

Technology advances help to prevent, lessen impact of colon cancer

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Approximately 140,000 people are diagnosed with colorectal cancer in the U.S. each year. March is Colorectal Cancer Awareness Month.

Affecting the colon - also known as the large intestine - or rectum, [colorectal cancer](#) is the second leading cause of cancer-related deaths in men and the third leading cause in women in the U.S. According to the American Cancer Society, about 50,000 people die every day from colon cancer.

Age is the biggest risk factor for colon cancer. Most patients are diagnosed over age 50 - followed by a family history of [colon polyps](#) or colon cancer, particularly in a first-degree relative, such as a parent or sibling.

In almost all cases, polyps - also known as colorectal adenomas - are a precursor to colorectal cancer. "While not everyone has polyps, your risk of colon cancer is increased if you have polyps," says Dr. Victoria Gomez, a Mayo Clinic gastroenterologist.

African-Americans are also at greater risk of developing colorectal cancer at a younger age, and certain lifestyle factors can increase a person's risk of developing the disease.

"Studies have shown that, for example, diabetes, obesity, smoking and alcohol abuse have all been shown to potentially increase the risk of [colon cancer](#)," adds Gomez.

In the earliest stages, people with colorectal cancer may not have any signs or symptoms. However, early signs and symptoms can include blood in the stool, unexplained weight loss and abdominal pain.

SCREENING FOR PREVENTION

Early detection through screening is critical to remove pre-cancerous lesions and to increase

survival odds, says Mayo Clinic gastroenterologist Dr. Michael Wallace.

"Thanks to universal screening recommendations and the availability of more screening options, colorectal cancer is more often being caught earlier," Wallace says.

Colonoscopy is the most common screening procedure available and recommended at least once every eight to 10 years for adults over 50. Though biopsies are often taken during the procedure, Wallace says advances in technology now mean doctors can more easily identify and remove [precancerous lesions](#), so patients can avoid unnecessary surgery.

"In the past 10 years, advances in technology have given us the ability to perform [endoscopic mucosal resection](#), where we remove suspicious polyps or precancerous lesions without additional surgery, at the time of colonoscopy. This is particularly relevant for patients found to have large [polyps](#), who were previously recommended to have portions of their bowel removed," Wallace explains.

In addition to colonoscopy, patients can take advantage of a virtual colonoscopy using a CT scan or a stool DNA test called Cologuard, which was co-invented by Mayo Clinic gastroenterologist Dr. David Ahlquist.

Regardless of which test is selected, "at the end of the day, the most important thing is for you to have a good conversation with your health care provider and be screened," says Gomez.

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