

Screening for Colorectal Cancer

What You Should Know About Sigmoidoscopy



WHAT IS COLORECTAL CANCER?

Colorectal cancer is a malignant tumor of the bowel. It is the third most common cancer, for both men and women, and the second leading cause of cancer deaths. In many cases, it can be prevented. If caught early, it can be cured.

WHY IS COLON SCREENING NECESSARY?

Sigmoidoscopy is an effective procedure for the early detection and prevention of colorectal cancer. Most colorectal cancers begin as polyps, which can grow and degenerate into cancer. These can be prevented by removing the pre-cancerous growths.

A small percentage of cancers do not begin as polyps. Although these cancers cannot be prevented, but can often be found early for cure.

HOW IS SIGMOIDOSCOPY PERFORMED?

The procedure is performed in your doctor's office. Laxatives and/or enemas will be prescribed for you to take at home. By using a flexible fiber optic scope designed to bend and turn with your bowel, the doctor can identify the presence of polyps or cancers.

WHAT DOES IT FEEL LIKE?

In order to see, a small amount of air is placed into your bowel. You will feel bloated, like you have to have a bowel movement. The scope itself bends and turns with your bowel.

If you have pain or discomfort, let your physician know. The sigmoidoscope can be repositioned and air can be drawn out to make you more comfortable.

WHAT IS THE PROPER SCREENING PROGRAM?

The American Cancer Society offers three different screening programs.

1. Sigmoidoscopy every 5 years, with Stool Cards every year.

Sigmoidoscopy checks the lower portion of the colon (It's like having a Mammogram of only one side). In order to check the upper colon, stool cards are used to search for silent bleeding, which can occur with polyps and cancer.

2. Sigmoidoscopy and Air Contrast Barium Enema X-rays every 5-10 years.

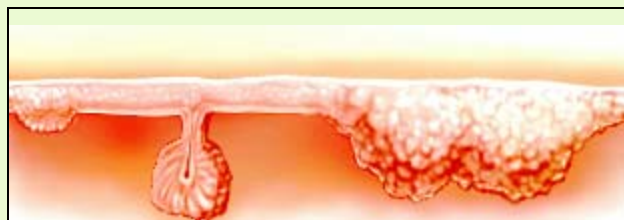
3. Colonoscopy every 10 years.

Each program has advantages and disadvantages. You will need to discuss the program best suited to your needs with your physician.

CAN THERE BE COMPLICATIONS?

Complications of sigmoidoscopy are very uncommon. They can include, but are not limited to, bleeding and perforation.

Polyp-to-Cancer Sequence



Small Polyp -----> Growing Polyp -----> Cancer

Return for exam in ____ weeks

Re-evaluation

Colonoscopy

Flexible Sigmoidoscopy

Follow-up only if symptoms persist

This fact sheet is for use by physicians only and is not intended to be a substitute for professional medical advice, diagnosis or treatment. All specific medical questions or concerns should be presented to your own healthcare provider.