

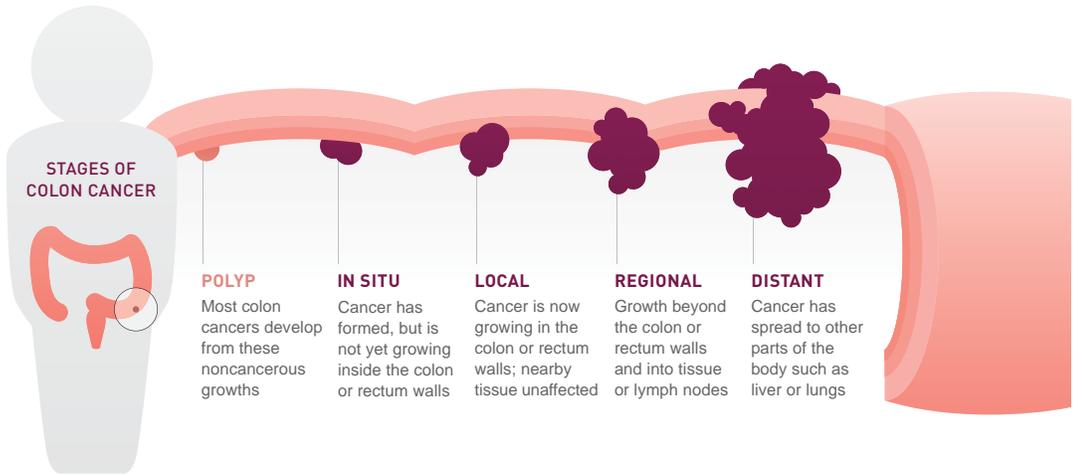
Despite substantial decreases in colon cancer death rates over the past two decades, it remains the third-deadliest cancer in the United States among both men and women. Routine screening can prevent colon cancer or find it at an early, treatable stage. If it's found and treated early, however, the 5-year survival rate is about 90%. Many more lives could be saved by understanding colon cancer risks, increasing screening rates and making lifestyle changes.



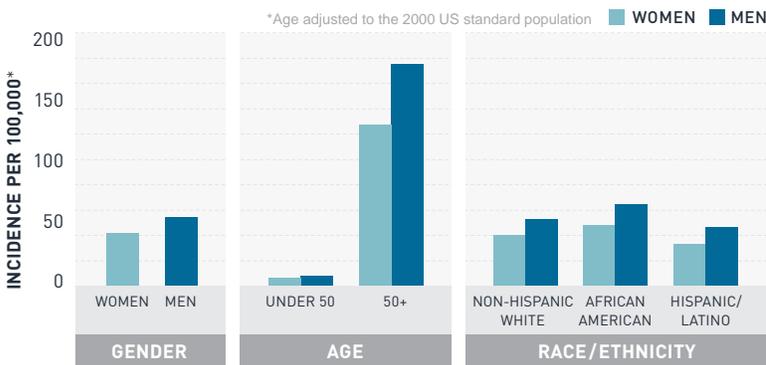
90%
5-YEAR SURVIVAL RATE
IF FOUND AT THE LOCAL STAGE



40%
DIAGNOSED AT AN EARLY STAGE
PARTLY DUE TO LOW SCREENING RATE



ANYONE CAN GET COLON CANCER, BUT SOME ARE AT INCREASED RISK



2011-2013 Colorectal Cancer Facts & Figures

REDUCE RISK BY MANAGING DIET, WEIGHT AND PHYSICAL ACTIVITY



IF YOU'RE 50 OR OLDER,* TALK TO YOUR DOCTOR ABOUT GETTING TESTED

TYPE OF SCREENING TEST	PROS	CONS
Flexible Sigmoidoscopy Slender tube inserted through the rectum into the colon. Provides visual exam of rectum and lower 1/3 of colon.	Fairly quick and safe; Sedation usually not used; Does not require a specialist	Doesn't view upper 2/3 of colon; Can't remove all polyps; May be some discomfort
Colonoscopy Direct exam of colon and rectum. Polyps removed if present. Required for abnormal results from other tests.	Can usually view entire colon; Can biopsy and remove polyps; Done every 10 years	Costs more than other tests; Higher risk than other tests; Full bowel preparation needed
Double-Contrast Barium Enema Radiological exam of colon. Barium sulfate is introduced through the rectum and spreads throughout the colon.	Can usually view entire colon; Relatively safe; No sedation needed	Can miss small polyps; Can't remove polyps during test; Full bowel preparation needed
CT Colonography Detailed, cross-sectional, 2D or 3D views of the colon and rectum with an x-ray machine linked to a computer.	Fairly quick and safe; Can usually view entire colon; No sedation needed	Still fairly new test; Can't remove polyps during test; Full bowel preparation needed
Fecal Occult Blood Test / Fecal Immunochemical Test Can detect blood in stool caused by tumors or polyps. At-home kit is obtained from a health care provider.	No direct risk to the colon; No bowel preparation; Sampling done at home	Colonoscopy needed if abnormal; May miss some polyps/cancers; Should be done yearly

*For average-risk individuals with no symptoms, screening should begin at age 50. If you are at increased risk or are experiencing symptoms, speak to your doctor right away. Symptoms include: Rectal bleeding, blood in the stool, dark- or black-colored stools, change in shape of stool, lower stomach cramping, unnecessary urge to have a bowel movement, prolonged constipation or diarrhea, and unintentional weight loss.

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