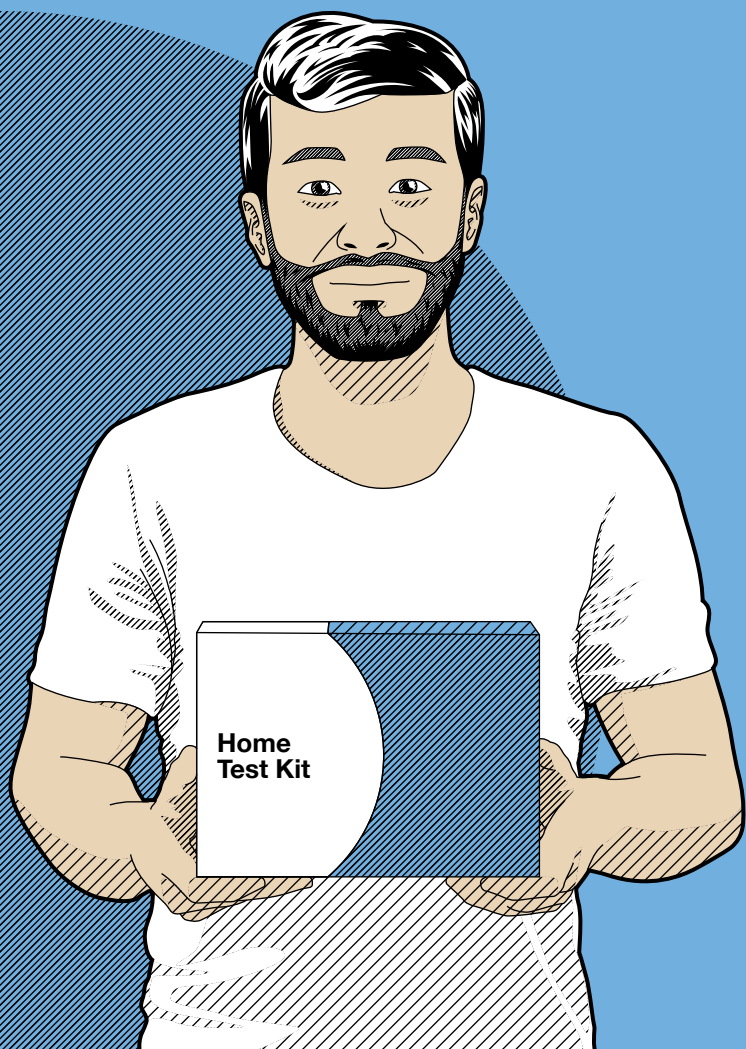


How To Do an At-Home Colon Cancer Test



Introduction

Colorectal cancer, which is also called colon cancer, is one of the leading causes of cancer-related death in New York City (NYC). Regular screening can help prevent this kind of cancer or find it earlier, when it is easier to treat.

Colon cancer cases have been increasing among individuals younger than age 50. The NYC Department of Health and Mental Hygiene recommends that individuals without risk factors ask a health care provider about getting screened starting at age 45.

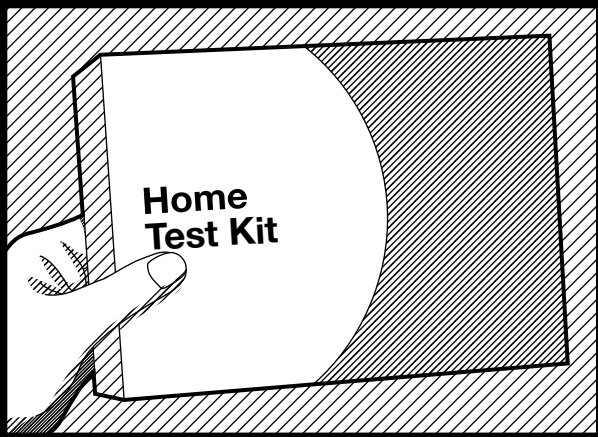
If you have risk factors, such as a close family member with colon cancer, you may need to start screening earlier or get screened more often. Discuss your personal risk with your provider to determine how early and how often you should be screened. It is better to know about your risks sooner rather than later. Having a risk factor does not necessarily mean you will develop colon cancer, and having no risk factors does not mean you will not get the disease.

There are different colon cancer screening tests, including stool-based tests and colonoscopy. Stool-based tests may be more convenient because they do not involve preparation and can be done at home. They can detect blood or DNA, which can be a sign of colon cancer, from a stool (feces) sample. Stool-based test options include:

- A fecal immunochemical test (FIT), which detects blood. A FIT is recommended every year.
- A high-sensitivity guaiac-based fecal occult blood test (HSgFOBT), which detects blood. An HSgFOBT is recommended every year.
- A multi-target stool DNA test (FIT-DNA), which detects blood and changes in genes (DNA) that could be from cancer. A FIT-DNA is recommended once every three years.

A colonoscopy is done at a health care provider's office and involves preparation and setting time aside for the procedure. It is a visual exam with a special camera that allows a health care provider to directly observe your colon and, during the same exam, to remove any polyps found along the way. A colonoscopy is done once every 10 years or sometimes more frequently, depending on your personal risk and what the exam shows. A positive stool-based test must be followed up with a colonoscopy.

Speak to your health care provider to find out which test to do. If doing an at-home stool-based test, read this story to learn more.



HEY MARK.
WHAT DO YOU
HAVE THERE?

HEY SANDRA.
IT'S THE STOOL-BASED
TEST THAT MY HEALTH CARE
PROVIDER SUGGESTED
TO ME TO SCREEN FOR
COLON CANCER.




I'M HAPPY YOU ARE
TAKING STEPS TO
PROTECT YOURSELF
FROM COLON CANCER,
MARK. HOW DOES THIS
TEST WORK?


I TAKE A SMALL SAMPLE
OF MY POOP. THEN I
SEND IT TO A LAB WHERE
THEY WILL ANALYZE MY
SAMPLE FOR HIDDEN
BLOOD.

HIDDEN BLEEDING CAN
BE A WARNING SIGN
FOR COLON CANCER OR
SOME OTHER ILLNESS.






DETECTING CANCER AS
EARLY AS POSSIBLE
SOUNDS SMART. THAT
WOULD MEAN IT IS EASIER
TO TREAT, RIGHT?



HOW DID YOU
DECIDE WHICH
TEST TO DO?

I SPOKE TO MY HEALTH CARE
PROVIDER TO COMPARE SCREENING
OPTIONS. WE SPOKE ABOUT A
COLONOSCOPY AND A
STOOL-BASED TEST. BOTH FIND
COLON CANCERS EARLY.

HOW ARE THEY
DIFFERENT?



I CAN DO THE
STOOL-BASED TEST
AT HOME. IT DOES
NOT REQUIRE A
SPECIAL DIET.

AND YOU DON'T
NEED TO BE PUT
UNDER ANESTHESIA
FOR THIS TEST,
RIGHT?

RIGHT.
IF NOTHING SHOWS UP
IN THE STOOL-BASED
TEST, THEN MY RESULTS
WILL BE CONSIDERED
NORMAL.

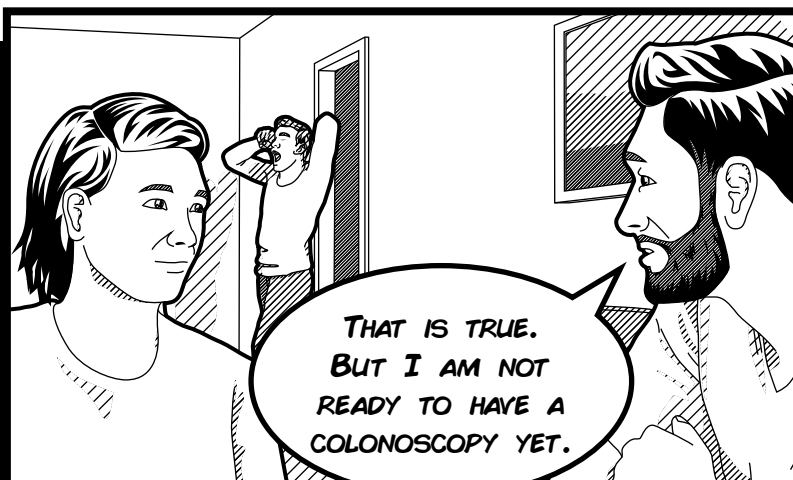
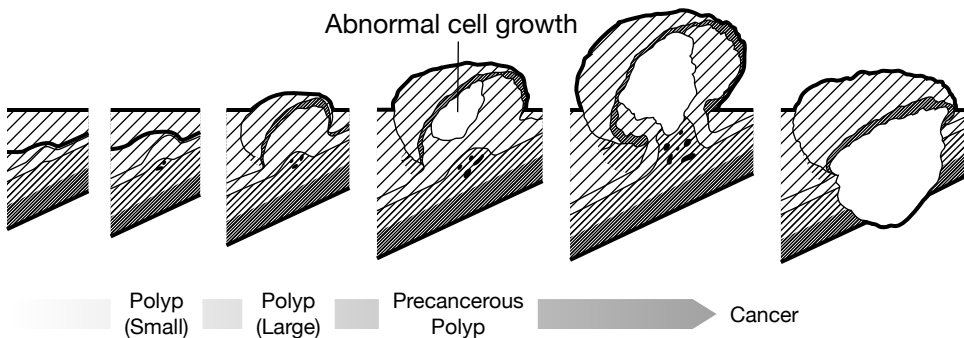
I WILL KEEP
CHECKING ONCE EACH
YEAR. IF IT EVER
COMES BACK AS NOT
NORMAL, THEN I WILL
GET A COLONOSCOPY.

**I HAD A
COLONOSCOPY,
REMEMBER?
A COLONOSCOPY
CAN ALSO TAKE OUT
POLYPS THAT MIGHT
BECOME CANCER.**



Stages of Polyps

Abnormal cell growth

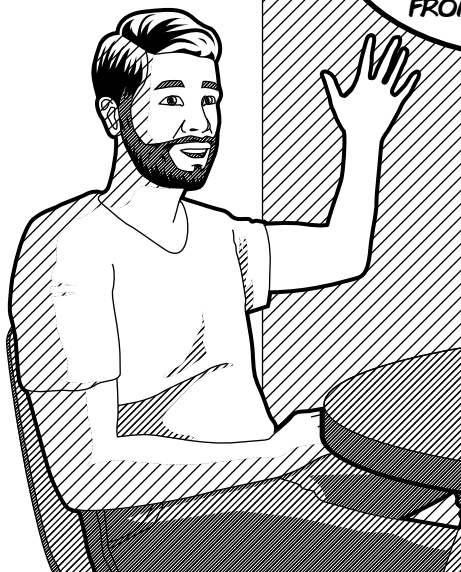




HEY DAD. WHAT
DO YOU HAVE
THERE?

HEY ANDREW!
THIS IS A COLON
CANCER TEST I GOT
FROM MY HEALTH
CARE PROVIDER.

THIS IS ONE OF
A FEW TYPES OF
STOOL-BASED TESTS
THAT CAN BE MAILED
FROM YOUR HOME.



INTERESTING.

I JUST CHECKED THE
EXPIRATION DATE OF THE
TEST, AND IT'S STILL
GOOD. I WANT TO DO
THE TEST SOON, BEFORE
I FORGET.



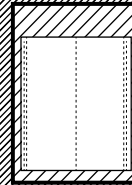


Talk to your health care provider to decide what kind of stool-based test is best for you, as this story only demonstrates a few options among many. Tests have slight differences between them and different ways to return them. Follow your kit's instructions.

HOW TO USE A FIT TEST



1 Open up the kit. Keep it clean and dry.



Resealable Bag



Sample Tube



Biodegradable Toilet Liner

A form titled "Participant Details" with various fields for personal information, including name, address, and contact details.

Patient Details Form

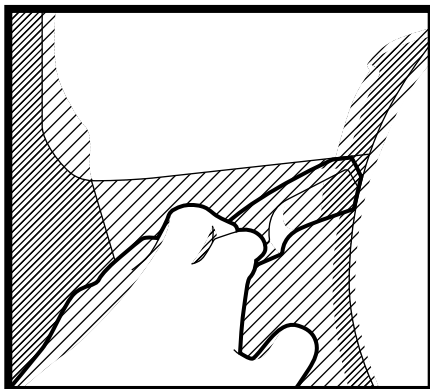


Instructions

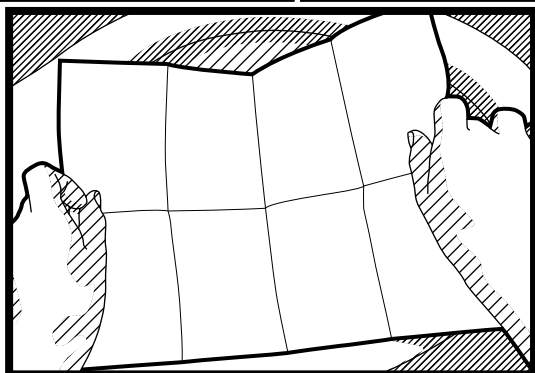
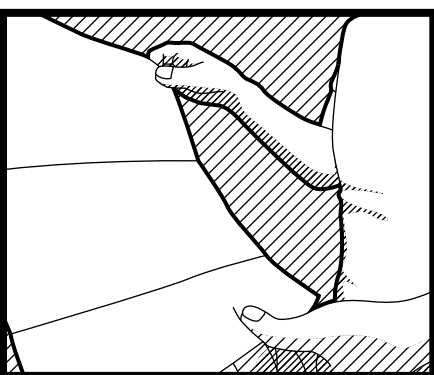
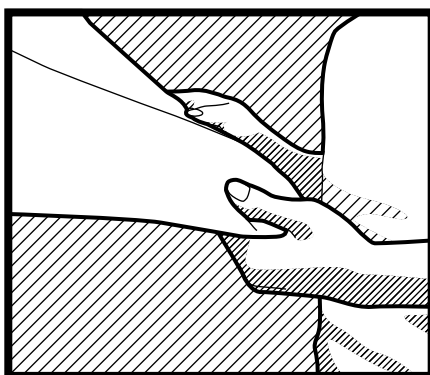


Mailing Envelope

- 2** Flush the toilet twice. If you have cleaners in your toilet bowl, remove them and flush twice.

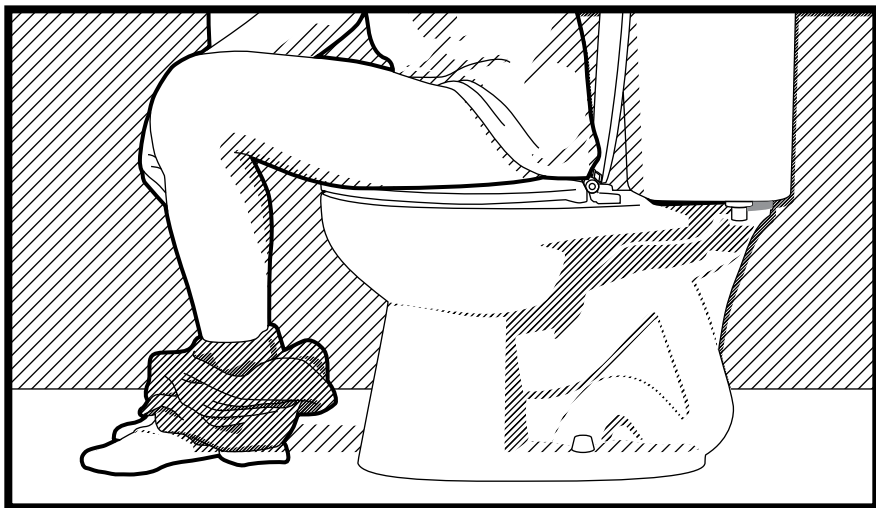


- 3** Unfold the large flushable tissue paper.
Place on the surface of the toilet water.

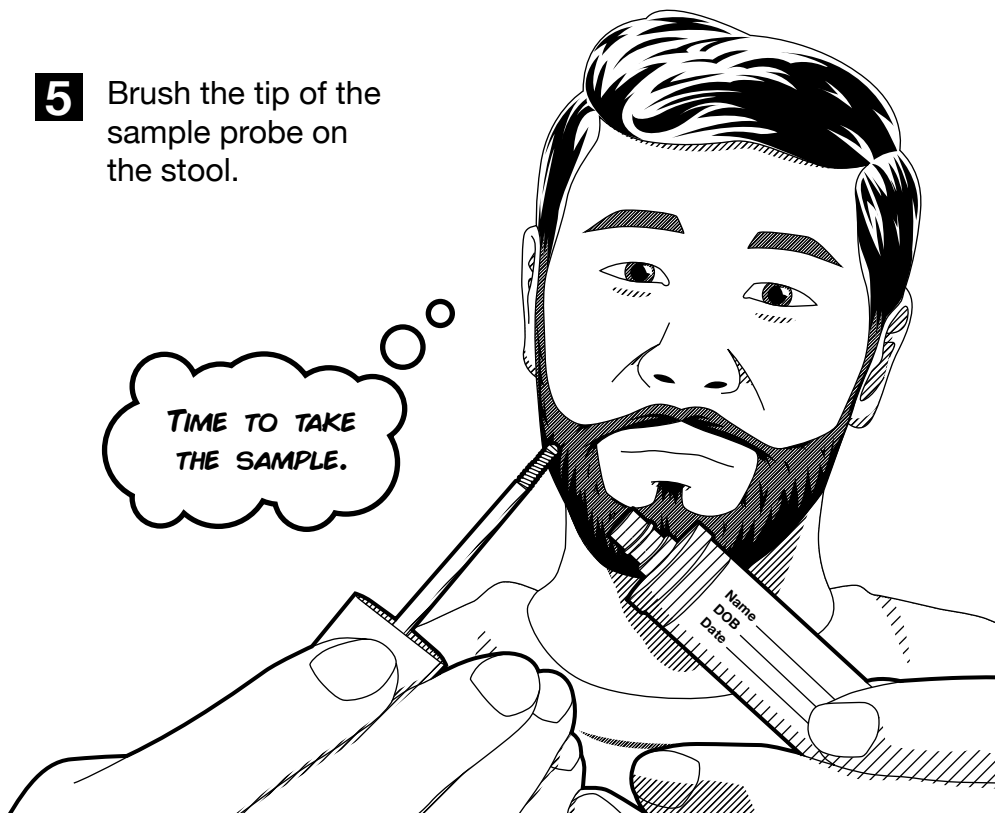


- 4** Have a bowel movement as normal. Do not flush the toilet.

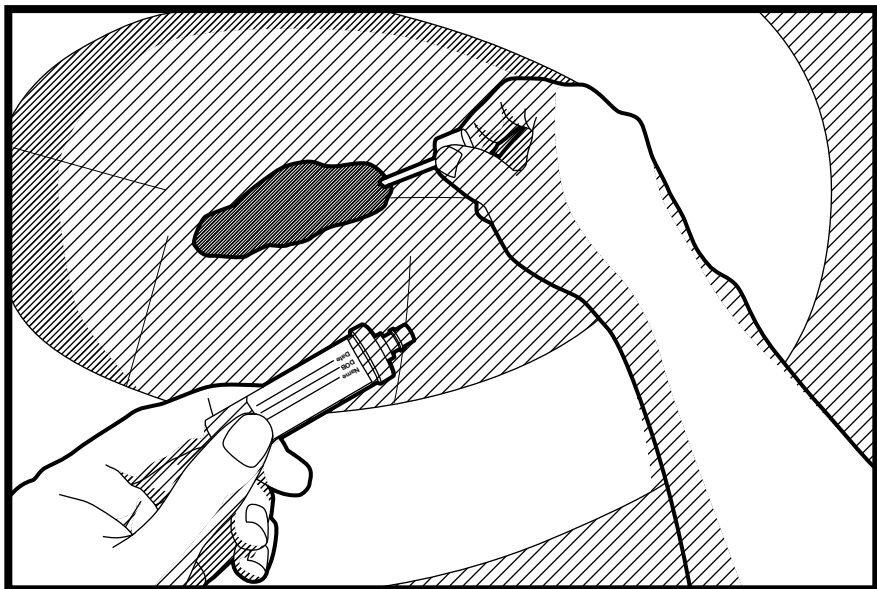
Discard your used toilet tissue, but not in the toilet bowl.



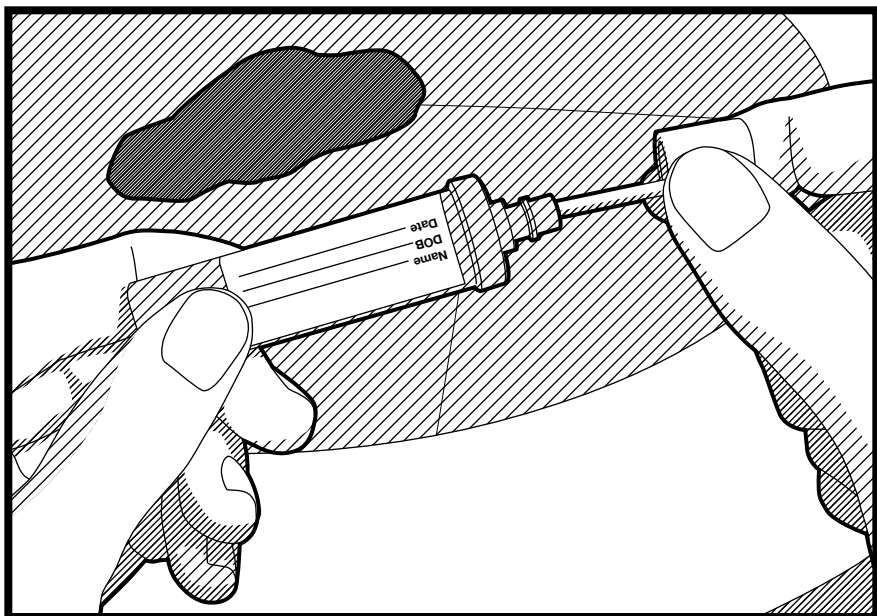
- 5** Brush the tip of the sample probe on the stool.



- 6** Do not take any large pieces of stool. Shake the probe once to remove any clumps or water droplets.

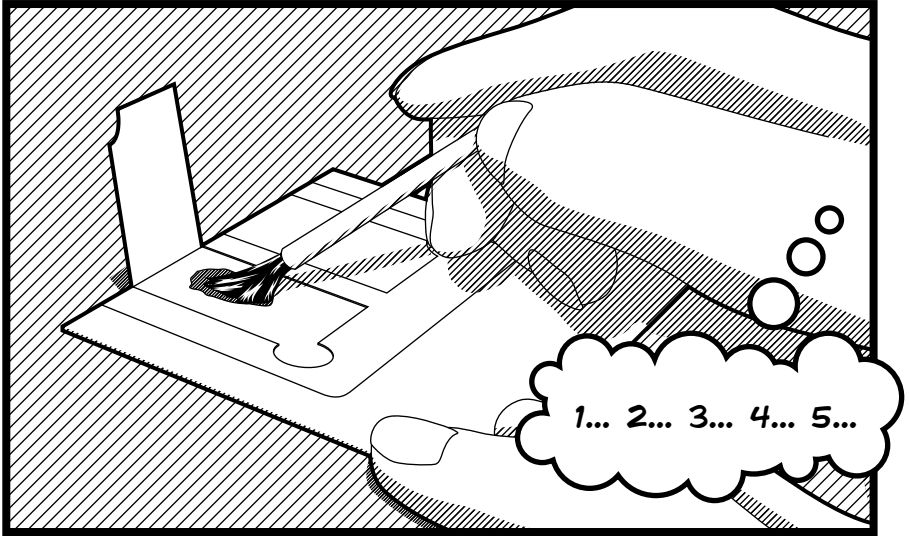


- 7** Put the probe back in the tube and close it tightly. No stool goes outside of the tube. If it does, you can wipe it off.



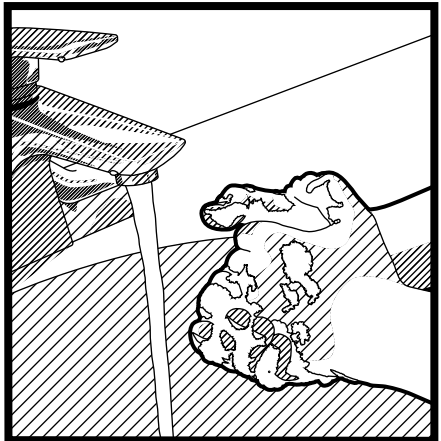
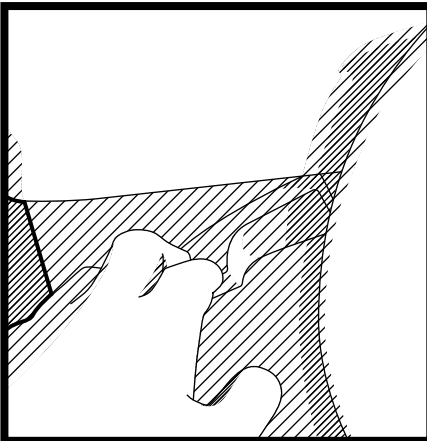
- 8** A different test kit may have a card and brush. Brush a small amount of stool sample in the box on the card. This takes about five seconds.

No stool goes outside of the box. If it does, wipe it off.

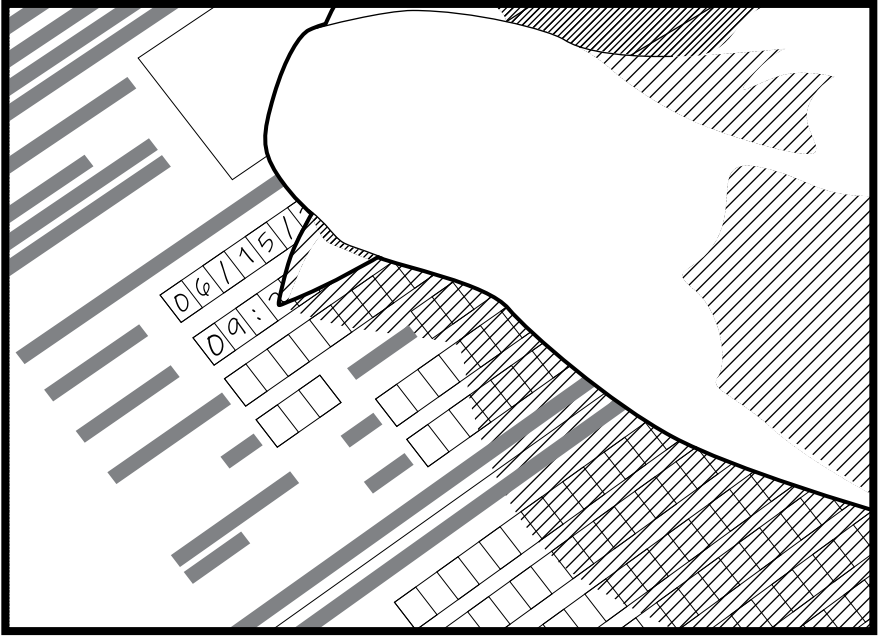


Your kit may have a second probe or brush to take a second sample. If it does, repeat taking the sample in the same way as before.

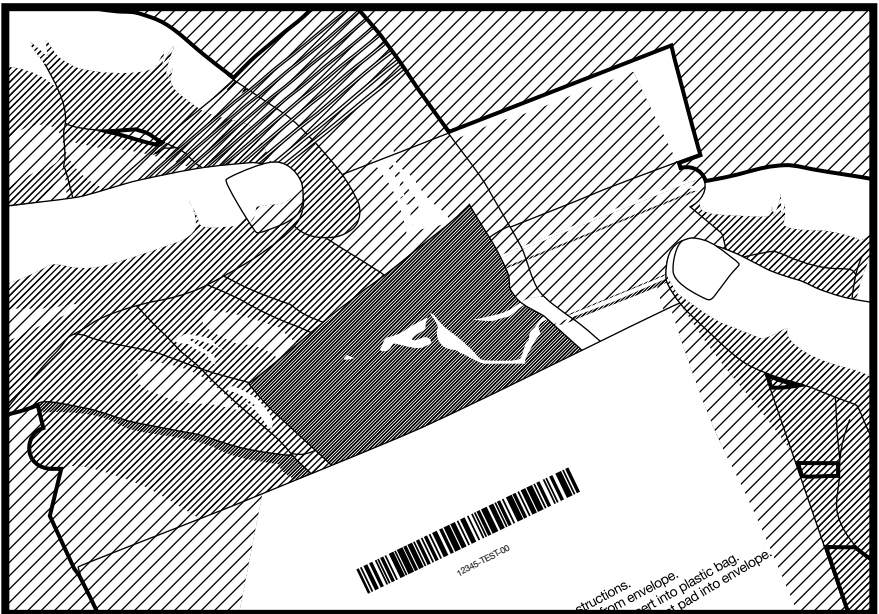
- 9** Flush the toilet. Wash your hands with soap and water for 20 seconds.



- 10** Fill out any labels or forms, including your name and the date the sample was taken.

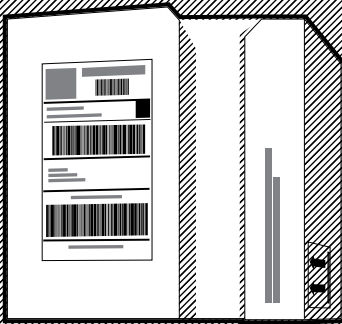


- 11** Put the sample in the envelope mailer and seal it.



HOW TO USE A FIT-DNA (COLOGUARD) TEST

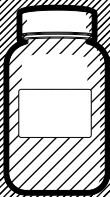
Another test type is a multi-target stool DNA test, or FIT-DNA (Cologuard). It can detect hidden blood and also changes in genes that could be colon cancer.



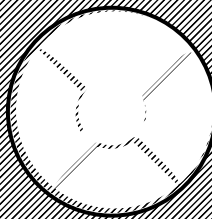
Shipment Box With Bag



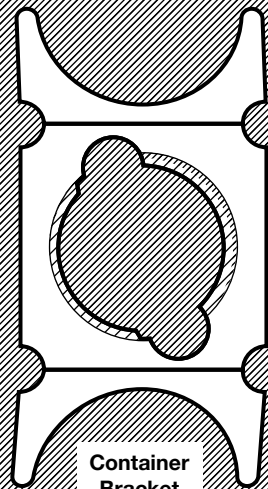
Sample Tube



Liquid
Preservative



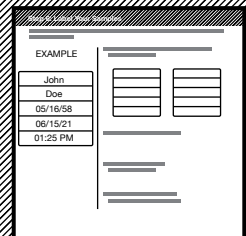
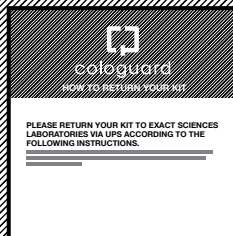
Sample
Container



Container
Bracket



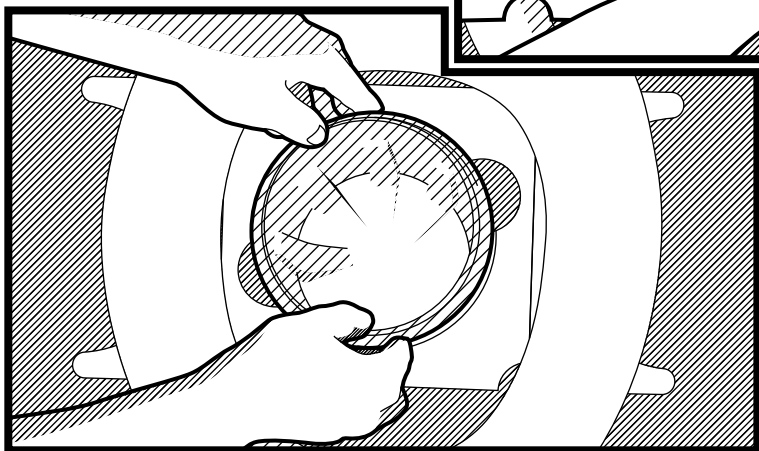
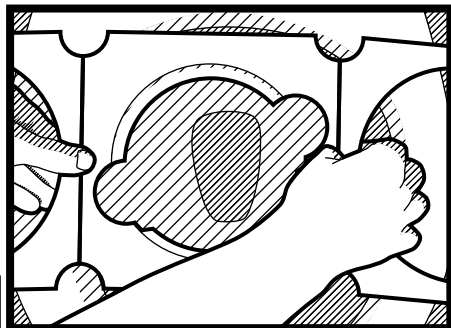
Instructional Materials



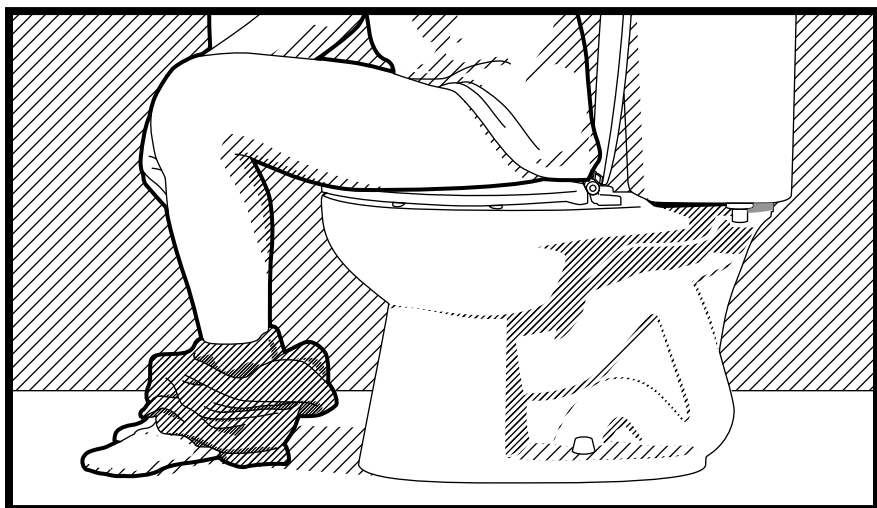
Sample Labels

Note: Keep the bag and box. You will need them to store and ship your stool sample later.

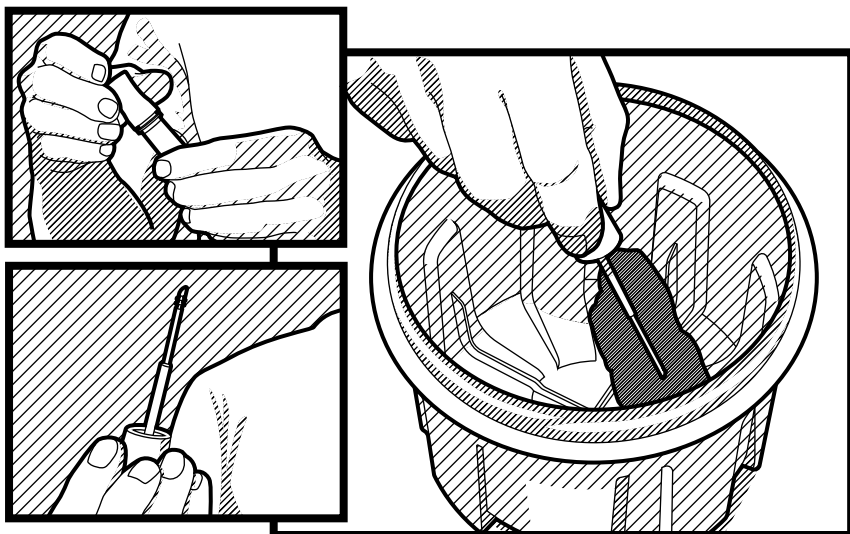
- 1** Place the bracket under the toilet seat. Put the open sample container in the bracket.



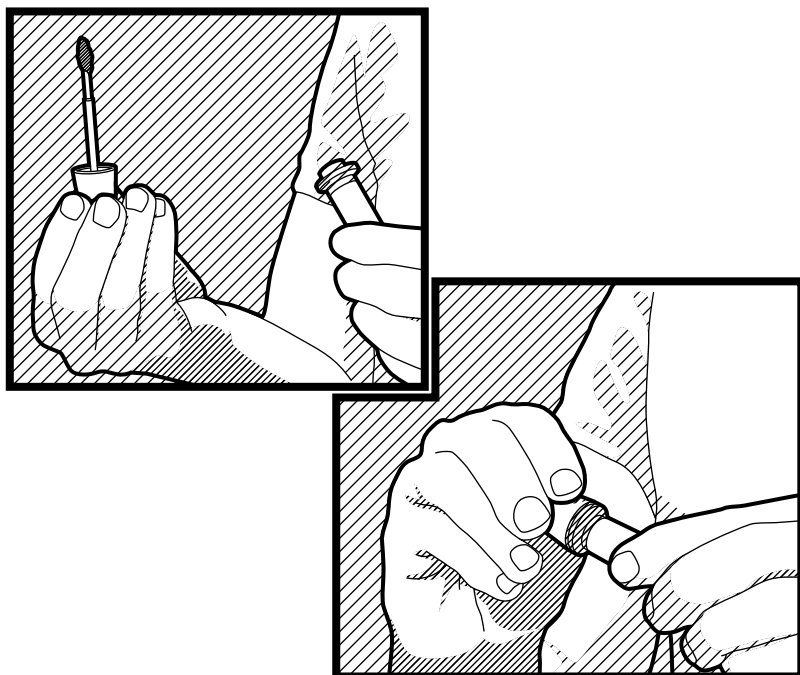
- 2** Have a bowel movement as normal.



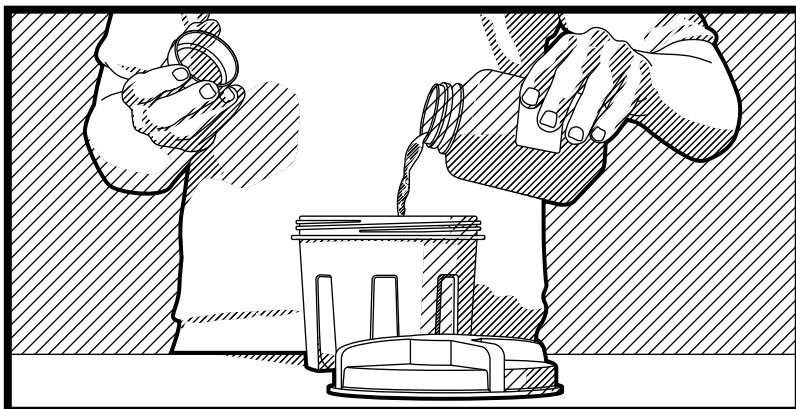
- 3** Scrape the tip of the sample probe on the stool. Make sure to cover the grooves on the end of the probe. Do not take any large clumps of stool.



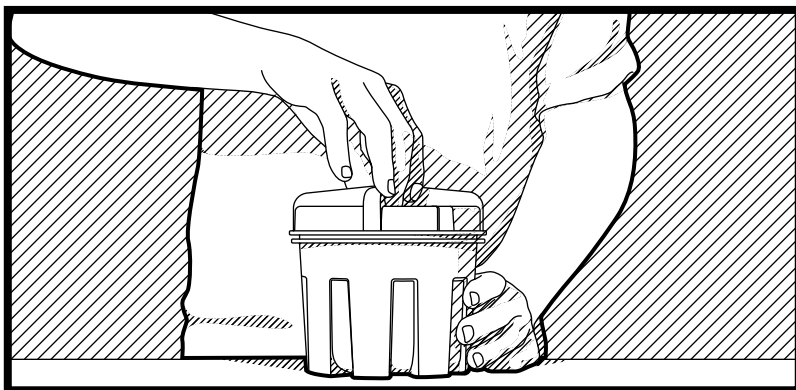
- 4** Put the probe back in the tube. Close it tightly.



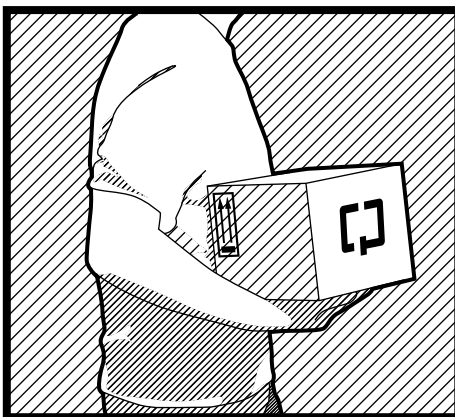
- 5** Pour the preservative into the container with the stool.



- 6** Close it tightly. No stool goes outside of the container. If it does, wipe it off.



- 7** Mail by UPS using the address indicated in the kit. You do not need to pay for postage.





THAT WAS
QUICK!

YES. THE
DIRECTIONS
WERE CLEAR.

WHEN DO
YOU HAVE TO
MAIL IT?



WITHIN 24
HOURS.

SENDING IT OUT FOR
ANALYSIS IS REALLY
IMPORTANT, SO I WANT
TO MAIL IT AS SOON
AS POSSIBLE.



LET'S GO NOW. WE
CAN GET IN SOME
EXERCISE.

OK. A WALK
ALWAYS SOUNDS
GOOD.

DID YOU KNOW
PHYSICAL ACTIVITY
CAN HELP PREVENT
COLON CANCER
TOO?

THAT WOULD
BE GOOD FOR
ALL OF US.

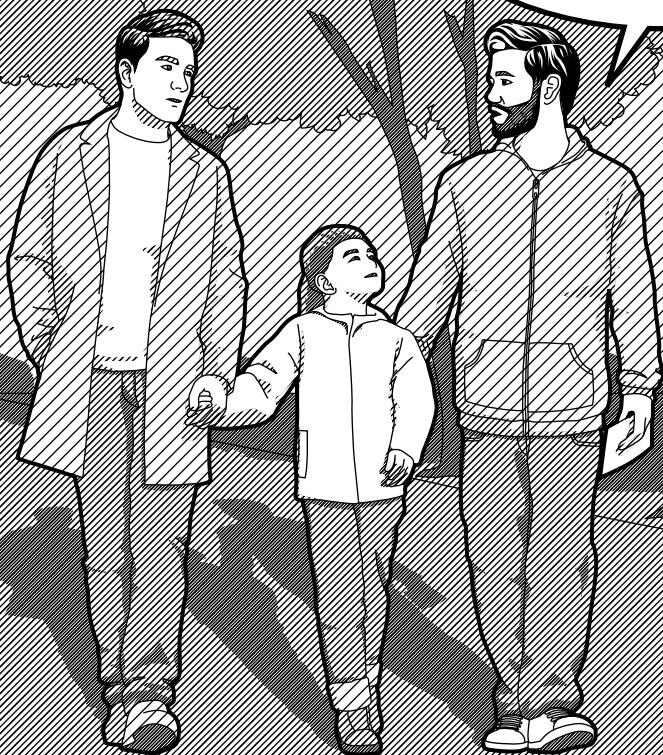




HOW WILL YOU
KNOW IF YOU HAVE
COLON CANCER OR
NOT?

IF THE TEST IS NEGATIVE,
THAT'S A SIGN THAT I DO
NOT HAVE COLON CANCER. THE
TEST CAN MISS SOME CASES,
BUT THAT IS RARE.

I STILL HAVE TO TAKE
ANOTHER TEST EVERY YEAR.
IF I USED FIT-DNA, I
WOULD REPEAT THE TEST
EVERY THREE YEARS.

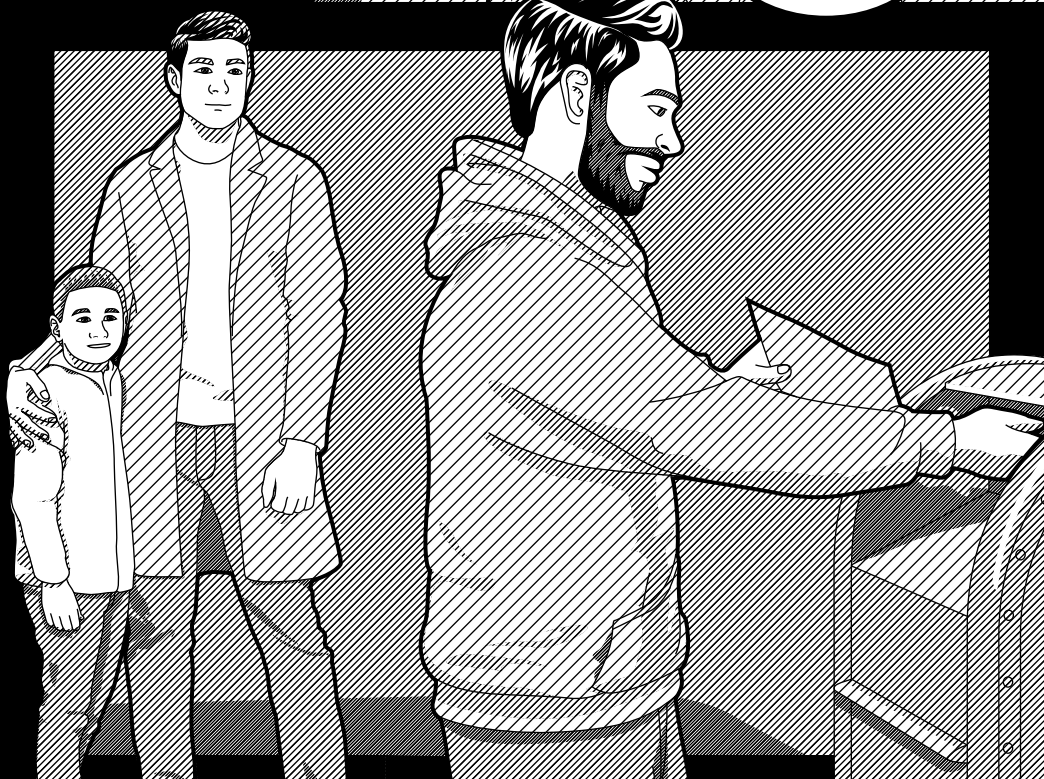
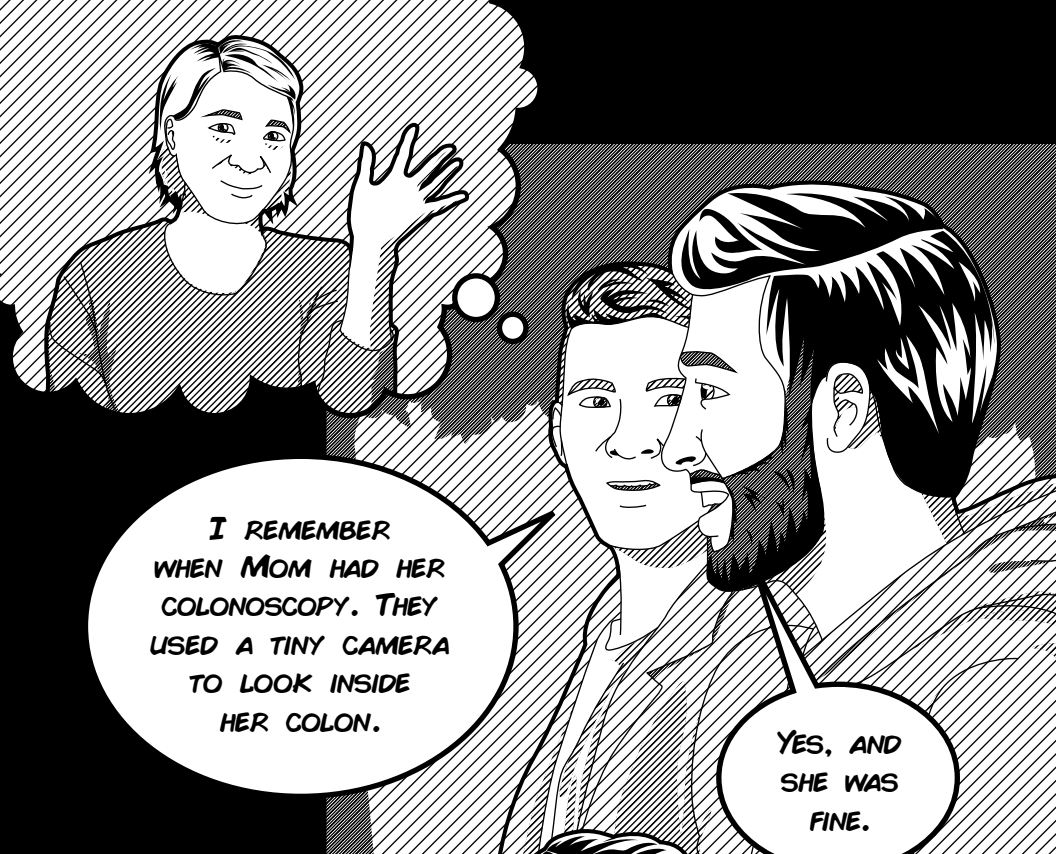


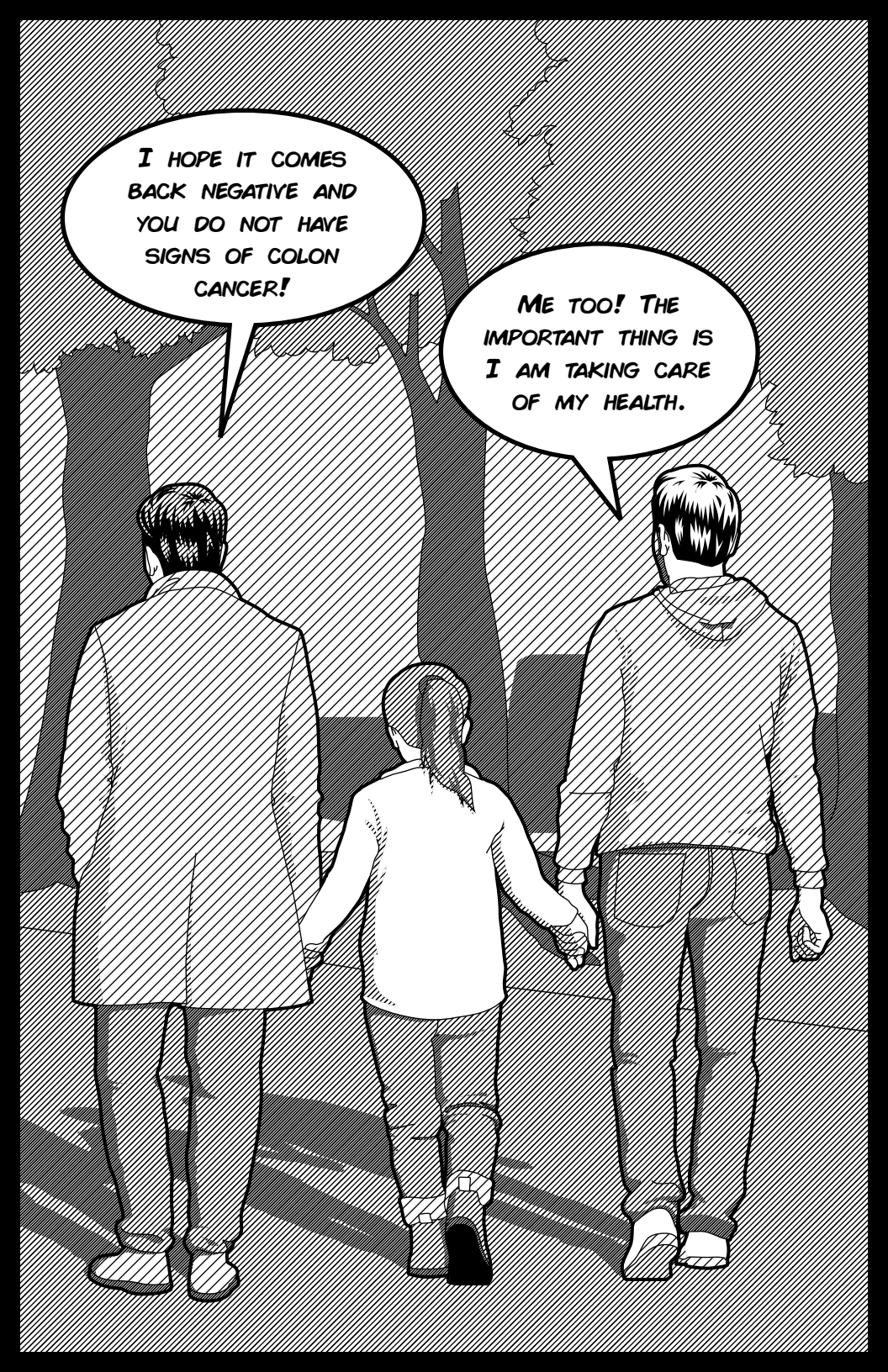


MY HEALTH CARE
PROVIDER WILL CONTACT
ME. IT CAN MEAN
CANCER IN MY COLON
OR RECTUM, OR IT CAN
MEAN SOMETHING ELSE IS
WRONG.

I WOULD THEN NEED
A COLONOSCOPY
NEXT TO FIND OUT.







I HOPE IT COMES
BACK NEGATIVE AND
YOU DO NOT HAVE
SIGNS OF COLON
CANCER!

ME TOO! THE
IMPORTANT THING IS
I AM TAKING CARE
OF MY HEALTH.

Facts About Colon Cancer Risk

Risk factors for colon cancer include:

- Being older — about 90% of cases occur in people age 50 and older*
- Having a personal or family history of colon cancer or adenomatous polyps
- Having an inherited syndrome such as Lynch syndrome or familial adenomatous polyps (FAP)

Colon cancer disproportionately affects the Black community: The risk for and rate of colon cancer is higher for African Americans. The reasons are complex but likely include the impact of structural racism, which can lead to differences in risk factors and less access to health care.

These lifestyle changes may lower your risk:

- Lowering your weight if you have overweight or obesity
- Increasing your physical activity by sitting less and moving more
- Eating fewer processed meats and more fruits and vegetables
- Drinking fewer alcoholic drinks, and not smoking

Talk to your health care provider today about your risks and screening for colon cancer. For support to quit smoking, call 866-NY-QUITS (866-697-8487).

To learn more, go to **nyc.gov/health** and search for **colon cancer**. For related stories about screening, go to **nyc.gov/health** and search for **Sandra's Story** and **Mark's Decision**.

*The NYC Department of Health and Mental Hygiene recommends that individuals without risk factors ask a health care provider about getting screened for colon cancer starting at age 45, as colon cancer cases have been increasing among individuals younger than age 50. Individuals with risk factors may need to start screening even earlier.

