



medfacts

AN EDUCATIONAL HEALTH SERIES FROM NATIONAL JEWISH HEALTH™

Colon Polyps

Screening and Treating to Prevent Colon Cancer

Colorectal cancer affects both men and women, most often above 50 years of age. It is one of the most common types of cancer. Colon cancer can be prevented. Screening tests are available that identify and treat the precursors to colon cancer, colon polyps.

What are colon polyps?

The colon is the lower portion of the GI tract and is about 5 feet long. A colon polyp is a growth inside the colon. Colon polyps can be small, often less than 1 cm. They can also be larger than 1 cm. These are less common and more likely to develop into colon cancer.

What are the types of colon polyps?

There are several types of colon polyps. They include nonneoplastic polyps and neoplastic polyps.

- Nonneoplastic polyps - These polyps are **not** likely to develop into cancer. Hyperplastic polyps, hamartomas, lymphoid and inflammatory polyps are all nonneoplastic polyps.
- Neoplastic polyps – These polyps are more likely to develop into cancer. **Adenomas** are the most common type of neoplastic polyp. Most of the polyps removed during a colonoscopy are adenomas.
 - Once adenomas are removed they are viewed under a microscope. The degree of dysplasia is determined. Dysplasia means abnormal cells. The adenoma may have a low or high degree of dysplasia.
 - Adenomas vary in size. The larger (>1cm) adenomas are more likely to have a high degree of dysplasia.

Your doctor will discuss with you the type of polyps that were found during the colonoscopy and recommend further treatment and follow-up.

Who is at risk for developing colon cancer?

You have an increased risk of developing colon cancer if:

- There is a history of colon cancer in your immediate family, especially if the relative is 60 years or younger or,

- There is a personal history of colon polyps or for women a history of uterine or ovarian cancer before the age of 50.

What are the symptoms of colon cancer?

The symptoms of colon cancer may vary and may be **vague**. This is one reason screening tests are so important.

Symptoms of advanced colon cancer **may** include: a change in bowel habits, rectal bleeding, cramping and abdominal pain and/or a feeling of fullness that is not relieved by having a bowel movement. **Some people with colon cancer have no symptoms**. Since symptoms of colon cancer vary greatly or may be absent and colon cancer is so common screening is important.

How are colon polyps and colon cancer identified?

Early detection of colon polyps is important since most colon cancer develops slowly from colon polyps. The first step in diagnosing colon polyps and colon cancer is a good evaluation. This may include:

- Detailed medical history and physical exam.
- Colonoscopy – The colonoscopy is the gold standard for early detection and treatment of colon polyps. Your health care provider may do a colonoscopy to visualize the inside of your entire colon, not just the lower portion. Your doctor may also do a biopsy and remove any polyps found inside your colon. During a biopsy a small amount of the tissue is taken from the lining of the colon. The polyps and tissue can be studied closely to help determine your diagnosis and the test treatment.
- Stool sample for occult blood - Your health care provider may ask you to test a stool sample for hidden (occult) blood. There may be small amounts of blood which aren't detected visually so this test can be useful. You will be given a kit to test the stool at home. Your health care provider will give you instructions for collecting a small stool smear on the test kit. You will also be instructed on returning the kit. The kit can be tested to determine if it contains blood. If the test is positive your health care provider may recommend a colonoscopy.
- Sigmoidoscopy – Your health care provider may do a sigmoidoscopy to visualize the inside of your colon. A small flexible tube is used to see inside the rectum and lower portion of the colon. If the test is positive your health care provider may recommend a colonoscopy.
- Virtual colonoscopy – Currently this is not routinely recommended for screening since the utility and risks have not been well established.

What is the treatment for colon polyps?

The colonoscopy is used to identify and remove colon polyps. Your health care provider may recommend specific follow-up if colon polyps have been identified and removed. Follow-up is important as part of the treatment plan and is different based on your diagnosis and history.

What is the treatment for colon cancer?

If the colon polyp biopsy is positive for colon cancer, you will be referred to a cancer specialist, also called an oncologist. The oncologist will recommend a combination of treatment based on your stage of cancer. Treatment may include surgery, radiation therapy and/or chemotherapy.

How can colon polyps and colon cancer be prevented?

Screening tests are important to identify and remove colon polyps before they potentially develop into colon cancer, thus preventing colon cancer. A colonoscopy is recommended every 10 years after the age of 50 for everyone. An alternative to a colonoscopy may be a stool sample and a sigmoidoscopy every 3-5 years. Colonoscopies may be recommended at a younger age and more frequently if there is increased risk of developing colon cancer.

Also important in preventing colon polyps and colon cancer is a healthy lifestyle. A healthy lifestyle includes:

- Eating plenty of fruits, vegetables and whole grain foods every day,
- Limiting saturated fats by choosing lean meats, fish and low-fat dairy foods,
- Maintaining a healthy weight,
- Avoiding excessive amounts of alcohol and,
- Giving up smoking.

Your health care provider may recommend other measures you can take based on your history. Remember, regular screening tests and follow-up visits with you health care provider are important to prevent and treat colon polyps, thus colon cancer.

Note: This information is provided to you as an educational service of LUNG LINE® (1-800-222-LUNG). It is not meant to be a substitute for consulting with your own physician.

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