

The Colon

Questions and Answers

FACTS ON COLON CANCER

The American Cancer Society estimates that over 98,000 cases of colon cancer and 37,000 cases of rectal cancer will be diagnosed in the United States this year. Colorectal cancers account for about eight percent of new cancer diagnoses. In recent years, however, death rates have declined, in all likelihood due to increased colonoscopic screening, polyp removal (preventing the progression of polyps into invasive cancer) and improved treatment methods.

Q: What is the colon?

A: The colon and rectum, as parts of the digestive system, form a muscular tube called the large intestine or large bowel. Through a process called peristalsis, digested food moves from the stomach and small intestine into the colon. Once in the colon, all remaining water is absorbed into the body, forming solid waste (stool), which leaves the body through the anus.

This information is not intended to provide specific medical or professional advice. Your physician should provide definitive medical advice, as well as answers to your medical-related questions.

RESOURCE SUPPORT

For additional information about stomach cancer, the following resources are available:

National Cancer Institute Cancer Information Service

800/4-CANCER

www.cancernet.nci.nih.gov

These National Cancer Institute programs provide nationwide services to cancer patients, their families and friends.

American Cancer Society

800/ACS-2345

www.cancer.org

The American Cancer Society, is a nationwide volunteer organization that supports cancer research, patient education programs and related services for family members.

Associated Pathology Medical Group, Inc. (APMG)

www.apmglab.com

APMG is the longest standing independent pathology practice in Silicon Valley. Our group consists of eight pathologists at two practice sites: Los Gatos and Santa Cruz, serving physicians throughout California. Our pathologists are outpatient and inpatient specialists that produce accurate, diagnostic reports within 24 hours in most instances. Abnormal cases are routinely peer-reviewed.



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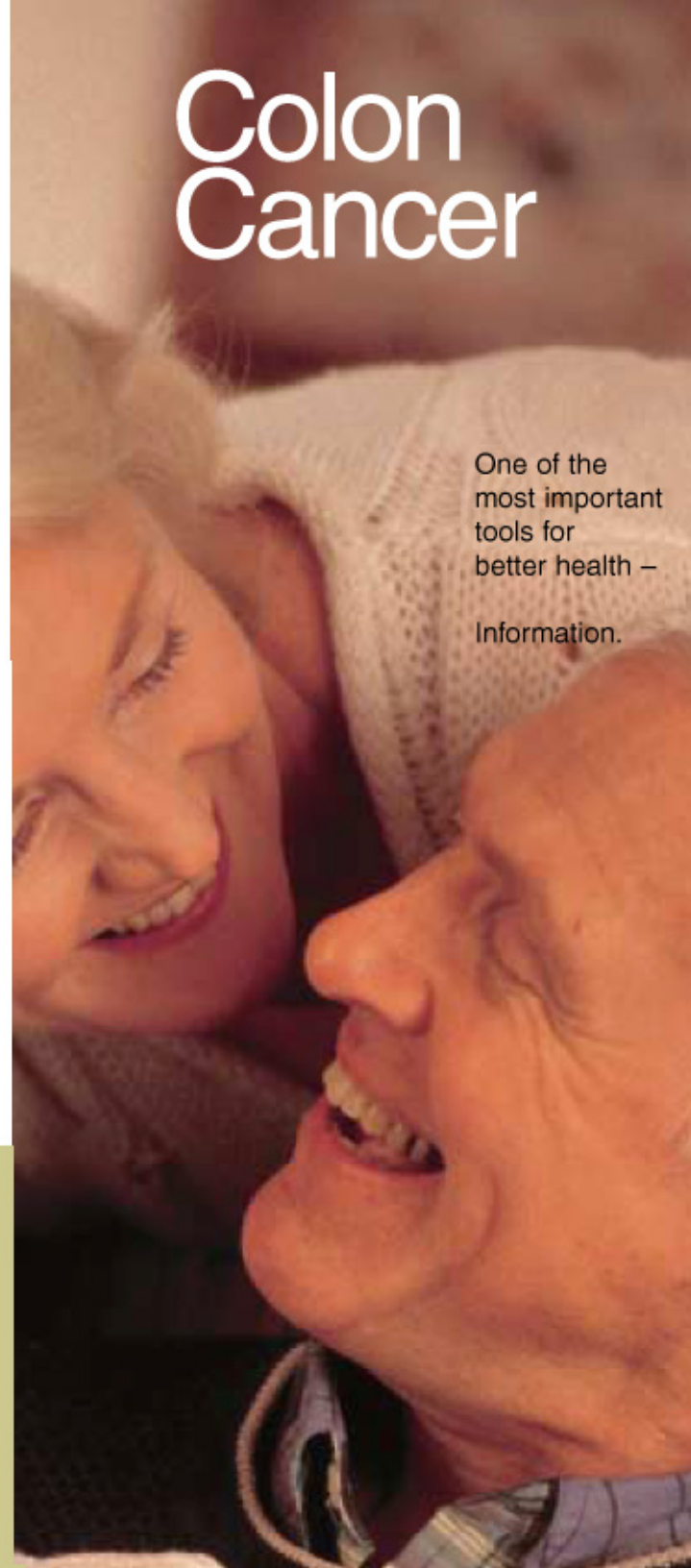
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Colon Cancer

One of the
most important
tools for
better health –

Information.



Knowledge is power.



Q: Am I at risk?

A: Colorectal cancer occurs most frequently in people over the age of 50. Colonic polyps, inflammatory bowel disease and a family history of colorectal cancer are factors of increased risk of developing colorectal cancer.

Q: What are the symptoms?

A: Common symptoms of colon cancer include:

- Diarrhea or constipation
- Blood in or on the stool
- Frequent gas pains
- General stomach discomfort
- A change in bowel habits
- A feeling that the bowel does not empty completely
- Unexplained weight loss

Because these symptoms may be caused by other problems, such as ulcers, an inflamed colon or hemorrhoids, it is important to consult your physician or a gastroenterologist (a doctor who specializes in diagnosing and treating digestive diseases).

Q: How is colon cancer detected?

A: There are many symptoms that your doctor will consider during your initial office visit. He/She may ask you about your personal and family medical history, perform a physical examination and order laboratory tests.

The National Cancer Institute indicates that people can take an active role in the early detection of colorectal cancer and recommends the following guidelines:

- Have regular checkups, to include a digital rectal examination
- Beginning at age 50:
 - Have an annual fecal occult blood test, and
 - Have an initial sigmoidoscopy (examination of the rectum and lower colon) and one every three-to-five years thereafter.

PATHOLOGY TESTING

Q: How is colon cancer diagnosed?

A: Your gastroenterologist may perform either an examination of the lower colon (using an instrument called a sigmoidoscope) or an examination of the entire colon (using an instrument called a colonoscope). By using these instruments, your doctor can check for the presence of polyps, tumors or other abnormalities. If an abnormality is discovered, your doctor may remove all or part of the affected tissue using the same instrument.

The removal of tissue to check for the existence of cancer is known as a biopsy. The colon biopsy procedure is the only method in use to definitively diagnose colon cancer. The removed tissue (specimen) is sent to a diagnostic laboratory for

evaluation by a pathologist – a physician who, through the use of microscopic examination, specializes in the diagnosis of disease. If cancer cells are identified, the pathologist can then assist your physician in determining the stage and extent of the cancer and the best treatment options.

TREATMENT OPTIONS

Q: Do I have a choice of treatment?

A: There are several options for the treatment of colon cancer, depending on your age, the size and location of the tumor, the stage of the disease (i.e., whether it has spread to other organs) and your general health. You may also have concerns regarding the treatment process and potential side effects; therefore, it is essential that you and your doctor discuss all available options leading to the development of a treatment plan that is specifically tailored to your needs and circumstances.



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