

## Weighing the pros & cons of colorectal cancer screening

### Being an informed consumer

It is important to be an informed consumer of your own health care. The following information will further inform you about each colorectal cancer screening test, and the table on the following two pages will help you see at-a-glance the advantages and disadvantages of each procedure. Use this information to have good, open communication with your doctor about the screening test or tests that are right for you.

#### Fecal occult blood test (FOBT) & Fecal immunochemical test (FIT)

Patients should be aware that these tests are usually done with 2-3 samples being collected at home. A one-time sampling is likely to be ineffective.<sup>1</sup> Additional procedures, such as colonoscopy, may be necessary if the test indicates an abnormality.<sup>2</sup>

#### Stool DNA test

Patients should be aware that “this is a newer type of test, and the best length of time to go between tests is not yet clear. This test is also much more expensive than other forms of stool testing.... Like other stool tests, if the results are positive, a colonoscopy will need to be done.”<sup>3</sup>

#### Sigmoidoscopy

Patients should be aware that in this test, the doctor checks for polyps or cancer inside the *rectum and lower third of the colon*.<sup>4,5</sup> Using the sigmoidoscope, your doctor can view the inside of the rectum and part of the colon to detect (and possibly remove) any abnormality. However, because the sigmoidoscope is only 60



centimeters (about 2 feet) long, the doctor is able to see the entire rectum but less than half of the colon.<sup>3</sup> “A sigmoidoscopy and a digital rectal exam (DRE) may be used together to screen for colorectal cancer.”<sup>5</sup> Additional procedures, such as colonoscopy, may be necessary if the test indicates an abnormality.<sup>2</sup>

#### Colonoscopy

The colonoscope used in colonoscopy has a video camera on the end that is connected to a display monitor so the doctor can see and closely examine the inside of the colon. Patients should be aware that special instruments can be passed through the colonoscope to remove (biopsy) any suspicious-looking areas, such as polyps, if needed.<sup>3</sup>

#### Virtual colonoscopy

Virtual colonoscopy is a newer test, and clinical trials are comparing virtual colonoscopy with commonly used colorectal cancer-screening tests.<sup>5</sup> Patients should be aware that if polyps or other abnormalities are discovered, a traditional colonoscopy will be needed to examine them in more detail or to remove them.<sup>6</sup>

#### Double contrast barium enema

Patients should be aware that if the test indicates an abnormality, additional procedures will be necessary.<sup>2</sup>

#### Digital rectal exam

Patients should be aware that “because this exam can find less than 10 percent of colorectal cancers, it must be used along with another screening test.”<sup>6</sup> Additional procedures are necessary if the test indicates an abnormality.<sup>2</sup>

The following table from the National Cancer Institute<sup>2</sup> outlines some of the advantages and disadvantages of the colorectal cancer screening tests. Use this table as you talk with your doctor to help decide what screening test or tests are right for you.

## Advantages and Disadvantages of Colorectal Cancer Screening Tests\*

Test	Advantages	Disadvantages
<b>Fecal Occult Blood Test (FOBT)</b>	<ul style="list-style-type: none"> <li>• No cleansing of the colon is necessary.</li> <li>• Samples can be collected at home.</li> <li>• The cost is low compared with other colorectal cancer screening tests.</li> <li>• FOBT does not cause bleeding or tearing/perforation of the lining of the colon.</li> </ul>	<ul style="list-style-type: none"> <li>• This test fails to detect most polyps and some cancers.</li> <li>• False-positive results (the test suggests an abnormality when none is present) are possible.</li> <li>• Dietary restrictions and changes, such as avoiding meat, certain vegetables, vitamin C, iron supplements, and aspirin, and increasing fiber consumption, are often recommended for several days before a guaiac FOBT. These restrictions and changes are not required for immunochemical FOBT.</li> <li>• Additional procedures, such as colonoscopy, may be necessary if the test indicates an abnormality.</li> </ul>
<b>Sigmoidoscopy</b>	<ul style="list-style-type: none"> <li>• The test is usually quick, with few complications.</li> <li>• For most patients, discomfort is minimal.</li> <li>• In some cases, the doctor may be able to perform a biopsy (the removal of tissue for examination under a microscope by a pathologist) and remove polyps during the test, if necessary.</li> <li>• Less extensive cleansing of the colon is necessary with this test than for a colonoscopy.</li> </ul>	<ul style="list-style-type: none"> <li>• This test allows the doctor to view only the rectum and the lower part of the colon. Any polyps in the upper part of the colon will be missed.</li> <li>• There is a very small risk of bleeding or tearing/perforation of the lining of the colon.</li> <li>• Additional procedures, such as colonoscopy, may be necessary if the test indicates an abnormality.</li> </ul>
<b>Colonoscopy</b>	<ul style="list-style-type: none"> <li>• This test allows the doctor to view the rectum and the entire colon.</li> <li>• The doctor can perform a biopsy and remove polyps or other abnormal tissue during the test, if necessary.</li> </ul>	<ul style="list-style-type: none"> <li>• This test may not detect all small polyps, nonpolypoid lesions, and cancers, but it is one of the most sensitive tests currently available.</li> <li>• Thorough cleansing of the colon is necessary before this test.</li> <li>• Some form of sedation is used in most cases.</li> <li>• Although uncommon, complications such as bleeding and/or tearing/perforation of the lining of the colon can occur.</li> </ul>

<b>Virtual Colonoscopy</b>	<ul style="list-style-type: none"> <li>• This test allows the doctor to view the rectum and the entire colon.</li> <li>• This is not an invasive procedure, so there is no risk of bleeding or tearing/perforation of the lining of the colon.</li> </ul>	<ul style="list-style-type: none"> <li>• This test may not detect all small polyps, nonpolypoid lesions, and cancers.</li> <li>• Thorough cleansing of the colon is necessary before the test.</li> <li>• If a polyp or nonpolypoid lesion 6 to 9 millimeters in size or larger is detected, standard colonoscopy, usually immediately after the virtual procedure, will be recommended to remove the polyp or lesion or perform a biopsy.</li> </ul>
<b>Double Contrast Barium Enema (DCBE)</b>	<ul style="list-style-type: none"> <li>• This test usually allows the doctor to view the rectum and the entire colon.</li> <li>• Complications are rare.</li> <li>• No sedation is necessary.</li> </ul>	<ul style="list-style-type: none"> <li>• This test may not detect some small polyps and cancers.</li> <li>• Thorough cleansing of the colon is necessary before the test.</li> <li>• False-positive results are possible.</li> <li>• The doctor cannot perform a biopsy or remove polyps during the test.</li> <li>• Additional procedures are necessary if the test indicates an abnormality.</li> </ul>
<b>Digital Rectal Exam (DRE)</b>	<ul style="list-style-type: none"> <li>• Often part of a routine physical examination.</li> <li>• No cleansing of the colon is necessary.</li> <li>• The test is usually quick and painless.</li> </ul>	<ul style="list-style-type: none"> <li>• The test can detect abnormalities only in the lower part of the rectum.</li> <li>• Additional procedures are necessary if the test indicates an abnormality.</li> </ul>
<p>*This table is an excerpt from National Cancer Institute (2008). Colorectal cancer screening [online]. Retrieved April 12, 2010. From <a href="http://www.cancer.gov/cancertopics/factsheet/Detection/colorectal-screening">http://www.cancer.gov/cancertopics/factsheet/Detection/colorectal-screening</a>.</p>		

## Sources

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