

colon cancer



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Are you 50 years or older?

Time to get screened for colon cancer...

Rectal bleeding, change of bowel habits, abdominal pain?

Please feel free to call our office for an appointment or visit our website cdhhsv.com. We are happy to help with questions, concerns, and screenings.

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“An ounce of prevention is worth a pound of cure”

– Benjamin Franklin, 1736

Franklin’s famous quote originally was addressing fire safety, however it has been adopted by most as a reference to health care. The goal of preventive medicine is to avoid an undesirable outcome from happening rather than treating an illness once it has happened. A little prevention is worth a pound of cure. Keeping a problem from happening is much better than fixing one.

We live in a busy society. We are saturated with family, careers, always somewhere to be and the to-do list is never ending. We are challenged to find time for taking care of ourselves. It seems like there is always an appointment, a child’s function, a deadline at work or a family obligation that competes with time we need to care for ourselves. However, if we don’t take the time to invest in our own health (an ounce of prevention) then we may be faced with a burdensome diagnosis (requiring a pound of cure).

March is Colon Cancer awareness month. Colorectal cancer (or just colon cancer) is a cancer that occurs in the large intestine. Colon cancer is one of the most preventable types of cancer. There are currently more than one million colon cancer survivors in the United States. Most of us know someone that has been diagnosed or affected by colon cancer. Colon cancer affects men and women equally. Ninety percent of colon cancer occurs in people over age 50, the risk does increase with age.

The National Cancer Institute reports colon cancer is the 2nd leading cause of cancer deaths in men and women in the United States. The lifetime risk of getting colon cancer, according to the Colon Cancer Alliance, is 5% or 1 out of 20 persons. The American Cancer Society estimated 136,830 new cases of colon cancer in the U.S. were diagnosed in 2014.

Who is at risk? Anybody age 50 or over is at “Average Risk”. People with a personal history of colon polyps or colon cancer, inflammatory bowel disease such as ulcerative colitis or Crohn’s disease, a genetic condition such as familial adenomatous polyposis or a first degree relative (parent or sibling) with a history of colon cancer are considered at “High Risk” for colon cancer.

The U.S. Preventive Services Task Force report of 2016 recommends colon cancer screening for average risk individuals beginning at age 50 years and continuing until age 75. The decision to screen for colon cancer in adults age 76 to 85 years should be an individual one, taking into account the patient’s overall health and prior screening history. The American College of Gastroenterology reports the development of 90 percent of colon cancer can be avoided through early detection and removal of precancerous polyps.

The risk and benefits of different colon cancer screening methods vary. Alternative methods include flexible sigmoidoscopy, stool based test (Hemoccult, FIT, Cologuard), ACBE and CT Colonography. The decision on which screening method is best can be made between you and your health care provider. The American College of Gastroenterology Practice Guidelines of 2009 recommend colonoscopy as the preferred colon cancer prevention method. This screening should occur every 10 years for average risk individuals.

Colonoscopy is a comprehensive method to examine the entire colon. It is performed by a health care provider who has been specially trained in performing colonoscopies. A colonoscopy is usually an outpatient procedure performed under sedation that takes less than 30 minutes. During a colonoscopy, the health care provider examines the colon looking for polyps or other abnormalities of the colon with an endoscope. A colon polyp is a growth on the lining of the large intestines. Colon polyps can be the forerunner to colon cancer and are therefore removed when found during the colonoscopy. Often there are no obvious symptoms when colon cancer or colon polyps are detected during a screening colonoscopy. A colonoscopy can detect and remove polyps before they develop into cancer. In addition, colon cancer detection at an early stage leads to better outcomes. Remember, “An ounce of prevention is worth a pound of cure”.

Warning signs and symptoms of colon cancer are rectal bleeding, change of bowel habits and unexplained abdominal pain. These would be symptoms that would warrant a diagnostic evaluation. A common scenario we see in our office is a person with signs and symptoms they assume are “nothing” but are actually from a serious medical condition.

The interval between surveillance colonoscopies is dependent on the results of your prior colonoscopies. Surveillance colonoscopy intervals are based on the number, size and character of the colon polyps found on a prior exam. If you are unfortunate enough to be diagnosed with colon cancer at the time of your colonoscopy, do not despair. Earlier stages of colon cancer are very curable and currently most colon surgeries can be performed laparoscopically. Our office has witnessed several success stories thru early detection. When a patient returns to our office and recognizes how their colonoscopy saved their life, we celebrate together.

Getting cancer screening is an investment in your health. All adults should discuss with their health care provider appropriate timing and age of all cancer screenings. Cancer screening is recommended for breast, cervical, colon and lung cancers by the U.S. Preventive Services Task Force in 2016.

Take the time for yourself and get screened for cancer. Early detection saves lives and may shorten a treatment plan compared to cancers detected at later stages. The short time it takes to be screened for cancer is a wise investment toward longevity.