

## Colorectal cancer

Colon and rectal cancer (colorectal cancer) presently is the second deadliest cancer in the world. However, statistics show that if diagnosed early it can be 90% curable. Because of this, the American Cancer Society is formulating a campaign to bring more attention to this disease in hopes of increasing awareness in prevention measures and early diagnosis.

Benign tumors of the large intestine are called polyps. Malignant tumors of the large intestine are called cancers. Benign polyps do not invade nearby tissue or spread to other parts of the body. Benign polyps can be easily removed during colonoscopy, and are not life threatening. If benign polyps are not removed from the large intestine, they may become malignant (cancerous) over time. Most of the cancers of the large intestine are believed to have developed from polyps. Cancer of the colon and rectum can invade and damage adjacent tissues and organs or can break away and spread to other parts of the body where new tumors form. Once metastasis has occurred in colorectal cancer, a complete cure of the cancer is unlikely. The cause of colon cancer is unknown but diet may play a part in developing it. Western diets that are high in fat may predispose people to cancer risk. It is postulated that the breakdown products of fat metabolism may lead to the formation of cancer-causing chemicals. Diets high in vegetables and high-fiber foods such as whole-grains may rid the bowel of these carcinogens and help reduce the risk of cancer. Family history and genetic background play an important factor in colon cancer risk.

Symptoms of colon cancer are numerous and non-specific. They include fatigue, weakness, shortness of breath, change in bowel habits, narrow stools, diarrhea or constipation, red or dark blood in stool, weight loss, abdominal pain, cramps or bloating. Colon cancer can be present for several years before symptoms develop and can vary according to where in the large bowel the tumor is located. Unfortunately, colon cancers can be well advanced before they are detected.

The most effective prevention of colon cancer is early detection and removal of precancerous colon polyps before they turn cancerous. It is recommended that all individuals over the age of 40 have a yearly digital examination of the rectum and their stool tested for hidden or "occult" blood. For individuals over 50 years of age, it is recommended they undergo flexible sigmoidoscopy every 3-5 years. Colonoscopy is also recommended every 5-10 years depending on the findings.

Finally, people can change their eating habits by reducing fat intake and increasing fiber in their diet. Major sources of fat are meat, eggs, dairy products, salad dressings and oils used in cooking. Fiber is the insoluble, non-digestible part of plant material present in fruits, vegetables, and whole-grain breads and cereals.

For all of us over 50, at our next visit, ask your doctor to order a sigmoid or colonoscopy to check for polyps and other bowel problems. It very well may save your life!