

Office of Community Outreach, Minority Affairs & Cancer Health Disparities

The University of New Mexico Cancer Center



UNDERSTANDING COLORECTAL CANCER TO PROTECT OUR COMMUNITIES

María Otero, BS: Hispanic/Latino Programs

This presentation was developed in partnership with the
Native American Cancer Education & Outreach Program at the UNM Cancer Center



WAY OF LIFE

- ✘ Helped to protect our people from chronic diseases (such as cancer, diabetes, heart disease)
- ✘ Families and community helped each other out – support is important for loved ones that may be diagnosed with cancer or are living with other chronic illnesses.

TALKING ABOUT CANCER...

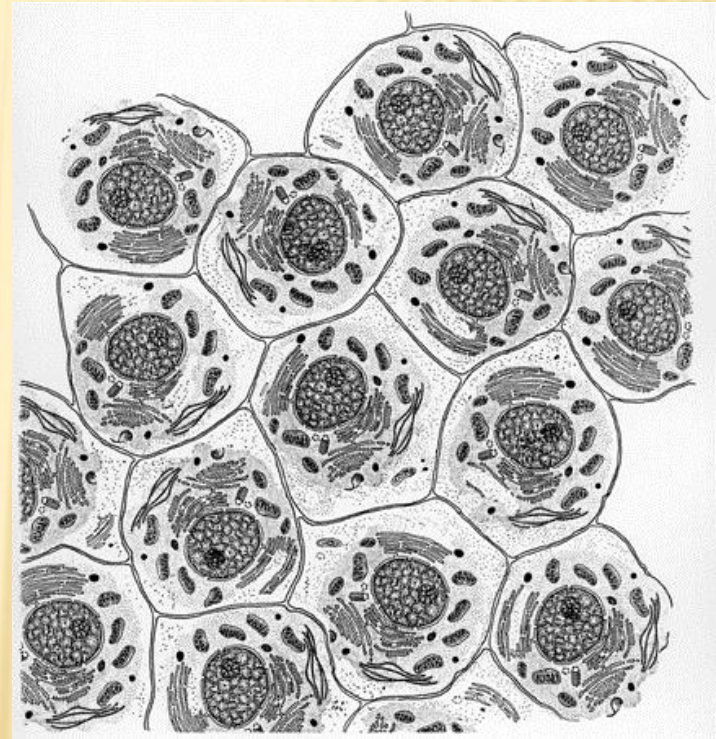
- ✘ Will not cause cancer or bring it into our communities.
- ✘ Is important to learn how we can protect our community and ourselves from cancer.
- ✘ Is an important way to support those that have cancer so they don't feel isolated and alone.

WHEN OUR BODY IS OUT OF BALANCE

- ✘ Cancer is a disease that happens when our body is out of balance.
- ✘ Cancer is not just one disease. Cancer is *over 100 diseases* that begin in the cells of our body.
- ✘ Cells in an organ become abnormal and divide without order, forming a mass called a tumor.

CELLS IN OUR BODY

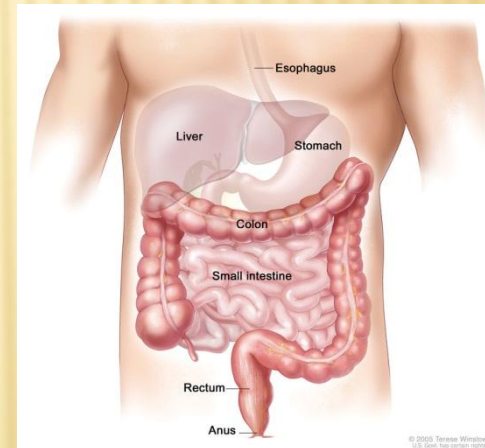
- ✘ Our body is made up of organs. Organs are made up of **cells**.
- ✘ Each organ has a different job.
- ✘ Different **cells** have different jobs to do in order to support an organ's function.



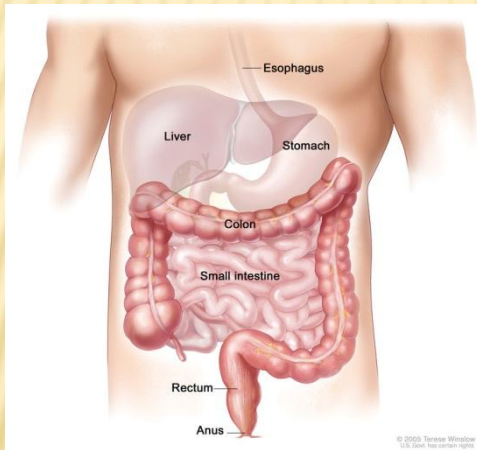
Healthy Cells

OUR BODY: THE COLON

- ✗ Carries waste products to rectum, then outside of body.
- + Left over food that is not used by body move from small intestine to colon.
- + Water is absorbed by body from left over foods while the waste is in the colon.

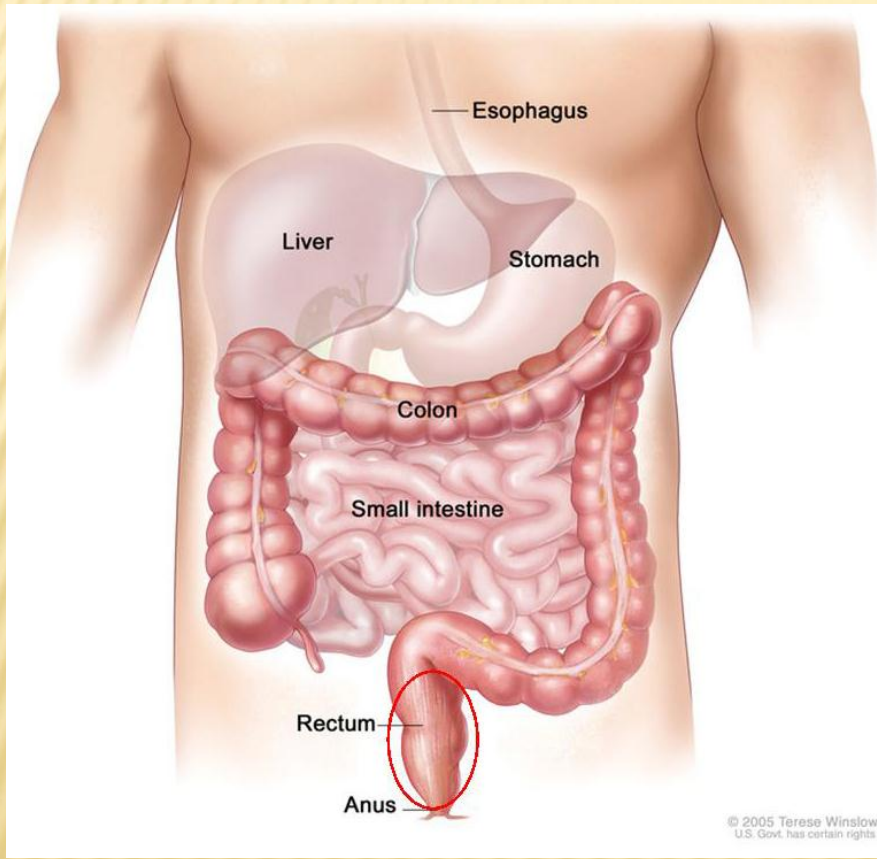


OUR BODY: THE COLON



- ✘ Colon is larger in diameter (thicker) than the small intestine.
- ✘ The colon is shorter than the small intestine - only 5-7 feet long.

OUR BODY: THE RECTUM



- ✘ The storage holder for waste (stool).
- ✘ Muscles in rectum move stool out of the body through the anus.
- ✘ The last 8-10 inches of the colon.

COLORECTAL CANCER

- ✘ Cancer that develops in the colon or rectum
- ✘ Can happen to people of any age, but **most often it occurs in people 50 or older.**
- ✘ If found early, before it spreads in body, colorectal cancer is highly treatable and can be survived.

COLORECTAL CANCER

Healthy colon



Colon with cancer



COLORECTAL CANCER

- ✘ Is not a death sentence.
- ✘ Can be prevented. Screening plays an important role in preventing colorectal cancer.
- ✘ Is more common today than among our ancestors.

WHO IS AT RISK FOR GETTING COLORECTAL CANCER?

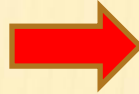
- ✘ Both males and females can get colorectal cancer.
- ✘ Most people that get colorectal cancer are over 50 years old.
- ✘ A person that has had colorectal cancer before is at greater risk for getting it again.
- ✘ A person that has family members who have had colorectal cancer is at greater risk for getting colorectal cancer.

Risk Factors for Colorectal Cancer

- × **Age** – Risk begins to increase after age 40 and continues to increase as you get older.
- × **Obesity and lack of exercise**
- × **Smoking** – Smoking cigarettes is linked to an increased risk of developing colorectal adenomas (noncancerous tumors) and colorectal cancer
- × **Drinking alcoholic beverages**

PAYING ATTENTION

- ✘ Paying attention to nature has helped Native people sustain way of life and thrive.
- ✘ We can pay attention to our bodies.
- ✘ Our bodies let us know when something may not be right or when we may not be well.



Like looking for pests in crops to prevent damage .



POSSIBLE SIGNS OF COLORECTAL CANCER

A change in bowel habits such as:

- ✘ Diarrhea
- ✘ Constipation
- ✘ Feeling that the bowel does not empty completely
- ✘ Blood in stool
- ✘ Stools are narrower than usual

POSSIBLE SIGNS OF COLORECTAL CANCER

- ✘ General abdominal discomfort
- ✘ Weight loss for no known reason
- ✘ Vomiting and constant tiredness

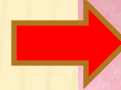
**Since symptoms are often silent,
it is important to have regular screenings.**

PART 3: PROTECTING OUR COMMUNITIES FROM COLORECTAL CANCER

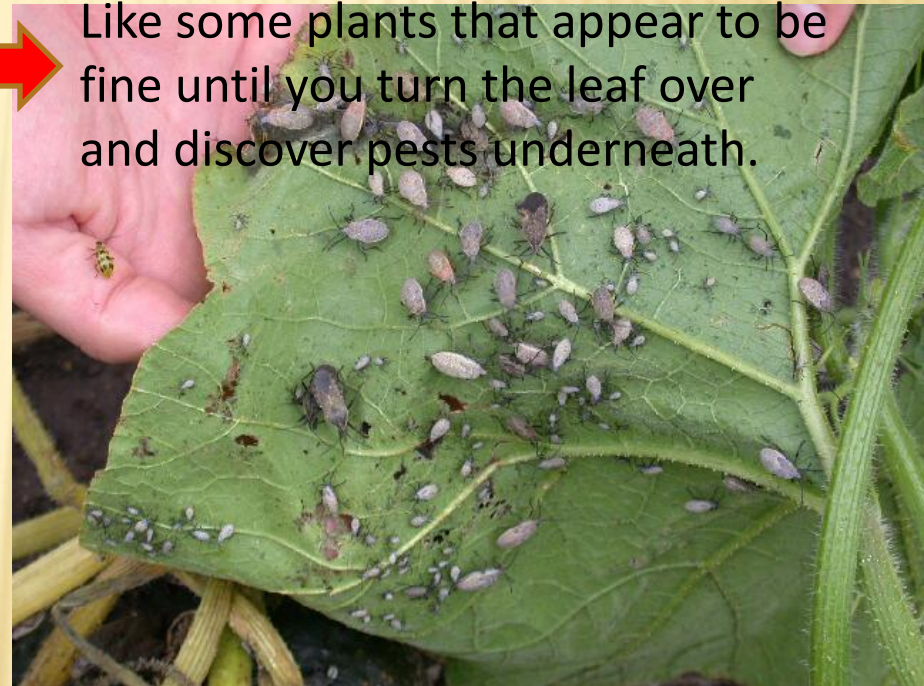
SCREENING FOR CANCER

What is screening?

- ✘ Checking for cancer in a person who does not have any symptoms of cancer (**screening test**)
- ✘ The purpose is to find cancer early (before it spreads) when it is usually easier to treat



Like some plants that appear to be fine until you turn the leaf over and discover pests underneath.

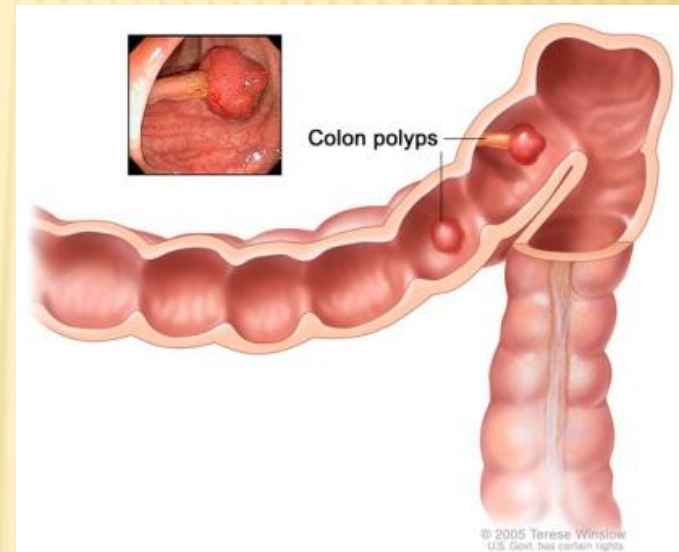


COLORECTAL CANCER SCREENING CAN PREVENT CANCER

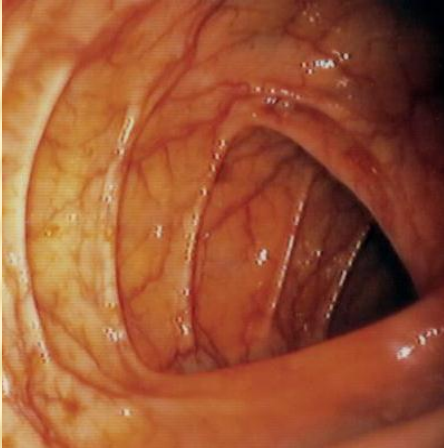
- ✘ Screening for colorectal cancer is important because:
 - + Screening can lead to finding *polyps* before they develop cancer.
 - + *Polyps* can be removed by a screening test known as a *colonoscopy*.
 - + Removal of *polyps* can prevent cancer.

WHAT IS A POLYP?

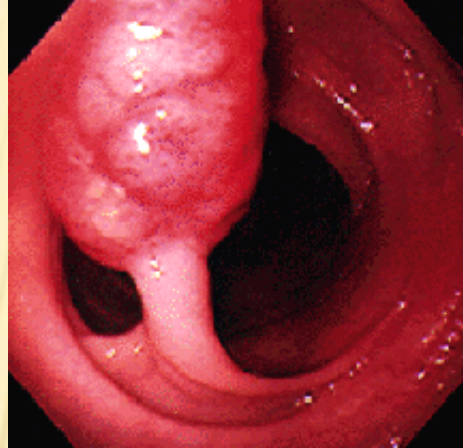
- ✘ A growth that sticks out from the smooth lining of some of our organs (bladder, uterus, or other places) in our body.
- ✘ A polyp may develop into cancer.



WHAT IS A POLYP?



Normal Colon



Polyp



Colon Cancer

A polyp can grow and develop into a cancer over a period of five to seven years.

SCREENING FOR COLORECTAL CANCER

There are different screening tests for colorectal cancer:

- ✘ **Stool Tests (FIT or gFOBT)**
- ✘ **Colonoscopy**
- ✘ **Others (Flexible Sigmoidoscopy, Double Contrast Barium Enema, CT Colonography, Stool DNA)**

The NMDOH Colorectal Cancer Program recommends the FIT or FOBT screening test. However, it is up to your doctor to determine what screening method is best for you. If you have a positive stool test, a colonoscopy will need to be completed.

SCREENING RECOMMENDATIONS:

- ✘ For average risk adults over the age of 50, these are the USPSTF recommendations for screening:

| Test | Frequency |
|---|---|
| High sensitivity FIT/FOBT (take-home stool test) | Every year |
| Flexible Sigmoidoscopy plus HS FIT/gFOBT | Every 5 years With mid-interval HS FOBT/FIT at year 3 |
| Colonoscopy | Every 10 years |

SCREENING FOR COLORECTAL CANCER

Stool Tests – FIT and FOBT

- Checks stool for blood that cannot be seen.
- Stool (also called feces) is the material in a bowel movement.
- Blood in stool may be a sign of **polyps** or cancer.



A person should have this test done every year starting at age 50.

SCREENING FOR COLORECTAL CANCER

Stool Tests – FIT and FOBT

- FIT & FOBT are effective methods for early detection and possible prevention of colorectal cancer.
- Good screening tools that are cheap/inexpensive.
- Can be done at home and are more private.
- May be done without indoor plumbing.

TWO TYPES OF STOOL TESTS

GFOBT (GUAIAIC BASED)

- ✘ Diet and medication restrictions.
- ✘ Samples of bowel movements are smeared onto a card.
- ✘ Tests and number of sample cards vary.

FIT (IMMUNOCHEMICAL)

- ✘ No diet or medication restrictions.
- ✘ Stool samples are collected from bowel movements over 2-3 consecutive days.
- ✘ Some tests use a stick to collect stool, others use a brush.

If blood is found (positive test), follow up testing by colonoscopy is needed.

GFOBT



AVOID THE FOLLOWING:

For 7 days before testing

- ✘ Non-steroidal anti-inflammatory drugs (such as ibuprofen – Advil, Motrin, naproxen - Aleve, or more than 1 aspirin per day)

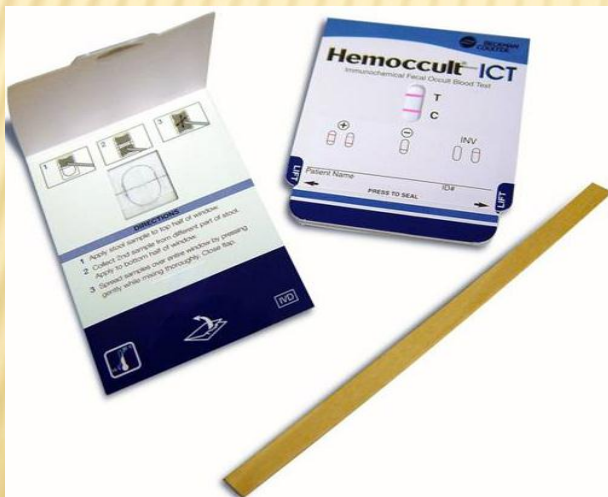
For 3 days before testing

- ✘ Beef, lamb, and liver
- ✘ Vitamin C supplements
- ✘ Citrus fruits & juices

It is important to follow your doctor's advice.

FIT - BECKMAN COULTER - HEMOCCULT ICT

- ✘ Stool sampling similar to gFOBT (stick and smear)
- ✘ Three stools samples needed
- ✘ No diet or medication restrictions



Hemocult-ICT
Immunochemical Fecal Occult Blood Test

Patient Screening Kit Instructions

Contents: 3 Collection Cards • 3 Flushable Collection Tissues • 3 Applicator Sticks • 1 Mailing Pouch • Patient Instructions

No special diet or drug restrictions needed for this test!

www.hemocultFOBT.com

Sample collection for each bowel movement

If you have questions after reading all instructions, contact your doctor or call Beckman Coulter at 1(800) 877-6242 or e-mail askpcd@beckman.com.

- Remove one Collection Card from envelope.
- Write your name, ID# (if known), doctor's name, and collection date on front of Collection Card.
- Collect stool using **OPTION A** or **OPTION B**.


OPTION A: Tissue + Plastic Wrap/Newspaper

- Lift toilet seat.
- Attach about 2 feet of plastic wrap or newspaper on back half of toilet bowl.
- Allow middle to hang just above water.
- Unfold tissue provided and place on top of plastic wrap/newspaper.
- Lower toilet seat.
- Have bowel movement.


OPTION B: Clean, Dry Container

- Collect stool using any clean, dry container such as:
 - pie tin
 - paper plate
 - clean margarine tub
 - clean milk carton with top cut off
 - bed pan
 - wastebasket lined with plastic bag
 - paper bag
- Have bowel movement.

- Open flap of Collection Card. Collect a pea-size stool sample with provided Applicator Stick. Apply sample to top half of window.
- Reuse Applicator Stick to collect another pea-size sample from a different part of stool. Apply sample to bottom half of window.
- Repeat steps 1 through 2 for a second and third day.



Day 2



Day 3

Returning the Collection Cards

- Insert all three completed and dried Collection Cards into enclosed Mailing Pouch designed to meet U.S. Postal Service regulations.
- Peel tape from flap. Fold flap over. Press firmly to seal.
- Deliver or mail sealed Mailing Pouch to your doctor or laboratory within 10 days of day 1 Collection Date.

Printed in U.S.A. Made in U.S.A. © 2004 Beckman Coulter, Inc. 351061.A June 2004

FIT-POLYMEDCO

- ✗ Requires only one sample from a single stool specimen
- ✗ Results in 5 minutes, can be done in doctor's office

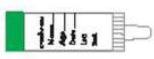

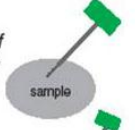




Patient Instruction Sheet How to Collect Stool Sample

Sample Deposit

- 1.** Place supplied collection paper inside toilet bowl on top of water.
- 2.** Deposit stool sample on top of collection paper.
- 3.** Collect sample from stool before paper sinks and stool sample touches water.
- 4.** Flush. Collection paper is biodegradable and will not harm septic systems.

Sample Collection


- 1.** Fill in all required information on the sampling bottle.  Unscrew green cap and pull upwards. 
- 2.** Scrape the surface of the fecal sample with the sample probe.  Cover the grooved portion of the sample probe completely with stool sample. 
- 3.** Close sampling bottle by inserting the sample probe and screwing cap on tightly to the right. Do not reopen.  Return the sample device to your doctor or laboratory.

FIT-QUEST-INSURE

Included in the Transition
Cancer Social 2003 Colorectal
Cancer Screening Guidelines Update

For ease and convenience
in colorectal cancer screening...

Saved by the Brush

A photograph of three people (two men and one woman) smiling and holding up blue-handled brushes. The man on the left is wearing a blue polo shirt and khaki pants. The woman in the center is wearing a red top and black pants. The man on the right is wearing a light purple shirt and grey pants. They are all holding the brushes up towards the camera.

InSure™
Fecal Immunochemical Test

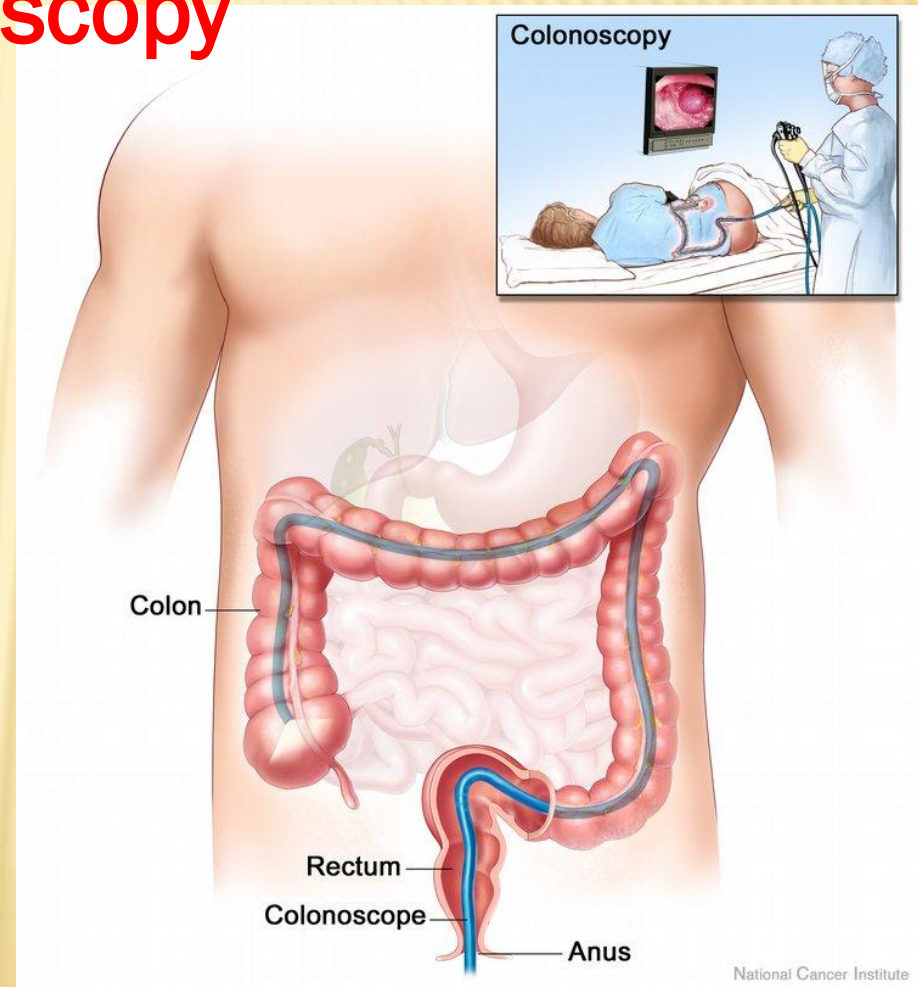
Simple. Sensitive. Specific.

- ✗ No fecal handling
- ✗ Patient brushes surface of stool sample in the toilet with brush, then dabs on test card
- ✗ Only two samples required

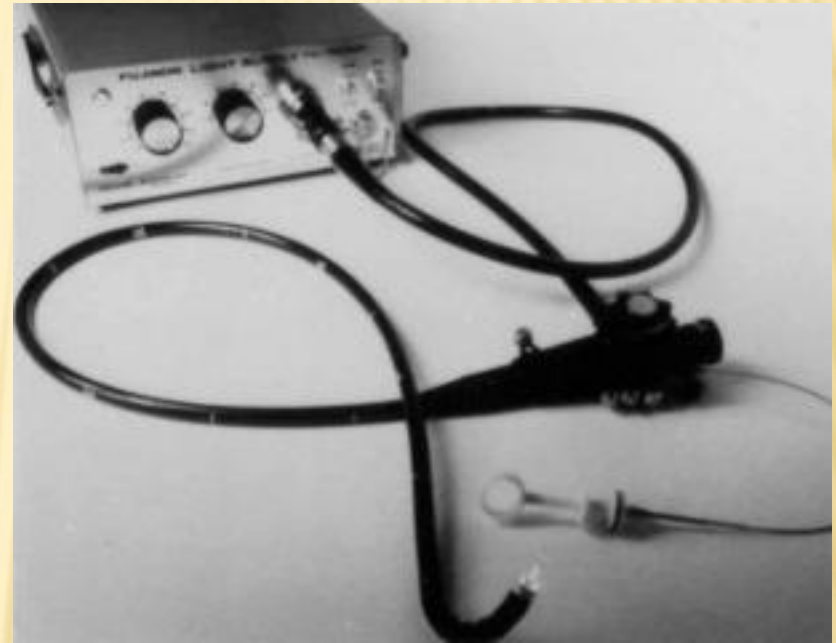
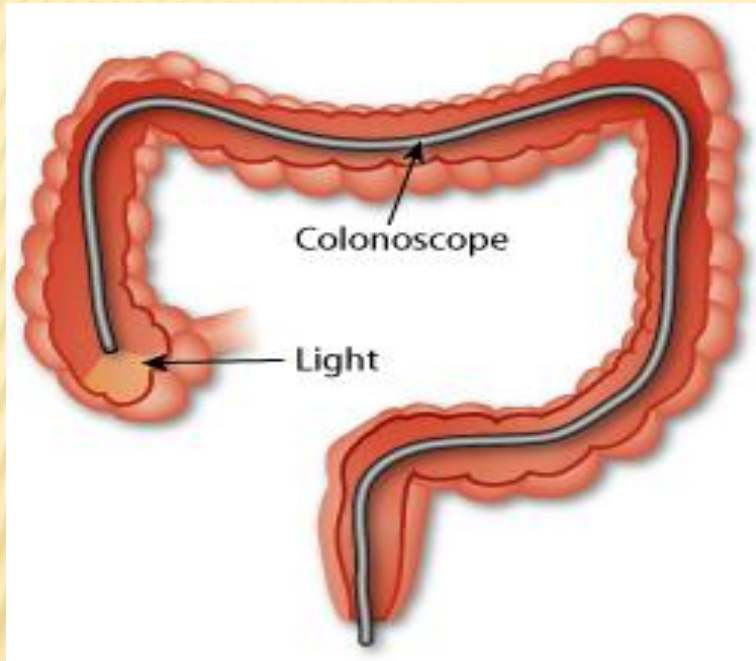
SCREENING FOR COLORECTAL CANCER

Colonoscopy

- ✘ This test should be done every 10 years.
- ✘ A person should have this test at age 50 or earlier with a family history of colorectal cancer.
- ✘ Allows for immediate removal of polyps.

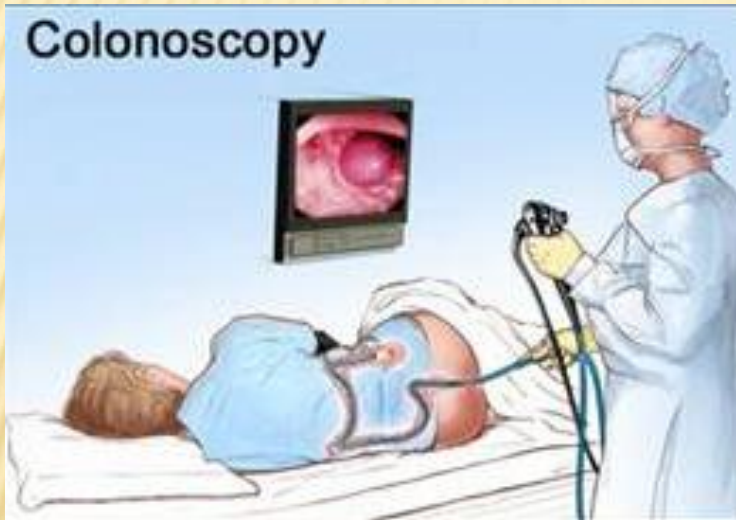


COLONOSCOPY



- A doctor looks inside the rectum and colon for polyps, abnormal areas, or cancer using a **colonoscope**.

COLONOSCOPY



- The **colonoscope** is inserted through the rectum into the colon.
- The patient is first given a sedative to not feel the procedure.

**IF YOU ARE GOING TO GET
A COLONOSCOPY THERE
ARE A FEW THINGS YOU
SHOULD KNOW.**

TALK WITH YOUR DOCTOR ABOUT...

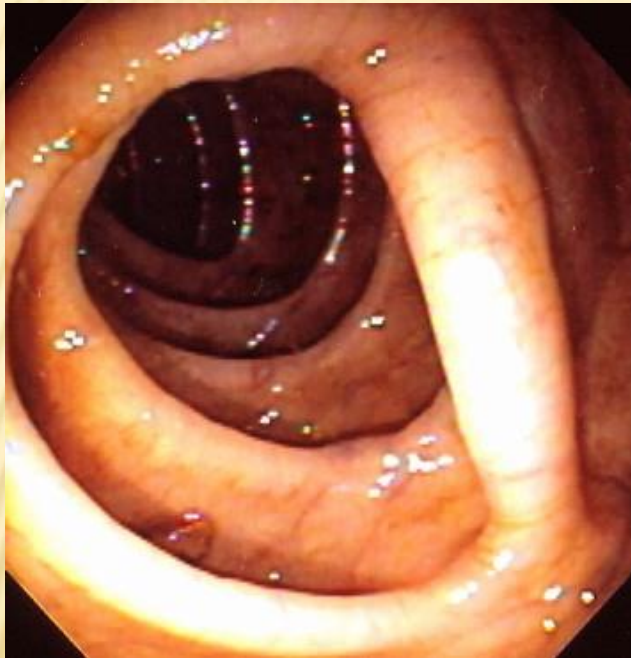
- ✘ “Prep” that you will have to do before a colonoscopy (before you go to doctor’s office).
- ✘ Diet that may need to be followed for the “prep” to work better.



Follow your doctor’s recommendations about what you can and cannot eat before a colonoscopy.

WH

WHY DO I HAVE TO PREP?



- ✘ To clean out waste from the colon.
- ✘ A colon that is not well “prepped” makes it hard for your doctor to see polyps or other abnormalities inside the colon.

It is important to read all prep instructions, follow pre-colonoscopy diet instructions and complete each step.

FINAL STEP TO PREPARE FOR COLONOSCOPY



- ✘ Drink the liquid you got from the pharmacy.
- ✘ Follow the instructions and make sure you drink all of it.

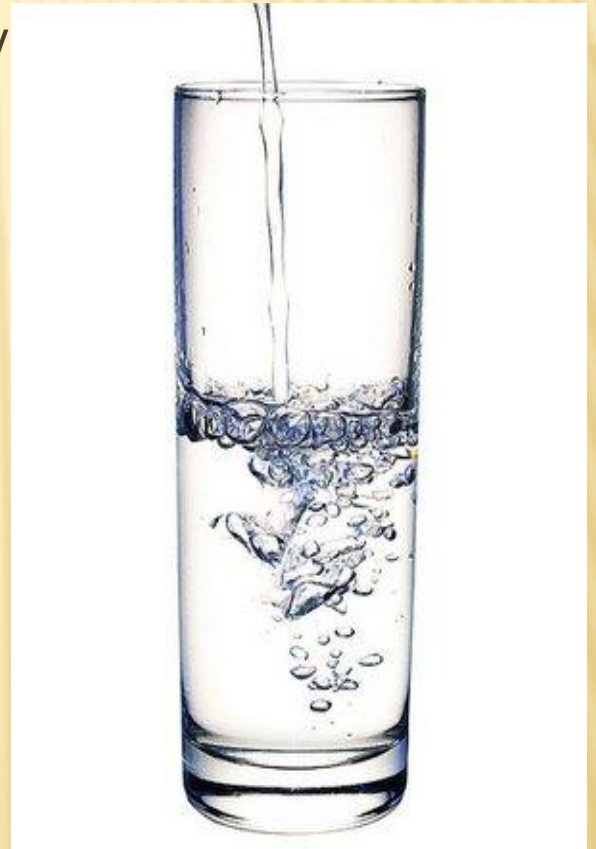
HELPFUL TIPS FOR PREP

- ✘ The prep is meant to give you diarrhea to clean out your colon.
 - + **Stay near a toilet.**
 - + **Use wet wipes and ointments to help soothe after frequent wiping.**
- ✘ Be prepared to spend a lot of time in the bathroom.



DRINK PLENTY OF WATER

- ✘ Colonoscopy prep causes the body to lose a lot of water.
- ✘ If your body does not have the necessary amount of liquids you can get very sick.
- ✘ Drinking water before, during, and after the prep and colonoscopy procedure is very important.
- ✘ Drink at least the amount of fluid required by the prep



HAVE SOMEONE DRIVE YOU HOME



- ✘ Because of the sedatives used during the colonoscopy, you will not be allowed to drive.
- ✘ You must find someone to transport you home.

AFTER PROCEDURE AT HOME



- ✘ Most people report they wanted to have something light to eat and then take a nap.
- ✘ Don't make big plans for after the procedure, you may not feel up to them.

WISDOM FOR BEING HEALTHY

- ✘ Our ancestors had healthy ways of living that helped to protect against colon cancer.
 - + Stayed active
 - + Little to no alcohol drinking
 - + Used tobacco for ceremonial uses
 - + Had healthy body weight (were lean, not overweight)
- ✘ Alice's story – What additional wisdom did Alice share in her story?

Wisdom for Being Healthy

- ✘ Talk with our friends and family about screening
- ✘ Recognize that everyone needs to be aware of the importance of screening
- ✘ Admit that it is sometimes an embarrassing subject to talk about
- ✘ Commit to placing our health above our fears

Because.....

AGE APPROPRIATE CANCER SCREENING SAVES LIVES

Remember.....

- × **Your family needs you**
- × **Your community needs you**