

COLORECTAL CANCER BRIEF

Colorectal Cancer (CRC) is highly preventable, treatable and survivable, especially when screened and diagnosed early.



LOUISIANA RANKS

5TH
IN THE U.S. FOR
COLORECTAL CANCER
DEATHS

Regular screening is one of the most important ways to prevent or detect colorectal cancer early.

Colorectal cancer screening is covered by most insurance.

SCREENING IS A PRIORITY!

Men and Women 45–75:

- Start regular screening – talk to your primary care provider to discuss which test is best for you.
- Get a colonoscopy every 10 years (average risk).

Men and Women 76–85:

- Based on individual factors – testing frequency depends on individual factors, for example, prior screening history, overall health and life expectancy.

90%

When caught early, colorectal cancer has a 90% survival rate.

RISK FACTORS

Non-Modifiable

- Age
- Race/Ethnicity
- Inflammatory bowel disease (IBD), including Crohn's
- Family history of hereditary syndromes
- Personal/Family history of colorectal polyps or CRC

Modifiable

- Obesity
- Alcohol Consumption
- Tobacco Use

HELPFUL TIPS

- Be proactive. People at average risk of colorectal cancer should start regular screening at age 45; however people at increased or high risk of colorectal cancer might need to start colorectal cancer screening before age 45, be screened more often, and/or get specific tests. Men and women younger than 45 should pay attention to warning signs.
- Know your body and signs of symptoms – especially sudden changes in bowel habits such as diarrhea, constipation, blood in stool; abnormal abdominal pain, cramps and/or aches that particularly do not go away; or unexpected weight loss.
- Black men and women have the highest CRC rate of any racial/ethnic group in the U.S. Talk to your primary care provider about colorectal cancer and screening options available to you. Early screening and testing are associated with improved survival outcomes

