



Understanding Colorectal Cancer:

Colorectal cancer, also called colon cancer, is a type of cancer that starts in the colon (large intestine) or rectum and usually develops slowly.¹ Small growths called polyps may appear on the inner lining of the colon or rectum. Polyps are common and usually noncancerous, but certain types can become precancerous, meaning they have the potential to turn into cancer over time if not removed.¹ Because colorectal cancer often develops from these precancerous polyps, screening is essential. The earlier colorectal cancer is found, the more treatable it is.⁵

Common Symptoms to Watch For:

Colorectal cancer often has no signs or symptoms in the early stages, which is why regular screening is so important.¹

If you notice any of the following signs, talk to your healthcare provider right away:

- Changes in bowel habits (like diarrhea or constipation lasting more than a few days)
- Feeling like your bowel doesn't empty completely
- Blood in your stool
- Stomach pain or cramps
- Feeling unusually tired or weak
- Unexpected weight loss

Who is at Risk?

Colon cancer can affect all races, genders, and ethnicities, but some factors may increase your risk¹ :

- Being older (risk increases with age)
- A family history of colorectal cancer
- Inherited genetic conditions
- Drinking heavily
- Smoking
- Obesity
- Eating a lot of red or processed meats
- Diet low in fiber, fruits, and vegetables
- Physical inactivity/sedentary lifestyle
- Diabetes
- Inflammatory Bowel Disease

Even if you don't have these risk factors, screening is still important.¹

Learn more by visiting <https://www.cancer.org/cancer/colon-rectal-cancer/about.html>

Why Screening Is Important:

- The American Cancer Society recommends that average-risk adults 45 years of age and older be screened regularly for colorectal cancer.²
- Colorectal cancer is often considered one of the most preventable—but least prevented—cancers.³
- About 75% of people with colorectal cancer have no family history.³
- When detected early, 90% of cases are treatable.⁵

Talk to your healthcare provider about the best screening option for you.

Colorectal Cancer Screening Options

	Colonoscopy (visual exam)	Multitarget stool DNA test (Cologuard®)	FIT/FOBT (fecal immunochemical test/ fecal occult blood test)
How does it work?	Uses a scope to look for & remove abnormal growths in the colon/rectum	Detects abnormal DNA and/or blood in the stool sample	Detects blood in the stool sample
Whom is it for?	Adults at high or average risk	Adults 45 years of age and older at average risk	Adults at average risk
How often?	Every 10 years (for high-risk adults testing needs may be more frequent)	Every (3-6) years	Once a year
Non-invasive?	No	Yes, used at home	Yes, used at home
Prep required?	Yes: full bowel prep, including fasting and laxatives	No	FIT-no prep/ changes in diet or medications. FOBT- requires changes to diet or medication
Time it takes?	(1-2) days for bowel prep and procedure	The time it takes to collect a sample	The time it takes to collect a sample
Covered by insurance?§	Covered by most insurers	Covered by most insurers	Covered by most insurers
After a positive test?	Polyps removed and examined (biopsy)	Follow-up with timely colonoscopy	Follow-up with timely colonoscopy

§Insurance coverage can vary; only your insurer can confirm how colorectal cancer screening would be covered under your insurance policy.

Note: Table adapted from *There are Choices When it Comes to CRC Screening*, Exact Sciences Corporation, 2022. For more information and references, visit www.Cologuard.com or refer to crc-screening-options-overview.pdf