

INFORMATION RE: COLON CANCER SCREENING

Dr. Dec would like to discuss with you, options for Colon Cancer Screening. You may have received a notice from the MOH regarding the recommendations for Colon Cancer Screening. Patients between the ages of 50-75 years of age are at risk for developing colon cancer. The Ministry of Health is actively trying to get patients to screen themselves in order to try to detect colon cancer at an early stage. The reason that this is important is because the death rate from colon cancer is greatly reduced if it is detected early, and it is easier to treat. Unfortunately, colon cancer is not easily visible in its early stages. If we wait until you begin to have symptoms like abdominal pain, visible rectal bleeding, weight loss, vomiting, or a change in your bowel habit, then it could be too late.

There are several ways to screen for colon cancer. For the average low-risk person, the Ministry of Health is recommending the **Fecal Occult Blood Test (FOBT)**. This is a process where you take home a kit, follow the instructions, and take 3 stool samples from 3 separate bowel movements, and submit them to the lab. The lab will then test the stool for microscopic blood (blood that can't be seen), and if there is blood found, then further testing will be necessary. The advantages of this test is that is simple, quick, easy, doesn't require any special circumstances or referrals and we get the results in a timely manner. The disadvantage of the test is that it is not entirely sensitive, in that it will not pick up 100% of cancers. If the test is negative, then we usually have you repeat it every 2 years to ensure no cancer has developed. If the test is positive, then the recommendation is that we proceed to the next test, which is a colonoscopy, to directly look at your bowels.

COLONOSCOPY is the other test that can screen for colon cancer. For people with a strong family history of colon cancer, the recommendation is to proceed directly to a colonoscopy. In addition, as mentioned above, if your stool test is positive, then we strongly recommend a colonoscopy to find out where the bleeding is coming from and how serious it is. Some people, for other reasons, choose to directly have a colonoscopy as opposed to doing the stool test. The advantages of a colonoscopy are that the bowels can be seen directly and any suspicious areas can be sampled to test for cancer directly. You first need to go and see a specialist who will describe the procedure and outline the risks in detail, as colonoscopies do have some risks. You will need to take time off work the day of your procedure and have somebody drive you to the hospital as the sedative used in the procedure requires that you not drive for 24 hours. You have to clean out your bowels with a preparation that brings on diarrhea and will make you frequently go to the toilet for the 2 days prior to the exam. Unfortunately, there is always a risk of damaging or rupturing the bowel. The risk is not dramatically high, but there is still a small risk and this complication can be serious and even cause death in very rare circumstances.

This gives you an introduction to the process. Dr. Dec or his staff will be happy to answer any additional questions you have, and then you must make a decision on whether to screen for colon cancer (which Dr. Dec does recommend!) and if you decide to screen, you will have to choose the method you are most comfortable with.

FOBT stool sample kits are available at the reception desk for you to take home.