Colorectal Cancer Screening



Understanding your personal risk factors for colorectal cancer is key to determining which screening tests are appropriate and how often you should be tested. Colorectal cancer is not just an old person's disease — incidence and mortality rates for young adults (especially African Americans, Alaska Natives, Native Americans and Caucasians) are on the rise. Talk with your health care providers about your personal risk factors and the age at which you should get a baseline test.

Do you have:

- A personal history of colorectal cancer or certain types of polyps
- A family history of colorectal cancer
- A personal history of inflammatory bowel disease (ulcerative colitis or Crohn's disease)
- · A confirmed or suspected hereditary colorectal cancer syndrome
- A personal history of getting radiation to the abdomen (belly) or pelvic area to treat a prior cancer

NO: Your doctor may determine that you are at average risk.

Start regular screening at age 45 either with a stool-based test or an exam that looks at the colon and rectum (a visual exam). If in good health, continue regular colorectal cancer screening through age 75.

Ages 76 through 85: The decision to be screened should be based on your preferences, life expectancy, overall health and prior screening history.

People over 85 should no longer get a colorectal cancer screening.

YES: Your doctor may determine that you are at high risk.

Screening tests and frequency will depend on your specific situation.

If one or more family members have had colon or rectal cancer. Recommendations depend on who in the family had cancer and how old they were when diagnosed.

If you had certain types of polyps removed during a colonoscopy:

You may need a colonoscopy again after three years, depending on the type, size and number of polyps.

If you have inflammatory bowel disease (Crohn's disease or ulcerative colitis):

You may need colonoscopies starting at least eight years after diagnosis, plus follow-up colonoscopies every one to three years.

If you have or suspect you have certain genetic syndromes:

Colonoscopy screening is often recommended to begin at a young age, possibly as early as the teenage years for some syndromes, and needs to be done much more frequently. Specifics depend on which genetic syndrome you have and other factors.

If you had radiation to the abdomen or pelvic area to treat a prior cancer.

You may need to be screened earlier and/or more frequently than someone with average risk.

