Risk Factors for Colon Cancer

**Highest risk factors:**
- **Being 50 or older.** About 1 in 4 people age 50 or older has colon polyps (which can develop into cancer).
- **Having a family history of colon cancer.** Having a parent or sibling with colon cancer, colon polyps, or (possibly) other cancers raises your risk.
- **Smoking.** Smokers are much more likely than non-smokers to die of colon cancer.

**Other risk factors:**
- **Not exercising.** To lower your risk, get at least 30 minutes of moderate-to-vigorous physical activity, such as a brisk walk, at least 4 days every week.
- **Being overweight.** Extra weight also puts you at risk for diabetes, heart disease, stroke, and other diseases, including colon and other cancers.
- **Eating a poor diet.** Eating a diet high in fat, sugar, and red meat, and low in whole grains, fruits, and vegetables, increases the risk of colon and other cancers.
- **Having an African-American or Ashkenazi (Eastern European) Jewish ancestry.** Of all New Yorkers, African-Americans are both the least likely to get tested for colon cancer and the most likely to die of it.
- **Having inflammatory bowel disease** (ulcerative colitis or Crohn's disease).

When you quit smoking, exercise regularly, eat a healthy diet (including 5 servings of fruits or vegetables a day), and maintain a healthy weight, you lower your risk not just for colon cancer, but also for heart disease, stroke, and other cancers.
 Colon cancer kills 1,500 New Yorkers a year.

But the disease can almost always be prevented or cured if found early.

There are usually no symptoms. The only way to know whether you have colon cancer is to get checked.

Colonoscopy is the best test for colon cancer – and the only one that can prevent it.

What Is Colonoscopy?
Colonoscopy tests for — and can also prevent — colon cancer. During the test, the doctor can remove polyps — small growths that may develop into cancer if left alone.

- Colonoscopy is the most effective test.
- It examines the entire colon.
- Colonoscopy is the only test that can also prevent cancer — because the doctor can remove polyps before they turn into cancer.
- Colonoscopy is safe. The risk of serious complications is less than 1 in 1,000.

While there may be some discomfort, colonoscopy is usually painless. Patients may be sedated with medication. Before the colonoscopy, your doctor will ask you to take a preparation to empty the colon.

Most people need a colonoscopy only once every 10 years.

Who Should Get a Colonoscopy?

- Everyone 50 and older. About 1 in 4 people age 50 and older has colon polyps (which can develop into cancer).
- People with a family history of colon cancer. Colonoscopy is recommended before age 50 for people with a family history of the disease.
  If a parent or sibling has had colon cancer, talk to your doctor about when and how often you should get a colonoscopy.

There are other risks for colon cancer (see Risk Factors in this brochure).
Your doctor may also recommend colonoscopy because of other risks for colon cancer or other health problems you have.

Any Test Is Better Than None
There are several tests for colon cancer. While colonoscopy is the most effective, and the only one that prevents cancer, any test is much better than none! Positive results from any other test should always be followed up with colonoscopy.

Other tests for colon cancer:
A fecal occult blood test (FOBT) is done at home. It is an acceptable test for people who are not at high risk for colon cancer. You smear some stool on a card on 3 separate days, and send it to a doctor or laboratory. The laboratory checks for hidden (occult) blood. FOBT should be done every year.

Sigmoidoscopy is similar to colonoscopy — with several differences. The doctor looks at less than half of the colon. Because sigmoidoscopy does not remove polyps, it can’t prevent cancer like colonoscopy. Sigmoidoscopy should be done every 5 years.

A barium enema X-ray uses a chalky substance given as an enema, followed by a series of X-rays. This test should be done every 5 years.

Other tests for colon cancer are being studied to see how effective they are. One uses a C.T. scanner to X-ray the colon (“virtual” colonoscopy). As new tests come along, your doctor can tell you if any of them might be right for you.

Talk to Your Doctor
Talk to your doctor about colonoscopy. Or call 311 for information.

If you’re 50 or older and your doctor hasn’t recommended colonoscopy, ask why.

Colonoscopy is covered by most insurance plans, including Medicare and Medicaid.