Youens & Duchicela Clinic

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March: Colorectal Cancer Awareness Month

Your health is important.

Because the Youens and Duchicela Clinic believes this, the following is brought to you in an effort to provide wellness information that you can use to help manage and maintain your health.

This week, the focus is on colorectal cancer (CRC).

March is National Colorectal Cancer Awareness Month, one of the most preventable and treatable forms of cancers—but one that often goes undetected.

CRC is the cancer that occurs in the colon (the largest intestine) or the rectum (the passageway that connects the colon to the anus). It usually starts from polyps—growths which shouldn't be there—in the colon.

CRC claims more lives than another other cancer among nonsmoking Texans, according to Texas Cancer Registry data maintained in Austin. Additionally, it is estimated that 60% of these deaths could be avoided if every person over 50 had regular screening tests, according to the Centers for Disease Control.

So why is CRC claiming so many lives? In part, this occurs because patients consistently underestimate their CRC risk and overestimate the discomfort of screenings.

In regard to data collected by the TMF Health Quality Institute on CRC, 61% of patients do not have a family history of the illness. With this cancer, symptoms develop late, so prevention is key. Unfortunately, many patients wait until something is wrong in order to see their doctor, which, in some cases, is too late for effective, life-saving treatment.



Various screening tests, not just colonoscopies, work to identify pre-cancerous growths, which could prevent a patient from ever developing CRC. Some screening tests include stool tests, flexible sigmoidoscopies, enemas, or virtual colonoscopies (using x-rays and computer images). While CRC can be deadly if developed, the survival rate of patients diagnosed and treated in the disease's early stages is very high.

Most cancers are found in people over 50, and this is the case with CRC. Age is the leading risk factor for this disease, so everyone age 50 or older should have regular screenings.

CRC doesn't have to be such a large killer. If you are over 50, have a close relative with CRC, have inflammatory bowel disease, or have a genetic syndrome such as familial adenomatous polyposis (FAP) or hereditary nonpolyposis colorectal cancer, talk with your doctor soon about when to begin screening and how often you should be tested.

In addition, beware of other lifestyle risk factors such as a diet high in red meats and processed meats, physical inactivity, obesity, long-term smoking, and heavy alcohol use, as these may also contribute to CRC.

Do not be shy about speaking with your doctor about your own CRC risk. He/she can recommend the specific screening that would be of greatest benefit to you. In doing so, the doctor will also provide a clear and realistic explanation of the testing involved, including the duration of the test, the need for a family/friend to accompany the individual to the test, preparation options, what level of discomfort to expect, and when the individual can return to work. This knowledge is key to making positive, healthy decisions.

The information provided here is not to be used as a substitute for medical attention. Remember that, should you have specific medical questions or desire more information, contact your doctor.