTAL CANCER

ONE-STEP SCREENING VS. TWO-STEP SCREENING FOR COLORECTAL CANCER

The American College of Gastroenterology 2021 Guidelines on Colorectal Cancer Screening explain the difference between recommended tests that are “one-step” tests and “two-step” tests. In many instances, the best screening test is the one that gets done.

1-Step Test

COLONOSCOPY

Your doctor can see and remove pre-cancers called polyps and prevent, detect, or confirm colorectal cancer all in 1 step.

2-Step Test

STEP 1:

STOOL-BASED TEST

- FIT Test (Fecal Immunochemical Test)
 - Multitarget Stool DNA
- OR**
- Flexible sigmoidoscopy
 - CT colonography
 - Blood testing

Positive Test?



STEP 2:
COLONOSCOPY

👍 One-Step Screening Test:

COLONOSCOPY

Colonoscopy is a one-step test that looks for growths called polyps in your entire colon (large intestine) and rectum using a colonoscope. Your doctor can both detect and remove polyps during colonoscopy which can prevent colorectal cancer. Colonoscopy is the most commonly performed gastrointestinal procedure in the United States. Colonoscopy with removal of polyps offers long term protection against developing colorectal cancer or dying from it.

👍 Two-Step Screening Tests:

STOOL-BASED TESTS

These tests detect blood or altered DNA in the stool as a first step. A positive result would require the second step of colonoscopy for further examination.

a. FIT Test

Fecal Immunochemical Tests (FIT) detects hidden blood in the stool. The stool FIT test is typically performed on a yearly basis. A positive test requires a follow-up colonoscopy.

b. Multitarget Stool DNA (mtsDNA)

Multitarget stool DNA test is a non-invasive screening for colorectal cancer. It looks for abnormal DNA associated with colon cancer or more aggressive precancerous polyps. This test is more sensitive than the FIT test, but your chance of getting a false positive may increase as you get older. According to the manufacturer's recommendations, if the mtsDNA test is negative, repeat screening is needed in three years. If the mtsDNA test is positive, the second step of colonoscopy is required. (At this time, the only FDA-approved mtsDNA test is Cologuard.®)

👍 Tests for Individuals Who Cannot or Will Not Have a Colonoscopy or FIT Test

CT COLONOGRAPHY AND BLOOD TESTING

CT colonography and blood testing are options for individuals unwilling to undergo colonoscopy or FIT, provided that the tests are locally available and reimbursed by insurers for screening. It is important to note that both tests will still require a follow-up colonoscopy if positive.