

Health Bulletin

NEW YORK CITY DEPARTMENT OF HEALTH AND MENTAL HYGIENE

#60 in a series of Health Bulletins on issues of pressing interest to all New Yorkers

Get Checked!

50 or Older?

Get a Colonoscopy to Prevent Colon Cancer



- Available in Spanish and Chinese: call 311 or visit nyc.gov/health
- Disponible en español: llame al 311 o visite nyc.gov/health
- 需要中文服務 - 可電 311 或造訪網址: nyc.gov/health

Colonoscopy tests for – and can also prevent – colon cancer

- Colonoscopy detects more than 95% of early colon cancer.
- Colonoscopy is the only test that can also *prevent* cancer.
 - This is because the doctor can remove polyps – small growths that may develop into cancer if left alone – before they turn into cancer.
 - Other colon cancer screening tests do not examine the colon as thoroughly or remove polyps.
- Colonoscopy examines the entire colon.
 - It uses a flexible tube with a camera at one end.
 - It generally lasts about 30 minutes.
- Colonoscopy is safe and usually painless.
 - There may be some discomfort, but patients are usually given a sedative to help them relax.
 - The risk of complications is very small.
- Colonoscopy is usually needed only once every 10 years if test results are normal. Other screening tests are needed more often.


Risk factors for colon cancer

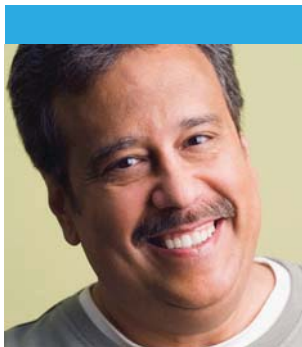
Colon cancer is one of the most preventable – but least prevented – of all cancers.

Biggest Risk Factors

- **Being 50 or older.** More than 90% of colon cancers occur in this age group.
- **Having a personal or family history of colon cancer.**
 - If you have had colon polyps, colon cancer or some other cancers – or have a parent, brother or sister who has – this raises your risk.
 - People with a personal or family history may have to be tested *before* age 50. Talk to your doctor.

Other Risk Factors

- **Smoking.** Quitting smoking reduces your risk.
 - **Being overweight or obese.**
 - **Ethnic background.** Having an African-American or Ashkenazi (Eastern European) Jewish ancestry.
 - **Having other colon diseases.** Ulcerative colitis or Crohn's disease may increase your risk of developing colon cancer.
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Other colon cancer tests

There are other colon cancer screening tests. Any test is better than no test at all. A positive result on any of these tests must be followed by colonoscopy.

Tests that check for hidden blood

Fecal Occult Blood Test (FOBT) and Fecal Immunochemical Test (FIT)

- Both check for hidden blood in the stool.
- There is more than one kind of FOBT. Ask your doctor for a “high-sensitivity” test.
- Both FOBT and FIT include instructions on how to take stool samples at home and return them for testing.
- They should be done every year.

Other Tests

Sigmoidoscopy

- Similar to colonoscopy but because it examines less than half of the colon (not the *entire* colon as colonoscopy does), it can miss some cancer.
- Some preparation is necessary to empty the colon.
- Should be done every 5 years

Barium Enema X-Ray

- A chalky liquid is injected into your bowel. Then a series of X-rays is taken.
- Should be done every 5 years.

Virtual Colonoscopy

- Uses X-rays and computers to produce images of the colon.
- Requires the same preparation to empty the colon as colonoscopy.
- No sedatives are required.
- May not find all abnormalities.
- May not be covered by your insurance.

How to lower your risk

- Don't smoke. *For free help quitting, call 311.*
- Maintain a healthy weight.
- Exercise regularly.
Get at least 30 minutes of moderate physical activity (such as a brisk walk) at least 5 days a week.
- Eat a healthy diet.

Get checked!

- Ask your regular doctor about colonoscopy.
- If your doctor does not recommend colonoscopy, people 50 or older should *ask why*.
- Colonoscopy is covered by most insurance plans, including Medicare and Medicaid.
- If you don't have insurance or a regular doctor, call 311 and ask for **Colonoscopy**.



Colonoscopy Countdown

How to Prepare and What to Expect

7 days before	<ul style="list-style-type: none">• Your doctor will probably ask you to stop taking aspirin, aspirin substitutes (such as ibuprofen) and iron medications.• Your doctor may also tell you to stop taking some prescription medicines.
6, 5, 4, 3, 2 days before	<ul style="list-style-type: none">• You can eat a regular diet.
1 day before	<ul style="list-style-type: none">• Consume only clear liquids (water, apple juice, coffee or tea without milk or cream, clear broth).• Your doctor will also ask you to take medicine to empty your colon.• This may be uncomfortable, but is necessary so the camera can see any cancer or polyp.
A few hours later	<ul style="list-style-type: none">• Most people feel better after the sedative has worn off.• An adult should accompany you home.• Many people plan to relax the rest of the day.• Most people can begin eating regular meals right away.
1 day later	<ul style="list-style-type: none">• You should feel better and be able to resume all normal activities within a day.

More Information and Help

- **NYC Department of Health and Mental Hygiene:** nyc.gov/health or call 311 and ask for **Colonoscopy**
- **Health Bulletins:** nyc.gov/health or call 311:
 - #46: **Still Smoking? Cigarettes are eating you alive**
 - #48: **How Much Is Too Much? (Alcohol)**
 - #51: **How to Lose Weight and Keep It Off**
 - #56: **HPV Vaccine Can Prevent Cervical Cancer**
- **Centers for Disease Control and Prevention:** www.cdc.gov/cancer/colorectal/sfl/
- **National Cancer Institute:** www.cancer.gov/cancertopics/types/colon-and-rectal
- **Mayo Clinic:** www.mayoclinic.com/health/colon-cancer/CO99999
- **National Institutes of Health:** <http://health.nih.gov/result.asp/155>

**DIAL
311**

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VOLUME 7, NUMBER 5

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U.S. POSTAGE
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