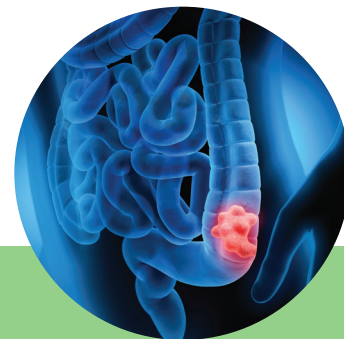


# A decision aid for Colon Cancer Screening You have options...



This information is for you, if you:

- Are between the ages of 45 to 75
- Are at average risk for colon cancer
- Have not had colon cancer, colon polyps, inflammatory bowel disease, or family history of colon cancer.

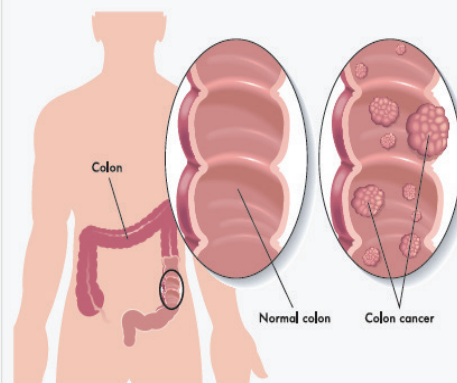
## What are my screening options?

Doctors generally recommend a colonoscopy, and a colonoscopy is a very good test. But, some people do not want a colonoscopy. For people who do not want a **colonoscopy**, there are **stool based tests** that can be done at home. Colonoscopy may be a little bit better than stool based tests, but it has some risks.

The best test is the one that gets done.

## Facts about colon cancer

- Colon cancer starts off as a polyp in the large intestine or the colon.
- Polyps are abnormal growths in the colon.
- Polyps and early stage colon cancer do not always cause people to have problems or symptoms.
- Colon cancer usually grows slowly.



## Why should I get screened?

Screening for colon cancer saves lives. It is important to have a screening test before symptoms begin. With screening, cancer can be caught in the early stages and before it spreads to other parts of the body. In some cases, screening prevents colon cancer. Fortunately, there are other screening options for people who do not want a colonoscopy.

Learn more about these tests and your options in the following pages...

# Which type of test is right for me?

## Colonoscopy or Stool Based Tests:

	Colonoscopy	Stool Based Tests
Description of the screening test:	<p>Doctor uses a narrow tube to look inside your colon. The doctor will remove any polyps to prevent cancer from developing.</p> 	<p>You will collect a small stool sample to be tested for signs of blood.</p> 
Preparation for the screening test:	You drink medication that cleans out your colon the night before the test. This causes loose stool, gas, bloating, and a need to go to the bathroom more often.	There is no preparation needed.
Location of the screening test:	In the doctor's office.	At home.
How long the screening test takes:	Less than 1 hour. After the test, you will need the rest of the day to recover. Some people need several days to recover completely.	Less than 5 minutes.
Requires help from family or friend on the screening test day:	Yes, you will be given medication to help you relax. This means you will need someone to drive you home after the test.	No.
What the screening test finds:	Polyps and colon cancer.	Signs of blood in your stool, which can be from polyps or colon cancer.
What the screening test may find other than cancer:	Polyps that are not cancer.	The test may show blood when nothing is wrong.
How often you need the screening test:	Every 10 years, if no polyps are found. Every 5-7 years if polyps are found.	Every 1 to 3 years depending on which test, <b>if no signs of blood</b> are found.
Will I need follow up after the test?	No.	Yes, if the test finds blood, you will need a colonoscopy. Every year, about 7* out of 100 people tested will need a follow-up colonoscopy.
Reduces risk of death from colon cancer?	Yes, if you complete regular screenings.	Yes, if you complete the tests on schedule.
Chance of injury from the screening test:	Out of 1,000 colonoscopies done: 2** people will have complications requiring hospitalization. Very rarely, someone may die from complications.	There is no risk of injury from the stool based tests.

\*Attendance and yield over three rounds of population-based fecal immunochemical test screening. Kapidzic, A, et al. Am J Gastroenterol 2014 Aug; 109:1257.

\*\*Estimation of Benefits, Burden, and Harms of Colorectal Cancer Screening Strategies: Modeling Study for the US Preventive Services Task Force. Knudsen, AB, et al. JAMA. 2016 Jun 21;315(23):2595-609.

# Which test is right for me?

Weighing your options:



You may decide to have a **colonoscopy** because...

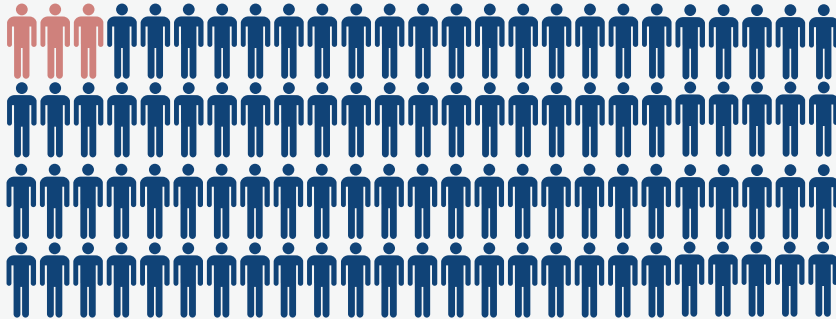
- » It finds polyps and removes polyps during screening
- » It may not have to be done as frequently as a stool based test.
- » It does not involve you handling your stool

You may decide to have a **stool based test** because...

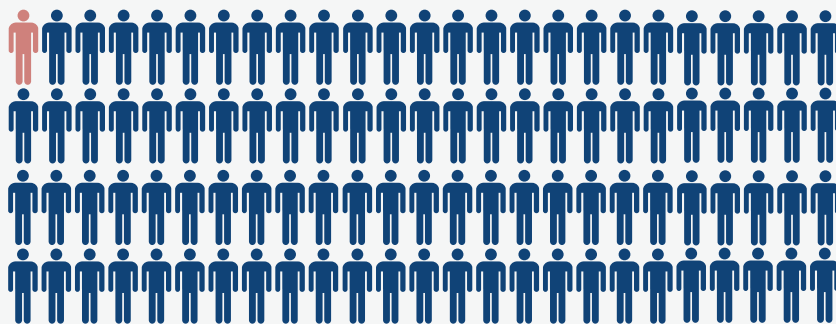
- » There is no risk of injury
- » It is done at home
- » You don't mind doing a test every 1 to 3 years
- » You are willing to have a colonoscopy if the test is positive

## How many lives does screening save?

**Without screening, 3 out of 100 will die**



**With screening, 1 out of 100 will die**



People who live



People who die

This means that:

- 3 out of every 100 people who do not get screened will die from colon cancer.
- **With either type of screening, this goes down to 1 person out of every 100.\***
- 2 lives are saved with screening.\*\*
- In other words, either test lowers your chance of dying from colon cancer by about 64%.

\*Clinical Guidelines Committee of the American College of Physicians. Qaseem, A, et al.; Screening for Colorectal Cancer in Asymptomatic Average-Risk Adults: A Guidance Statement From the American College of Physicians. Forcica, MA, et al. Ann Intern Med. 2019 Nov 5;171(9):643-654.

\*\*Screening for Colorectal Cancer. Amir Gupta. Hematology/Oncology Clinics of North America, Volume 36, Issue 3, 2022, Pages 393-414.

# What are the next steps?

If you know which choice is best for you:

<input checked="" type="checkbox"/>	If you know you will get a colonoscopy.	Call your doctor to schedule a colonoscopy.
<input checked="" type="checkbox"/>	If you know you will get a stool blood test.	Call your doctor to request to have a stool based test.

## Still not sure?

Screening is important for everyone, but not everyone has the same questions or concerns. Use the space below to write down questions or concerns you may have and want to discuss with your doctor. Bring these to your next appointment.

My questions and concerns are:

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<https://patientdecisionaid.org>



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