Colorectal Cancer Screening Options

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The American Cancer Society recommends that people at **average** risk for developing colorectal cancer should start regular screenings at age 45 and continue them through age 75, and possibly further if their health care provider feels it is worthwhile.[i]

Potential screening options, and the Centers for Disease Control and Prevention's recommended frequency for those options, are below. Your provider can recommend the approach that is best for you, and tell you if you should be screened more frequently or at an earlier age.[ii]

EVERY YEAR

A fecal occult blood test, or fecal immunochemical test (FIT), which checks for blood in your stools. These tests can be done in your own home, and require no advance preparation.

EVERY 1 – 3 YEARS

A FIT-DNA test, which combines FIT with a test which looks for altered DNA in the stool. This test can also be done in your own home without advance preparation.

EVERY 5 YEARS

A flexible sigmoidoscopy, in which a doctor puts a short, thin, flexible tube into your rectum and the lower third of your colon. The device allows the doctor to remove most polyps and take biopsies.

A colonoscopy, which is similar to a flexible sigmoidoscopy but examines the entire colon. A colonoscopy is also conducted if any of the other screening methods discover anything unusual, as it is the only one which allows for visual examination of the full colon.

Source:
i. "American Cancer Society Guideline for Colorectal Cancer Screening," American Cancer Society, 2018, https://www.cancer.org/cancer/colon-rectal-cancer/detection-diagnosis-staging/acs-recommendations.html.
ii. "Colorectal Cancer Screening Tests," Centers for Disease Control and Prevention, 2018, https://www.cdc.gov/cancer/colorectal/basic_info/screening/tests.htm.

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