Get Informed: Reduce Your Colon Cancer Risk
Reduce Your Colon Cancer Risk

What Is Colon Cancer?
Colon (or colorectal) cancer occurs in the large intestine (colon) and/or rectum. Fortunately, routine screenings can prevent it or help find it early, when treatment often works best. There are several methods of colon cancer screening. Colonoscopies allow health care providers to detect and remove polyps—or growths—from the colon or rectum to help prevent cancer. Other methods (for example, stool-based tests) require a follow-up colonoscopy for people who screen positive.

Signs and Symptoms
Symptoms of colon cancer include blood in the stool or rectum, weight loss, and diarrhea or constipation that doesn’t go away. People with colon cancer often do not show signs right away; you should get screened even if you feel healthy.
Risk Factors
You may be at an increased risk if you have:
• A family history of colon cancer or precancerous polyps
• Familial adenomatous polyposis (FAP) or hereditary nonpolyposis colorectal cancer (HNPCC), also called Lynch syndrome
• Ulcerative colitis or Crohn’s disease

If you have any of these risk factors, talk to your health care provider. You may need to start screening early.

If you do not have insurance, you may be eligible to sign up for no-cost or low-cost coverage. You can call 311 or text CoveredNYC to 877877 and receive free, in-person enrollment assistance. To learn more about no-cost or low-cost screening, visit nyc.gov/health and search for colon cancer.
There are several methods of colon cancer screening, including visual tests and stool-based tests. Tests listed below and followed by an asterisk (*) require a **timely follow-up** colonoscopy for people who screen positive.

### Visual tests
look for unusual tissue in the colon or rectum:

- Colonoscopy
- Flexible sigmoidoscopy*
- Computerized tomography (CT) colonography*

### Stool-based tests
look for signs of cancer in stool:

- Fecal immunochemical test (FIT)*
- High-sensitivity guaiac-based fecal occult blood test (HSgFOBT)*
- Multi-target stool DNA test (FIT-DNA)*

For more information about these screening options, visit [nyc.gov/health](http://nyc.gov/health) and search for colon cancer screening.
Frequently Asked Questions

When should I begin screening for colon cancer?
Talk to your provider about your risk. Most people should ask about screening starting at age 45. People at higher risk may need to begin earlier.

I feel healthy. Should I still get screened?
Colon cancer may not cause symptoms right away. Even if you feel healthy you should get screened. Finding and removing polyps early can help prevent colon cancer.

Which screening test is the best?
Each screening test has different benefits and risks. Ask your provider about your options to find out which test fits your needs.

What happens after the test?
Remember to follow up! Ask your provider when you should get your next colon cancer screening.

Will my insurance cover screening before age 50?
Most insurance plans, including Medicaid and Medicare, cover colon cancer screenings starting at age 50. Screening coverage before age 50 varies. Ask your health care provider about colon cancer risk, and check your insurance coverage before your screening test to avoid unexpected bills. There are several screening options; some may be more affordable than others.
Other Ways to Reduce Your Risk:

- Maintain a healthy weight and be physically active.
- Eat fewer processed meats (for example, bacon, hot dogs, lunch meats).
- If you smoke, make a plan to quit. For help quitting, call 311 or visit nyc.gov/health and search for NYC Quits.
- Drinking alcohol may increase your colon cancer risk. Visit nyc.gov/health and search alcohol and health for more information.

More Information

Visit nyc.gov/health and search for colon cancer.

American Cancer Society

cancer.org/cancer/colon-rectal-cancer

Centers for Disease Control and Prevention

cdc.gov/cancer/colorectal

National Cancer Institute

cancer.gov/types/colorectal

New York State Department of Health

health.ny.gov/diseases/cancer/colorectal