

Colon Cancer Prevention

American Cancer Society Guidelines on Screening and Surveillance for the Early Detection of Colorectal Adenomas and Cancer Average Risk Women and Men Ages 50 and Older

The following options are acceptable choices for colorectal cancer screening in average risk adults. Since each of the following tests has inherent characteristics related to accuracy, prevention potential, costs, and risks, individuals should have an opportunity to make an informed decision when choosing one of the following options:

Tests that find polyps and cancer

Test	Interval
Flexible Sigmoidoscopy*	Every 5 years
Colonoscopy	Every 10 years
Double Contrast Barium Enema*	Every 5 years
CT colonography (virtual colonoscopy)*	Every 5 years

Tests that mainly find cancer

Guaiac-based fecal occult blood test (gFOBT)*, **	Annually
Fecal immunochemical test (FIT)*, **	Annually
Stool DNA test (sDNA)*	Interval uncertain

* Colonoscopy should be done if test results are positive.

** For gFOBT or FIT used as a screening test, the take-home multiple sample method should be used. A gFOBT or FIT done during a digital rectal exam in the doctor's office is not adequate for screening.



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Preventing Colorectal Cancer

In addition to screening, counsel your patients to:

Eat a healthy diet.

- Eat 5 or more servings of fruits and vegetables a day.
- Limit consumption of processed and red meats.
- Choose whole grains in preference to processed (refined) grains.
- Limit alcohol intake to no more than 2 drinks per day for men and 1 drink per day for women.

Participate in moderate physical activity for at least 30 minutes each day.

- Moderate activity includes brisk walking, dancing, and gardening.

Maintain a healthy weight.

- Balance caloric intake with physical activity.

Avoid smoking and use of other tobacco products.

Modifying these behaviors will also reduce the risk of other cancers, cardiovascular disease, osteoporosis, and diabetes.

Why get tested?

- Colon cancer is the third most commonly diagnosed form of cancer in the United States in both men and women.
- Screening can result in the detection and removal of colorectal polyps before they become cancerous. Screening reduces mortality both by decreasing incidence and by detecting a higher proportion of cancers at early, more treatable stages.
- When colorectal cancers are detected at an early, localized stage, the 5-year survival rate is 90 percent; however, only 39 percent are diagnosed at this stage, mostly due to low rates of screening.

For the most up-to-date [American Cancer Society](https://www.cancer.org) screening guidelines, please visit [cancer.org](https://www.cancer.org) or call 1-800-227-2345.



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