

# Colorectal Cancer

*Colorectal cancer occurs when cells in the colon or rectum grow and multiply uncontrollably, damaging surrounding tissue and interfering with the normal function of the colon or rectum. The cells can spread to other parts of the body. When the disease spreads to outside the colon or rectum, it is still called colorectal cancer.*

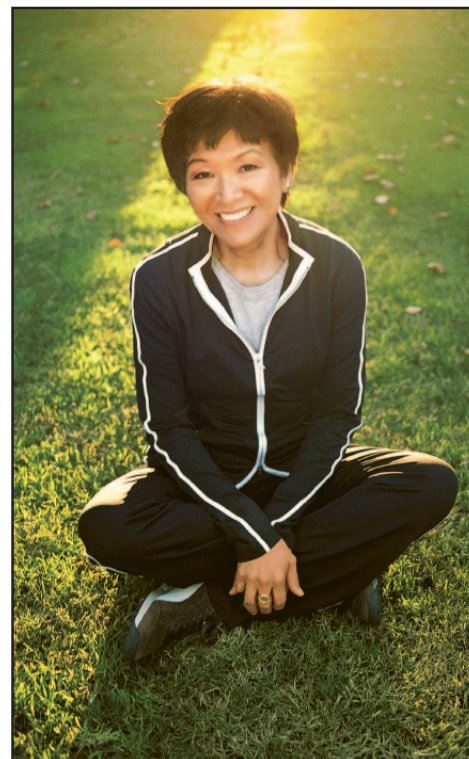
**Your best chance for surviving colorectal cancer is detecting it early. When found early, there is nearly a 90 percent chance for cure.**

## Symptoms

Signs or symptoms of colorectal cancer may not appear until the disease is more advanced. Most colorectal cancers begin as a polyp, a small, non-cancerous growth on the colon wall that can grow larger and become cancerous. As polyps grow, they can bleed or block the intestine, causing a bowel obstruction. Common symptoms include:

- rectal bleeding
- blood in the stool or toilet after a bowel movement
- prolonged diarrhea or constipation
- change in the size or shape of your stool
- abdominal pain or a cramping pain in your lower stomach
- feeling of discomfort or urge to have a bowel movement when there is no need

In later stages, patients may experience unexplained weight loss, fatigue, or night sweats. Having any of these symptoms does not mean that you have cancer, but if you notice one or more of them for more than two weeks, see your doctor immediately.



*"I was in total shock when I found out I had cancer," Sheila Lau says. "I had no history. How could this be growing in me and I don't know about it?" Sheila is healthy today and has learned that a cancer diagnosis is not the end of the world.*

## Screening

MD Anderson has specific cancer screening guidelines based on your chances of getting cancer. The exam you get and how often you are tested depends on whether you are at average, increased or high risk for colorectal cancer.

If you are at increased or high risk for colorectal cancer, you may need to start screening at an earlier age or have exams more frequently.

It's important to know if people in your family have had cancer. This information, along with your personal health history, helps your doctor find out if you're at increased risk. You and your doctor can use this information to make a well-informed decision about cancer screening.

The screening guidelines on this fact sheet are for men and women at average risk. To see MD Anderson screening guidelines for those at increased and high risk for colorectal cancer, visit [www.mdanderson.org/screeningguidelines](http://www.mdanderson.org/screeningguidelines).

Cancer screening exams are medical tests performed when a person has no symptoms. Beginning at age 50, men and women should follow ONE of the examination schedules below.

1. Colonoscopy every 10 years. This test is preferred by MD Anderson to prevent and find colorectal cancer.
2. Virtual colonoscopy every five years. A traditional colonoscopy will then be performed if polyps are found.
3. Fecal Occult Blood Test (FOBT) every year. This test finds hidden blood in the stool, which may be a sign of cancer. The FOBT does not prevent colorectal cancer. If the doctor finds blood in your stool, you may need to get a colonoscopy.

If you choose a virtual colonoscopy, check with your insurance provider before scheduling an exam. Not all insurance providers cover the cost of this exam.

MD Anderson does not recommend colorectal screening exams for men and women ages 85 and older. Screening for adults ages 76 to 85 should be considered on an individual basis by a person's doctor.

