

Colorectal Cancer Screening Preparing for your procedure

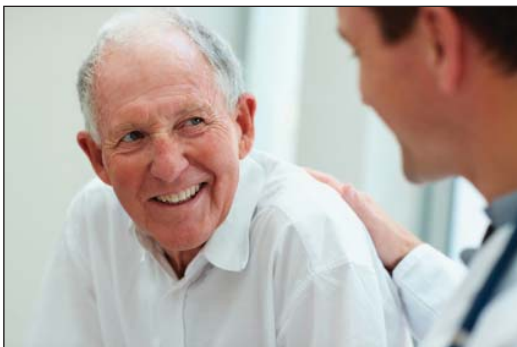
The following information is adapted from *Can colorectal polyps and cancer be found early?* by the American Cancer Society (2010).

Fecal occult blood test (FOBT)

Before the test. Some foods or drugs can affect the test, so your doctor may suggest that you avoid the following before this test:

- non-steroidal anti-inflammatory drugs (NSAIDs) like ibuprofen (Advil), naproxen (Aleve), or aspirin (more than 1 adult aspirin per day) for 7 days before testing. (They can cause bleeding, which can lead to a false-positive result.) Acetaminophen (Tylenol) can be taken as needed.
- Vitamin C in excess of 250 mg daily from either supplements or citrus fruits and juices for 3 days before testing. (It can affect the chemicals in the test and make it appear negative, even when blood is present.)
- red meats (beef, lamb, or liver) for 3 days before testing (Components of blood in the meat may cause the test to show positive.)

Some people who are given the test never do it or don't give it to their doctor because they worry that something they ate may interfere with the test. For this reason, many doctors tell their patients it isn't essential to follow any restrictions in their diet. The most important thing is to get the test done. People should try to avoid taking aspirin or related drugs for minor aches. But if you take these medicines daily for heart problems or other conditions, don't stop them for this test without talking to your doctor first.



Collecting the samples. Have all of your supplies ready and in one place. Supplies will include a test kit, test cards, either a brush or wooden applicator, and a mailing envelope. The kit will give you detailed instructions on how to collect the specimen.

Follow-up. If this test finds blood, a colonoscopy will be needed to look for the source. It is not sufficient to simply repeat the FOBT or follow up with other types of tests.

Fecal immunochemical test (FIT)

Before the test. The FIT is done essentially the same way as the FOBT, but some people may find it easier to use because there are no drug or dietary restrictions (vitamins or foods do not affect the FIT), and sample collection may take less effort. This test is also less likely to react to bleeding from parts of the upper digestive tract, such as the stomach.

Collecting the samples. Have all of your supplies ready and in one place. Supplies will include a test kit, test cards, long brushes, waste bags, and a mailing envelope. The kit will give you detailed instructions on how to collect the specimen.

Follow-up. The FIT, like the FOBT, may not detect a tumor that is not bleeding, so multiple stool samples should be tested. And if the results are positive for hidden blood, a colonoscopy is required to investigate further. To be beneficial, the test must be repeated every year.

Stool DNA tests

Before the test. The stool DNA test is not invasive and doesn't require any special preparation.

Collecting the samples. People having this test will receive a kit with detailed instructions from their doctor's office or clinic on how to collect the specimen. Always follow the instructions on your kit.

This test requires an entire stool sample. It is obtained using a special container, which is placed in a bracket that stretches across the seat of the toilet. You have

your bowel movement while sitting on the toilet, making sure it goes into the container. You then place the container and an ice pack in a shipping box and close and label the box. The specimen must be shipped to the lab within 24 hours of having the bowel movement.

Follow-up. Like other stool tests, if the results are positive, a colonoscopy will need to be done.

Sigmoidoscopy

Before the test. You will need to have a bowel preparation to clean out your lower colon. The colon and rectum must be empty and clean so your doctor can view the lining of the sigmoid colon and rectum. Your doctor will give you specific instructions to follow. You may be asked to follow a special diet (such as drinking only clear liquids) for a day before the exam. You may also be asked to use enemas or to use strong laxatives to clean out your colon before the exam. Be sure your doctor is aware of any medicines you are taking, as you may need to change how you take them before the test.

During the test. A sigmoidoscopy usually takes 10 to 20 minutes. Most people do not need to be sedated for this test, but this may be an option you can discuss with your doctor. Sedation may make the test less uncomfortable, but it requires some time to recover from, as well as having someone with you to take you home after the test.

Possible complications and side effects. This test may be uncomfortable because air is put into the colon, but it should not be painful. Be sure to let your doctor know if you feel pain during the procedure. You may see a small amount of blood in your first bowel movement after the test. Significant bleeding and puncture of the colon are possible complications, but they are very uncommon.

Colonoscopy

Colonoscopy may be done in a hospital outpatient department, in a clinic, or in a doctor's office.

Before the test. Be sure your doctor is aware of any medicines you are taking, as you may need to change how you take them before the test. The colon and rectum must be empty and clean so your doctor can view their inner linings during the test. You will need to take laxatives (liquids, pills, or both) the day before the test and possibly an enema that morning. Your doctor will give you specific instructions. It is important to read these instructions carefully a few days ahead of time, since you may need to shop for

special supplies and get laxatives from a pharmacy. If you are not sure about any of the instructions, call the doctor's office and go over them step-by-step with the nurse. Many people consider the bowel preparation to be the most unpleasant part of the test, as it usually requires you to be in the bathroom quite a bit.

You may be given other instructions as well. For example, your doctor may tell you to drink only clear liquids (water, apple or cranberry juice, and any gelatin except red or purple) for a day or two before the exam. Plain tea or coffee with sugar is usually okay, but no milk or creamer is allowed. Clear broth, ginger ale, and most soft drinks or sports drinks are usually allowed unless they have red or purple food colorings, which could be mistaken for blood in the colon.

You will likely also be told not to eat or drink anything after midnight the night before your test. If you normally take prescription medicines in the mornings, talk with your doctor or nurse about how to manage them for the day.

You may need to arrange for someone to drive you home from the test because the sedative used during the test can affect your ability to drive. Depending on the medicines that are used, some doctors require that someone drive you home.

During the test. The test itself usually takes about 30 minutes, but it may take longer if a polyp is found and removed. Before the colonoscopy begins, you will be given a sedating medicine (usually through your vein) to make you feel comfortable and sleepy during the procedure. You will probably be awake, but you may not be aware of what is going on and may not remember the procedure afterward. Most people will be fully awake by the time they get home from the test.

Possible side effects and complications. The bowel preparation before the test can be unpleasant. The test itself may be uncomfortable, but the sedative usually helps with this, and most people feel normal once the effects of the sedative wear off. Some people may have gas pains or cramping for a while after the test.

In some cases, people may have low blood pressure or changes in heart rhythms due to the sedation during the test, although these are rarely serious.

If a polyp is removed or a biopsy is done during the colonoscopy, you may notice some blood in your stool for a day or two after the test. Significant bleeding is slightly more likely with colonoscopy than with sigmoidoscopy, but it is still uncommon. In rare cases, continued bleeding might require treatment.

Colonoscopy is a safe procedure, but on rare occasions, the colonoscope can puncture the wall of the colon or rectum, which is called a perforation. It can be a serious complication and may require surgical repair. Talk to your doctor about the risk of this complication.

Double contrast barium enema

Before the test. As with colonoscopy, it is very important that the colon and rectum are empty and clean so your doctor can see them during the test. Your doctor will give you specific instructions on preparing for the test. Be sure to follow the instructions. For example, you may be asked to clean your bowel the night before with laxatives and/or take an enema the morning of the exam. You will likely be asked to follow a clear liquid diet for a day or two before the procedure. You may also be told to avoid eating or drinking dairy products the day before the test, and to not eat or drink anything after midnight on the night before the procedure. Many people consider the bowel preparation to be the most unpleasant part of the test, as it usually requires you to be in the bathroom quite a bit.

During the test. The procedure takes about 30 to 45 minutes, and it does not require sedation.

Possible side effects and complications. You may have bloating or cramping after the test and will likely feel the need to empty your bowels soon after the test is done. The barium can cause constipation for a few days, and your stool may appear grey or white until the barium leaves the body. There is a very small risk that inflating the colon with air could injure or puncture the colon, but this risk is thought to be much less than with colonoscopy. Like other x-ray tests, this test also exposes you to a small amount of radiation.

Virtual colonoscopy

Before the test. It is important that the colon and rectum are emptied before this test to provide the best images, which is why the preparation for this test is similar to that for a double contrast barium enema or colonoscopy. You will likely be told to follow a clear liquid diet for a day or two before the test. You will also be given instructions for taking strong laxatives and/or enemas the night before or morning of the exam, which will probably require you to be in the bathroom quite a bit.

During the test. This test is done in a special room with a CT scanner and takes about 10 minutes. You may be asked to drink a contrast solution before the test to help “tag” any remaining stool in the colon or rectum, which helps the doctor when looking at the test images.

Possible side effects and complications. There are usually very few side effects after CT colonography. You may feel bloated or have cramps because of the air in the colon, but this should go away once the air passes from the body. There is a very small risk that inflating the colon with air could injure or puncture the colon, but this risk is thought to be much less than with colonoscopy. Like other types of CT scans, this test also exposes you to a small amount of radiation.

For more information on what happens during each procedure, be sure to read the [Colon and Rectum Cancer Detailed Guide](#).

Source

1. American Cancer Society (2010). Can colorectal polyps and cancer be found early? [online]. Retrieved April 12, 2010. From http://www.cancer.org/docroot/CRI/content/CRI_2_4_3x_Can_Colon_and_rectum_cancer_be_found_early.asp.